

# Ageing stories from across Europe: Learning from each other



Building Bridges between Senior Citizens and Students in the Elderly Care in the EU Project 2014 - 2015

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"GOAL: Jouni's story"

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# INTRODUCTION

We are happy to bring you a narrative piece that consummates the cycle of our project work during the past two years.

This publication highlights the main points of our common work and its results and best practices for "Building bridges between senior citizens and students in the elderly care in the EU" during the period 2014 - 2015.

This European wide partner network of elderly care professionals from 10 countries promotes values, rights and opportunities for EU senior citizens. Professionals, planners, decision-makers, researches and students of elderly care from working life and educational sector as well as senior citizens and their family members, school children and further local, regional, national and European politicians met each other during conferences through the horizontal theme of the project improving cooperation between education, research and working life. In the focus were the priorities of the European Year of Citizens 2013.

#### Priorities were reflected in detail through three specific conference themes:

1st conference in May 2014 in Päijät-Häme (FI) with "Rehabilitation and maintaining the every-day physical activity of the elderly people"

2nd conference in September 2014 in Talsi (LV) with "Interaction between generations – building bridges between the generations

and 3rd conference in May 2015 in Silesian Voivodeship (PL) "Loneliness and depression of the elderly people"

All the conferences contributed to social cohesion and to attract young people and students to work in elderly care sector as EU suffers under severe youth unemployment. Senior Citizens' participation in the democratic life of the EU was increased in interactive panel discussions with EP election candidates as well as local and regional decision makers, in conference activities and during the Europe Days. Working practices and civic participation must be starting points when building new Europe of elderly care with providers of education without further institutionalization. Network also contributed in this project to the development of future elderly care education. Best practices from participating regions were collected in the format of stories into this publication for implementing.

During these conferences we have taken many actions: expert lessons, visits, panel discussions, small-group discussions and informal talking. By using this unique network and what we all participating sectors and countries represent, we have had a chance to hear and see good working practices, civic participation and new methods, significant for reflecting on present but also future elderly care actions.

Now, this output from participating regions has been brought together into a single publication. The name of it is "Ageing Stories from across Europe: Learning from each other". We expect this publication gives us all a view on what we are seeking for: by telling a story linked to our conference themes, share something valuable and at the same time, build a new way of doing things towards the future.

The thematic stories in this publication differ from each other. In other words, the authors – the partner regions' active representatives – have freely captured and styled fictional or real stories of their own. However, a common feature to every such story is that they all have a clear message, a key point to convey.

#### Let us take an example from Finland:

In a Finnish story you will find a man called Jouni. In fact, this story presented in a comic format underlines several relevant features in the elderly care such as the importance of preventive actions, usefulness of group-based activities, cooperation between the public, private and third (non-profit) sector and this story is a part of the GOAL programme on which you can read further later in this publication.

Resultantly, we have formed this publication with a collection of ageing stories linked to our conference themes and feedback on the actual conferences, which we believe are worth sharing. We hope our publication gives you a pleasant reading experience with engaging content.

Thank you to all those people who have been involved in the editing process!



# **STORIES**

### **CROATIA**

# 1. Building bridges between generations in Zadar

#### **FIRST STORY**

Zadar County, as well as the entire Republic of Croatia, is under a long-term aging process, also evidenced by the population census from 2011. According to this census, the share of population over 65 was 18,5 %. The average old age coefficient (share of persons over 60) in the country is 24,1, while Zadar County with its 25,5 is over the national average because the aging index (ratio of persons over 60 and under 19), which is 115 for the country, is also higher in Zadar County at 117,4.

Unfortunately, the aging index in the County has drastically changed in the last ten years, having previously been only 86. This is due to the fact that in the meantime a large number of elderly citizens registered in rural hinterland (returned refugees) and on the islands (other reasons). The average age in Zadar County was 38,9 ten years ago, while today it is 41,9.



Awareness of the need for additional care for the family and the elderly, as well as the need for better connectivity, reciprocity and solidarity between generations, resulted in the establishment of the ministry responsible for the family, veterans and intergenerational solidarity in 2003.

In 2007, Croatian government adopted the "Programme of Development of Services for Elderly in the System of Intergenerational Solidarity from 2008 to 2011", which is implemented through the following services: home assistance to the elderly and daily care centres for the elderly. It is a formal type of care applied to noninstitutional forms of care to senior citizens so they could stay in their own homes for as long as possible in a safe and high quality environment.

In Zadar County, a total of 4,8% of persons over 65 are given various forms of social care (institutional and noninstitutional), while only 1,8% is institutionally covered.



In addition to the Government's and the County's programmes of intergenerational solidarity, we would like to emphasise the construction of links between generations. The practice in Zadar County shows a good level of involvement of younger generations in the lives of our elderly citizens covered by institutional care. The cooperation of social welfare institutions with local communities, schools, colleges, kindergartens and other institutions provides continuous and effective socialising between generations. Young people are mainly engaged in visits and events, followed by occupational therapy in groups of users, but also in walking, accompanying and talking with the elderly.



Moreover, schools, universities and colleges that educate the medical staff signed agreements with the institutions for elderly care. Based on these agreements, they send their students to take practical lessons in these institutions. High school and university students, under the supervision of their mentors, have their first professional experiences and practical work in these institutions, which is of great importance for both themselves and the institutions. Users gladly accept physiotherapists and medical technicians for walks, exercise, massage and even just for conversations in which they can fully be devoted.



The level of involvement of young people in the lives of the elderly who are outside of institutional care has been growing steadily, which is for the most part thanks to Volunteering Centre Zadar that directs and coordinates the volunteers and connects them with citizens in need, who are very often elderly and lonely people.

#### **SECOND STORY**

This is a story about cooperation with a local music band. Local pop band Zaratino released a new song in 2013 called "She Brought It All". Since it was necessary to make a video for the song, their friends, and now even our own, imagined to show the love story of two people through different ages. They asked our users to be this loving couple in their old age and our users Zorka and Slavko accepted with great interest. Recording of the video passed in excellent mood, our "actors" were very professional and even some new friendships were made. Since then, every year on Valentine's day, despite their now numerous engagements and commitments, Zaratino band voluntarily play a concert, a great show for our users and our other guests, the users of other institutions of social care in the County. This is now a true friendship that connects and fulfils our users, as well as our friends from Zaratino band. We couldn't even compare who among us is happier because of this. We think this is a wonderful example of cooperation, understanding and feelings between generations brought together although separated by so many years of age.

You can watch the following video: <a href="https://www.youtube.com/watch?v=weObE\_cqVjE">https://www.youtube.com/watch?v=weObE\_cqVjE</a>

And here are some of the photographs from this year's concert:







# 2. Building bridges within a generation in Zadar

#### LIFE STORY I: LJUBICA JURAVIĆ

Interviewer: Good morning Ljubica. To begin, tell us how old you are?

**Ljubica Juravić:** Good morning. I'm going to be a hundred and one in two months, more precisely on the 25th of August 2015.

**I:** Shall we celebrate?

L.J: Ha ha ha, I do not know, we'll see.

**I:** When did you start living here in the Home for the elderly, do you remember?

L.J: It was the 15th of April 2013. It will soon be two years and two months ago.

I: And how do you feel here?

**L.J:** It is nice for me, the only way it can be. Although, the heart yearns for home from time to time.

I: Who did you live with before you came to the Home?

**L.J:** I've lived a long life, this is already my fifth home. My two children and my husband died a long time ago. I was only 30 years old when I lost them. After that, I lived with my stepson. He was wonderful and he took great care of me. Since I was 80, he did not let me work alone or go somewhere unaccompanied. Now it's been 10 years since he died. After his death, I lived alone in Ždrelac (a small village on the island of Pašman), mostly on my own, and his children would come and visit me.

**I:** Did anyone else visit you in your home? I remember that one nurse called for you.

**L.J:** Yes, Vida was her name. She would visit me every month and every time she came she would find me alone and asked how I was. One day I told her that I submitted a request for the Home for the elderly and that I hoped that they will call me soon. And then you called me.

I: Did you have any other help besides the nurse?

**LJ:** Yes, every Friday a woman would come. She would, for example, help those who cannot do anything alone, or bring necessities from the store, wash something, get firewood, etc.

**I:** Who is visiting you now in the Home?

**L.J:** My nephews, mostly Goran. I first went into his house when he was one year old. We have a strong connection and he loves me, too.

**I:** What are the advantages of living in the Home compared with living at your own home?

**L.J:** It's better here. I do not need to think of anything, everything is clean, cooked, we have nurses and a doctor. We can feel safe here.

**I:** Can you tell us how we could live as long as you?

**L.J:** Ha ha ha. I had good health. When I was young, we had bees and we could not sell all the honey, so we had to use it as food and beverage. Maybe this is a secret, I do not know. Everything else was scarce. And I accepted all that life brought me. I relied that He will guide me through a lot of bad things I experienced. You must accept life.

#### LIFE STORY II: IRMA DADIĆ

Interviewer: Good afternoon Aunt Irma. Can you tell us how old you are?

Irma Dadić: I entered my 95th year of life this 7th of April 2015.

I: Can you tell us what we can do to reach those years?

**I.D:** A person should be sober-minded, love people, respect everyone and treat everyone the same, regardless of their outside characteristics. All people should be accepted. That's my opinion and it makes me happy and fulfilled. I have a lot of people around me, my family and my friends. For me, love is the law.

I: Who did you live with before you came to the Home?

**I.D:** I've lived alone, baking cakes, cooking, etc. My family would often visit me. I really love to pray and the church was near my home so every day I went to church. You also meet people there, good people.

**I:** You came here because of health reasons, didn't you?

**I.D:** Yes, one morning when I came home from an early morning holy mass, I felt ill and collapsed in front of my apartment. Ambulance came, and took me to the hospital because I actually had a heart attack. After that I came here because it was not safe for me to live alone. Yes, it was difficult to accept that I had to leave my home, but it had to be so.

**I:** How do you feel now in the Home?

I.D: Great.

**I:** Could you specify what the advantages of living in an institution are?

**I.D:** You don't have to be old to be here. I know younger people here because they are in need of assistance. Kindness of staff is the main advantage of living here, it is always love that gives the advantage and not only for the younger generations. And I'm very happy here because I see that everyone is treated equally fine by nurses and other staff. The food is also an advantage as I would probably only eat beans at home as opposed to great variety here.

I: When you lived at home did you have nurses come around, any sort of formal care?

**I.D:** No, I lived by myself, but I had strong family support, and I have it even now. For my family it is natural to help each other, to love. I cooked for myself what I wanted, I really liked it at home as well, but I couldn't cope anymore.



Ljubica and Irma – two stories, one generation

**I:** Well, we know that you also publish books. Do you still write?

**I.D:** Let me tell you, when I was little, I was a bit mischievous, and now I'm even more so, ha ha ha. I think I was born with the rhyme. I could create a rhyme, a poem, from everything; from what made me happy and from what made me sad. I wrote about everything. Even last year I published a collection of poems called "My final poems II". It is an unexpected sequel to my last poem collection.

**I:** Can we expect yet another sequel?

I.D: Of course. Ha ha ha, I never give up.

### CZECH REPUBLIC

# Social services for the elderly Olomouc, funded organisation: Centre of daily services helps people with memory disorders to remain in their homes as long as possible

It was year 2010. In summer that year our current user applied for the provision of our social services. She was a nicely dressed, pleasant, carefree lady at first glance. After a longer interview with this applicant the social worker learned that symptoms of failing memory had begun to appear. Unexpected departures from home, bad cooking methods, unnecessary purchases in the shop. Her daughter told us that her mother was very much looking forward to retirement, because she would have time for her hobbies – she trained actively, learned German, took care of the garden.

However, the deteriorating dementia led to a reduction in self-sufficiency and worsening orientation in everyday life of the user. Although the family wanted to take care of their mother, they wouldn't manage the strenuous and exhausting care alone without loss of employment. For this reason, the user accompanied by her daughter asked for the provision of services in the centre of daily services. The family enthusiastically welcomed her choice mainly because in the centre of daily services there is the possibility of all-day care through the day stay. Since the summer of 2010 the services have been provided to her.

At the beginning of the services provision the user walked independently, communicated by repeating words she heard around and used facial muscles. She didn't talk much though, it was up to the worker to recognise what the lady needed and how she felt. The aim was to preserve the existing capabilities so the workers of the daily service centre supported the user in communication and other everyday activities. She liked singing, supplementing bywords, embroidering, browsing through magazines. She managed to eat by herself and move.

The ability to orient herself deteriorated gradually, and the user needed more assistance of another person. As the disease progressed, the gait, facial expression and self-care worsened. The workers had been practicing the gait with the user daily and encourage her so that any day of the stay in the centre of daily services would not only be a day of sitting on a wheelchair.

To improve the quality of services the centre of daily services has acquired a "decubitus circle" for sitting as a prevention of decubitus development and for better comfort when sitting in a chair. At present the user needs intensive verbal and physical support and help of the daily centre worker in all daily acts. In her facial expression it is almost impossible to recognise emotions, the user communicates minimally. She does not speak, does not respond. However, she still manages to sing a song and therefore workers of the daily service centre often sing with her.

There are many activities at the centre of daily services. Fine motor skills are practiced not only with this user. Workers do hand massage and a new method of "balling" is being established here. We must mention also the newly introduced sensory therapy called "Snoezelen". Workers do exercise with the users daily, thus supporting not only physical fitness, but also their mental level. They reminiscence, go for walks, play social games, chat with each other. As part of the programme there are balls, trips, barbecues and meetings across generations held in the centre of daily services.

Every day has a meaning and we feel that the user is well with us and we are moved by gratitude of the family who can continue to experience more moments with her beloved ones. We are not immortal, and as the saying goes: "Diseases do not walk through the mountains, but for the people", we expect that and we are glad when our users can experience and enjoy time in a peaceful and stimulating environment of their peers and do not end prematurely in residential facilities. Thanks to the daily service centre workers' care, the users can remain surrounded by their loved ones in their homes.

# 2. Social services for the elderly Olomouc, funded organisation: An example of good practice in sheltered housing

#### Mr. Jaroslav

Mr. Jaroslav is permanently confined to an electric wheelchair but manages some basic operations of care of his person, moves alone from the wheelchair to a bed, to the toilet and vice versa, he is able to eat by himself, move indoors and outdoors. However, some operations he manages only with the help of another person.

For several years Mr. Jaroslav lived in his sister's house in which he occupied one room, shared the kitchen and bathroom. Access to the house and the house itself was hardly possible by wheelchair and his sister-in-law after his brother's death had barely managed the care which Mr. Jaroslav, due to his disability, needed and needs until these days. Care service or other field service was not accessible in the town where the house was located.

#### **New home**

Mr. Jaroslav has been living in the sheltered housing for two years now. He moved into a residential unit with a balcony, kitchenette and bathroom on the ground floor of the sheltered housing. Moving around the residential unit is made possible to him by certain wheelchair modifications, care of his hygiene is allowed by wheelchair accessible bathroom with shower and handrails, access ramp on the side of the building allows him to exit the building on the wheelchair.

At the beginning, a lot of time was devoted to familiarisation with the new environment, with employees, with the services provided, arranging personal matters and documents and especially to the independent way of life in sheltered housing.

Mr. Jaroslav adapted quickly and the privacy and tranquility which he has found in a separate residential unit, he welcomed with joy.

#### New skills

From the beginning, Mr. Jaroslav is looked after by key social services worker who helps him dress and put on shoes, helps with hygiene, preparation of meals, cleaning, etc.

Thanks to barrier-free environment Mr. Jaroslav has gradually learned to do certain acts by himself, for example to use sanitary facilities, basic hygiene, have lunch by himself in the dining room, shopping and management of some personal matters.

In addition to the staff, Mr. Jaroslav is helped by the assistant of social care and a volunteer from the "Maltese Help" who attend him and accompany him on his walks and visits to social events.

#### **New activities**

Mr. Jaroslav is a member of the "Wheelchair trend", has friends in Olomouc with whom he goes for walks and on trips, he loves music and singing, he is interested in history, reads a lot and watches television programmes with a favourite theme. He also owns a computer on which he is trying to improve his knowledge, which he then uses for example in the memory training club where he excels with his knowledge.

#### **New experiences**

Olomouc is not only for Mr. Jaroslav a city full of historical and cultural monuments, there is a theatre, a town hall with the second oldest astronomical clock in the Czech Republic, beautiful parks, the choice of social events and activities. New experiences can happen every day and Mr. Jaroslav searches for them gladly, visits monuments, pubs and he has also discovered the new cheese Confectioner's.

#### Conclusion

Despite his physical handicap Mr. Jaroslav lives an active and rewarding life, it is important that he uses only the services which he really cannot handle himself and the environment of sheltered living allows him this way of life.

# Nursing home Libina: an example of good practice – ceramics workshop

In the Nursing home Libina, of the funded organisation of the Olomouc region, senior activation through an activation programme took place in the past, where seniors regularly practiced handicrafts. For example, they created small ornaments and souvenirs, worked with paper, fabric and wire. Also they played board games, attended a course of cooking, reading or TV club. However, after years the interest of users in some activities waned and the activation programme did not fulfill their needs and expectations any more. When searching for a suitable solution how to fill the leisure time of the seniors and also to bring the family members and children from the local kindergarten to participate in joint activities, we thought of building up a ceramics workshop. Clay is an excellent material for retaining the existing users' abilities, when we can use the manual processing of the clay by its squeezing, molding, pouring and printing.

Generally, the work with clay develops physical abilities and skills of elderly people (fine motor skills), replaces verbal communication, develops creativity and imagination, helps to compensate impaired senses and for seniors with dementia allows specific physical perception. Activities with clay further reinforce confidence, reduce aggression and help in establishing contact.

Suitable spaces for building the ceramics workshop we found in an unused wooden house, located in the beautiful garden of our nursing home. For this purpose, we repaired it with our own hands (we made outdoor painting, exchanged entrance doors, made new flooring and electrification, etc.). We received the necessary funds for the ceramic workshop equipment from sponsorships through a public collection called "We make the seniors' wishes come true" where our project was selected for funding. From this raised funds we had the ceramics workshop professionally equipped with kiln, potter's wheel, pottery clay, glazes, and modeling tools. We have expanded our team of employees by the activation employee who has led a professional ceramic shop for 10 years and we started to make ceramics with our users.

After initial mistrust from the users, more and more of them gradually began to be interested in creative work with clay and their interest continues to present. In autumn last year we opened the ceramic workshop (one day a week) also to general public and we immediately noticed the interest of the village residents and their family members who wanted to create ceramic products together with our users. The workshop is also attended by children from a nearby nursery and primary schools and together with our users they engage in creative activities and help us create products, not only from ceramics.

This follows a long tradition of meetings of our seniors with children from kindergarten Libina at which they create Easter products together (Easter eggs, bunnies, lambs, sweets, etc.). By meaningful spare time spending of our users we manage to support their family relationships and intergenerational interaction.

The finished ceramic products are offered at fairs, open days and so on. Acquired donations are used to re-purchase materials and other equipment of the ceramic workshop. Thus, we ensure sustainability of the ceramic workshop for the following years. In addition, our users are actively involved in the promotion and sale of their products and in this way they further develop their skills and communication abilities.

# 4. Home for seniors Jesenec, funded organisation: Cooperation with local kindergarten

A new user has come into our home for seniors. At first, she was hardly getting used to her new home, feeling lonely, and missing her grandchildren who could no longer visit her so often.

When reminiscing over photos of her grandchildren, an idea in our worker's mind arose. Through an interview, the user has been motivated to come and watch the performance of children from the local kindergarten. This had been preceded by an agreement with local teachers whether they would regularly come with their children to our home with their performance to amuse our seniors.

A good cooperation has been established – the performances have always been thematic (wish for Mother's Day, Christmas show with carol, etc.). The new user has been very fond of these performances and she always looks forward to the next one. Every time the children prepare for our users a gift – for example a picture, a picked meadow flower, etc.

The result of this cooperation is that the user doesn't feel so lonely any more, because sometimes her own grandchildren come and in the meantime when she is waiting for their visit, she is looking forward to the performance of children from the kindergarten who remind her of her own grandchildren.



In addition, the user has been motivated to cooperate in art and handicraft workshops because she wants to give the children something in return – and thus she creates little things in this workshop or contributes with something small into a package which children are given as a thank you for their performance. The user has been returned the meaning of life, optimism and especially the smile on her face.

# Home for seniors Tovačov, funded organisation:The Bridge

Building bridges between generations – cooperation between the generations, joint work, joint training, and also the joint care of the sick and even the dying. Yet, in many families due to separation, alienation, high workload, it is indeed impossible. However, when actual bridges are built, at least in some cases, such as at a home for the elderly, we can say, it is a story of success.

Our Home for the elderly is not an uncomfortable place to locate your sick relatives. Rather, it is a place of *life* – senior users sharing moments with their own family members, with their own grandchildren, but also with children from nursery schools, art schools, primary and secondary schools. We enrich each other: children come to us to visit our Christmas and Easter exhibitions, or they play at summer garden parties, on the occasion of Easter, Christmas, Mother's Day and other occasions. They present their knowledge of history, or they portray the elderly and participate in the decoration of the corridors. Our seniors then show children the beauty and charm of old age, when they are telling for long hours their life stories and experiences of youth – from a completely different world.

The story I want to share with you is very serious, yet beautiful and valuable. An integral part of life is also the moment of dying. Likewise, it is an integral part of the social services provided. In moments when the life of seniors is coming to an end, we are always giving a space or time to accompany his or her family. They stay with their loved ones throughout their departure. Very often a senior has been accompanied by his son or daughter, sometimes by their adult grandson or granddaughter. They can use a guest room where they can sit quietly and relax or stay overnight. They can use our chapel for prayer and silence. Or they may stay in a user's room for all times.

Mrs. Emilie was in our Home very shortly. Until she could not move, she lived with her family in a house in the village. After a serious accident by 87 years of age, she came to our Home. Very soon after her arrival there was such a serious deterioration in her health that we had to ask her family for guidance. All whom she loved came. Her old son was alternated by her daughter-in-law or by her two adult granddaughters and all great-grandchildren (5-16 years old). In that time, when Mrs. Emilie had not been able to speak, her granddaughter and her roommate prayed together for her, her daughter-in-law sang to her for long hours and her great-grandchildren read aloud letters that Mrs. Emilie wrote with her husband in the last year of the World War II. The smallest one, a five-year-old great-grandson, was holding her hand at times.

The staff changed all of its usual activities and care-giving arrangements so that the family could spend the last moments with her relatives in privacy. They could express her their love and appreciation for shared moments of life through her last breaths. The small children should naturally participate in care of their dying great-grandmother.

And why do I share this story with you? Because our carers helped Mrs. Emilie cross the last Bridge. For us, carers, it is very important to see that it is possible in a Home for the elderly to create conditions for accompanying the dying and also that it is possible to give participation in care to young children too. Also, we have learned that through common accompaniment – together with the staff and the user's family – the dying can have a deep, sense of unification until their very end.

# Centre for social services Prostějov, funded organisation:Recovery and successful book about memories

Mr. K was a user of the Centre for social services Prostějov (Home for the elderly social service), of the funded organisation, from April 2011. He came here after hospitalisation in Prostějov hospital as a person sorely dependent on the assistance of another person. He had very impaired mobility and needed assistance in hygiene, dressing, meals, etc.

However, with the support of direct care workers and a tremendous effort of Mr. K himself, his overall condition began to improve. Within the rehabilitative care he trained hard, he was given bubble baths, massages, and magnetic therapy. With the help of trained healthcare assistants he first walked with a go-cart, then with two French sticks and his gait gradually improved so much that he was able to walk without mobility aid again. He also improved his ability to take care of himself independently. Mr. K was very happy to participate in motivating leisure programmes which we offer and provide in our Centre – memory exercises, individual and group reminiscing, trips, competitions, intergenerational meetings, etc.

Within the reminiscence therapy, Mr. K contributed with memories from his life in the book "Fragments of life memories of the Centre for social services Prostějov's users". The stories are as different as their owners – some are short, some are long, some are funny, some are sad. But they are all interesting and touching and show their readers the way of life in the past and many important events of the 20th century which are reflected even today. Workers of the Centre wrote down the memories as the users narrated them and they organised the stories into a book. Then the workers submitted this extraordinary and successful work to the first year of the competition "Prize of the Government Council for Seniors and Population Ageing 2013".

To our great joy, the book was awarded the third place and Mr. K as a representative of all its authors received the award at the ceremony of the competition in Prague. The President of the Olomouc Region and the Deputy Governor for social affairs thanked all these successful participants. The success motivated Mr. K to engage in other activities too. With the help of motivating workers and volunteers he worked on writing his life story as well.

A great help during his work was also his computer he learned to work with and which he often used to communicate with his friends. The overall condition of Mr. K improved so much that he no longer needed to use residential social services. He ended his stay in the home for the elderly in May 2014 and went to live in a nursing home instead.



Anyhow, in March 2015, we received the sad news that Mr. K. died at the age of 90.

# **FINLAND**

# 1. Good Aging in Lahti Region (GOAL)

GOAL is a research and development programme which aims to improve physical and psychosocial well-being and to promote healthy ageing among citizens in the Lahti region between years 2002 and 2012. The Lahti region, with 206.000 inhabitants, lies about 100 kilometres north of Helsinki, the capital city of Finland.

The GOAL study is based on a regionally representative sample from three 5-year cohorts (born in 1946–50, 1936–40, and 1926–30), which reflect the transition from pre-retirement age to "early" old age. A stratified random sample (of 4272 individuals classified according to sex, age group and municipality) were drawn from the population registry. Data were collected in four study waves (2002, 2005, 2008 and 2012).

GOAL data can help to create a new understanding of healthy ageing; the role of different factors, their interactions and how they affect health preservation and disease development. Multidisciplinary datasets allow researchers to combine demographic, social and behavioural data with biological and health assessment measures. This can reveal more about the social determinants behind common diseases and disabilities.

GOAL collaborating partners are University of Helsinki (Palmenia Centre for Continuing Education, Department of Social Research and Department of Food and Environmental Sciences), National Institute for Health and Welfare, Lahti University of Applied Sciences and Joint Authority for Päijät-Häme Social and Health Care. The main sources of funding have been the Joint Authority for Päijät-Häme Social and Health Care and the European Union.

# A cooperative model to evaluate and support the functional capability of the elderly; in co-operation with the public sector and the third sector (non-profit organisations)

In addition to a 10-year cohort study we have had different development actions or interventions in the GOAL project. We would like to tell you more about our latest community-based intervention which started in 2008. Also being the framework for our following comic story (Jouni's).

In this intervention we combined various approaches for promoting active and healthy ageing among aged citizens. We cooperated with the primary healthcare setting (local healthcare centres) and non-profit organisations. All the taken actions targeted several factors of holistic well-being: physical activity, healthy eating and social contacts.

The basic aim was to create a cooperative model to evaluate and support the functional capability of the elderly. One of the key words is *preventive*: to identify persons who are in a risk of losing their functional capacity at an early stage and to offer them services which will promote their functional capacity. The identification was done in the local healthcare centre and the group-based guidance and intervention took place in the non-profit organisations.

This programme was carried out in one urban municipality (Lahti) and four rural ones (Sysmä, Hartola, Pukkila and Myrskylä) in Päijät-Häme region in Finland. Four different service centres of the third sector (non-profit organisations) were involved in the programme together with local healthcare centres.

Public health nurses identified amongst health centre user individuals who were not yet receiving home care and who had problems with movement and taking care of daily activities. An extensive evaluation of these persons' functional capability was carried out: physical performance, cognitive state, emotional status (depression), alcohol use and nutrition status were measured.

The study setting included two arms: 1) *group-based*, involving physical exercising and group discussion with individual goal setting and 2) *information group*, as a routine care control group. There were three measurement points for the participants: baseline, 3 months and 15 months after the baseline. Participants had to be at least 70 years old. At the baseline, there were 176 persons participating in the study. Most of them were women and the mean age was 79 years old.

Group guidance included physical exercise programme and group discussion using motivational behavioural coaching towards individually tailored goals. In the groups they discussed about physical activity, nutrition and social networks. Groups met twice a week, two hours each time (an hour for physical exercise and another for group discussion). There were 10 persons in each group. The intervention lasted 12 weeks and all the groups were carried out during the years 2010 and 2011.

The participants were extremely satisfied with the intervention programme which was planned together with an experienced group of facilitators from the participating non-profit organisations.

The study gave evidence that even a short, 12-week group intervention can promote physical well-being in the short term and produce long-lasting improvements in the physical performance even in the last measurement point (15 months from the baseline).

The group intervention was found to be more effective than health information alone (control group without intervention actions). These results encourage investing further in the promotion of people's functional capability in public healthcare system.



### 2. GOAL: Jouni's story

























# 3. Rehabilitation and maintaining everyday physical activity of elderly people

Student assistants organising the seminar "Rehabilitation and maintaining everyday physical activity of elderly people" together with hosts

Social and health students created the workshop "Rehabilitation and maintaining everyday physical activity of elderly people" with conference participants in Lahti on 14th of May 2014. They practically presented the assessment and measurements done to the research participants of the GOAL research to the conference audience, and they were able to try out measurement activities themselves. The students also organised a demonstration of a simulational learning environment and planned counselled visits to elderly service home units for the conference participants.





The assessment offered students of social and healthcare a possibility for practical training in the research organisation by performing as research assistants. The students were educated to take care of making and collecting the questionnaires, measure blood pressure and waist circumference, as well as to take measurements of functional capacity. They set up the measurement clinics in the measurement places, conducted the questionnaire survey and the measurements for the participants, four times during ten years. Practical training as research assistant was included in the curriculum and teachers guided them during the assessments.

The research produced many kinds of results and the follow-up reports were very interesting to students as they took part in the data collection. The follow-up material has been very useful for them, and the reports have been used as a source material in their thesis and other studies.

The students gained many competences in authentic learning environments and learned to cope with different kinds of participants, and to understand their different counselling requirements. They also learned to fulfill the research requirements in data collection. Their understanding of the research process deepened during the participation in the real research process in cooperation with the research organisation.

During the conference "Rehabilitation and maintaining everyday physical activity of elderly people" the nursing and social service students also organised guided tours around the modern elderly care service housing units in the area. In the service housing units the students took care of all the practical arrangements and organised the programme together with the elderly. The aim of the visits was not only to explore the environment, but also what is everyday life like in a modern service housing unit.

At the faculty of Social and Health Care, students presented the new simulation learning environment to the conference participants and demonstrated two elderly care simulational scenarios. Students were happy to take the lead to introduce the simulational learning method and learning environment, which is also used in teaching the rehabilitative care of the elderly people.

Students' conference participation as organisers was a valuable and irreplaceable learning experience. Students were allowed to work in the international conference, and they were given responsibility for the practical arrangements, but they also had multi-professional working and learning experience with other students and experts. The content of the conference was also professionally rewarding for them.





# **GERMANY**

# 1. A letter from Germany

Dear Peter,

as I promised you, I write you from each country I visit here in Europe. Since one week ago, I have been visiting Germany. More precisely, the southern part of Germany. First I visited Stuttgart and then the Rems-Murr-County nearby. As you know it is my job to find out how the different countries in Europe deal with elderly people in general, how the healthcare systems are organised and so on. I suppose you hardly can imagine how complicated the German healthcare and social system is. Just one example: In Austria there is only one "Book of social law", in Germany there are twelve! Not to mention the names of laws. In 2008 they passed a law which is called "Pflegeweiterentwicklungsgesetz" which means something like "Law of continuous development of care" and should promote better support of seniors and their families. One of the major improvements of this law are the so called "Pflegestützpunkte". Those "Pflegestützpunkte" are in fact counselling agencies which are financed by the health insurance, the care insurance and the county.

I visited one of the 50 "Pflegestützpunkte" in the country of Baden-Württemberg yesterday, in Waiblingen (capital city of the Rems-Murr-County). It is located in the county-government building where I met three ladies, who work at the "Pflegestützpunkt". They are well educated in healthcare, specialising in social work and also in case and care management, so that they are able to answer (almost) every question about the complicated healthcare and social system in Germany, the care institutions and agencies in the Rems-Murr-County and to find a solution which really fits for the person who needs care and their family. If there does not exist the right kind of help, they have to create a unique and individual kind of care solution by combining different kinds of services, create new helping networks and so on.

While I am writing you this letter I think that their main job is to make things easy or at least easier for people with healthcare problems. Everybody can call the three ladies from the "Pflegestützpunkt" and ask for help for themselves or their family members. The counselling is free of cost. Most of the time the three ladies have to deal with people with beginning or increasing dementia, persons who need help after a stroke, seniors who – for example after a long-term stay in hospital – cannot live alone and without care or help in their own homes any longer.

Like in all the other countries in Europe I visited before (and also in our country) the occurring problems when people get older or very old are the quite the same. One of the three ladies from the "Pflegestützpunkt" in Waiblingen told me this touching story:

There was a middle-aged man who asked for advice concerning his father living together with him and his family. During the last months his father's behavior changed. He forgot a lot of things, said he was missing money and accused the family members of stealing his money. The atmosphere at home became worse. His father, who always was a friendly, reliable and caring person, became loud and even aggressive towards his daughter-in-law and the two children who spent more time at home as he worked full-time. Sometimes, when he came home he had to calm down his father first and then his wife. He knew something had to change, the family could not go on like this. So it was almost a relief when the family doctor diagnosed dementia. Now he knew why his father's behavior changed and that he and his family needed support.

The lady working at the "Pflegestützpunkt" recommended a day centre where his father could spend time together with other people and the family life could relax again. The problem was that the only free place she found was in a day centre 18 kilometres away from the community the family lived and the shuttle bus from the day centre only picked up persons to a maximum distance of 10 kilometres.

The son offered to take his father to a meeting point within the 10 kilometres of distance on the way to work and pick him up in the evening after work. So things got started. After four weeks he called the lady from the "Pflegestützpunkt" and told her this amazing story:

His father was now convinced that he had a "new job". As in former times, he went to "work" every day and as before he did his work in a very reliable manner. His "new job" was to take care of an old lady using a wheelchair. Because she couldn't help herself, he had to go for a little walk with her, talk to her, bring her things she needed and so on. Also, his father's willingness to help spread out to all the other people at his "new job". So one evening, when the son wanted to pick his father up at the meeting point, there was also an old lady waiting for a family member. His father then said: "Let's wait until her daughter comes, you know I can't leave her alone here, because she's one of us".

This is one of the encouraging stories which I heard during my traveling in Europe. I think it is important to tell these encouraging stories about ageing. It shows that life can also be worth living when you are old, when you need help or when you are "suffering" from Alzheimer's disease. It depends on us, to ensure a good quality of living for people with dementia as well, because they are part of our society.

The ladies from the "Pflegestützpunkt" in Waiblingen are doing a great job. This has also been shown in the recently published evaluation report. There is still a lot of work to be done in an ageing society and therefore there are plans to expand the teams working in the "Pflegestützpunkte" throughout Germany. So finally, the Germans seem to have had a good idea despite this extremely complicated healthcare and social system, which I myself haven't fully understood yet...

Best regards from Germany

Paul

# **LATVIA**

# 1. Snapshots of interaction between generations in Talsi

Youth and senior cooperation in our town Talsi is at a high level. We already have broken stereotypes about young people who don't want to spend time with elderly people or elderly people who don't want spend time with young people. Just look at these pictures.

Here youngsters and seniors are dancing together and playing games. We are sharing happiness and we want to continue doing that.

One of the most important things is to share *knowledge*. In these pictures you can see a lady who is great at restoring chairs and youngsters who restored all chairs of Talsi youth centre with her help.





This process took about one full week but the lady with a smile on her face came and taught the youngsters how to do that.

To share a smile...

Last Christmas Talsi youth organisation "TAS.ES" made small presents to lonely people who live in the nursing home "Lauciene". They by themselves went to the nursing home and gave all of those presents to the seniors who live there. They also arranged a concert for them. All of the little children who danced and singed at the concert indeed made them smile.

To share a sport...

Youngsters helped as judges in a senior sport-games event.





To share *music*...

A song contest involving youngsters and seniors was held.





# This is not where we would stop. Youngsters and seniors have lots of new ideas how to continue our cooperation and here are some of them:

- Seniors could teach youngsters Nordic walking
- Youngsters could teach seniors how to use modern technologies (computer, mobile phones etc.)
- Seniors could teach youngsters some good old recipes
- · Youngsters and seniors could host a party together
- Seniors could teach youngsters some chess tricks.

### **LITHUANIA**

# 1. The Story about Antanas S. from Kaunas

Antanas S. was born in Ukmergės region of Lithuania in 1932. Graduated from Kaunas Technical School, he then started working as an engineer. Overall he was an active man with his friends and in life in general.

However, from age 50, he developed a mental problem. Ever since, the memory shrunk every year. Antanas sometimes couldn't find himself home and at the evening he could end up sleeping at another person's nearby home. All neighbours got to know about his problem and tried to help him.

15 years ago was the start of his treatment in the Clinical hospital of Kaunas University. 10 years ago was the start of his living in a nursing home.

One night, at the nursing home, Antanas dismantled some door locks and a cupboard even without instruments. After such happening, he was transferred to the Elderly Alzheimer care home "Amžiaus žiedas" and has been living there for about 6 years. Anyhow, the memory and other body functions of his kept on slowing down every year: he wouldn't want to walk, he wouldn't want to eat with help from anyone but from his wife. Anyhow, she could only come every second day to see him. And so, it has been a real challenge to lessen his stubbornness...

He then also started to spell out phrases in Russian, Polish, or German – languages that according to his wife, he didn't speak before.

Counting from now, his Alzheimer's disease diagnosis was given 20 years ago. In any case, many attempts to alleviate his disease have been made so far.

### **POLAND**

# 1. Recipe for active aging

An interview of Adam Kowalski<sup>1</sup> – for the local newspaper journalist "Active locally" with Barbara Nowak - an active senior member and a laureate of the award "Volunteer of 2014" and Maria Luty – a daughter of Barbara.

**Adam Kowalski:** I would like to congratulate you for the award. You won the title of "Volunteer of 2014". How can you describe the daily activities as a volunteer?

**Barbara Nowak:** Thank you very much. I am a volunteer at the non-governmental organisation "Stop Diabetes!". I participate in the organisation of preventive actions that are intended to encourage people to do regular testing. We inform people about what diabetes is and how we can protect ourselves from it. We also support people who are ill. I know how important these activities are.

A.K.: Why did you become a volunteer?

**B.N.:** Unfortunately, the main reason is my own illness. Five years ago I found out that I had diabetes. It was a big shock for me and my whole family. At the beginning it was hard – I locked myself at home and didn't want to see anyone. It hurt me that I would be a burden to my family, but it was them who helped me the most in the difficult moments.

**Maria Luty:** It's true. My mother suffered much and for a long time could not come to terms with the disease and related constraints. A lot of people think that the older are just sick. I was always very upset and did not let her think that way. It took a while, but I changed her attitude. The most important things were patience and a conversation. Despite the age difference, understanding for other people is possible.

**B.N.:** I changed my whole lifestyle – healthy diet, light exercise, etc., and I immediately felt better. I accepted the disease and the fact that I'm getting old. After all, people grow old for the whole life – from an early age. Each period of life has its pros and cons. I decided to work for others, and so I became a volunteer.

A.K: How do you feel in the new role?

**B.N.:** Volunteering is a great solution for seniors, although at first I was a bit confused. Most volunteers are young, and I was afraid that we wouldn't understand each other. My fears proved to be unnecessary.

**M.L.:** Mom quickly settled into the new place, established new relationships and with great dedication involved in the work of the organisation. Young people really appreciated it, because we were working together in a very important issue. As an older person, with huge life experience, I was a mine of information for them.

**B.N.:** Today, I'm glad I'm not alone. I have a family and new friends. I feel needed, and I know how much I have achieved as a volunteer. I am convinced that it is never too late to change life. The key is the attitude and take advantage of opportunities.

A.K: I see that you are full of optimism. You could be an example for many seniors...

<sup>&</sup>lt;sup>1</sup> The interview is fictitious

**M.L.:** ... and for young people. Mom showed me that I should not be afraid of getting old. It's a special time in your life where you can look at life from a new perspective. When I look at my mom it is easier for me to imagine myself in a few years. I know that it is very important to be well prepared for being a senior. Take care of your health, relationships, have a hobby.

**A.K:** Being a volunteer, taking care of good relationships, fostering a positive attitude – do you have another prescription for a happy old age?

**B.N.:** The most important is the family and friends who will support and help you in difficult times. They should know that the worst for seniors are loneliness, depression, and other diseases. But this is not a reason to treat us like children. My daughter has always respected and let me decide for myself.

**M.L.:** Of course, seniors shouldn't be overly exposed and we can't expect too much from them while they are in worse shape. But I think that seniors should always be encouraged to be active, this will give them a sense that they are needed. It is important to take care of them and together build bridges between the generations.

A.K: Thank you for the interview.

### **ROMANIA**

# 1. Needs and problems of the aged persons in rural versus urban milieu

In 2014, a group of students of the third year from the Faculty of Sociology and Social Assistance of the Babes-Bolyai University in Cluj-Napoca, made a study concerning the needs and problems of the aged persons in rural and urban milieu. Their purpose was to improve the quality of life of the aged persons by offering the possibility to participate in programmes created for them, getting in this way a sentiment of usefulness and perhaps a better perspective of their own life. At the same time, they wanted to see the similarities and the differences for the two categories of aged persons.

#### The problems and needs there found were:

- 1. The solitude, both in rural and in urban milieu
- 2. Not a very good health condition in both milieus
- 3. The lack of communication, especially in the rural milieu
- 4. The lack of specialised personnel, especially in the rural milieu
- 5. A better adaptation capacity especially for those attending a day care centre.

#### The operational objectives of the intervention were:

- 1. The improvement of the interpersonal relationships between aged persons
- 2. The acquisition of new communication abilities for the lonely persons
- 3. To offer an opportunity to value their experiences and knowledge to the aged persons
- 4. To sustain the aged persons in their difficult transition periods such as widowhood, evolution of an acute illness into a chronic one, etc.
- 5. To support the aged persons to improve their adaptive capacities
- 6. To avoid social exclusion of the lonely aged persons.

**The beneficiaries** were 8 persons – 4 men and 4 women, 4 living in a village and 4 in town. All fulfilled the needs of the research: they did not have the help of their children and they had problems with the solitude and isolation, with ages between 66 and 80.

Besides the evaluation of the needs identified, some resources useful for the amelioration of their situation were:

- the availability for helping each other
- the existence of a protection system at the City Hall and at the Police
- · the availability for participating in the meetings

#### Methodology

In the practice of the social work, the group helps the participants to develop new methods of relationships and to improve the existent ones. At the same time, it facilitates the opportunity to receive help from the others, a better communication and the learning of a more assertive behaviour. As well, it offers the possibility to develop and to exercise the capacity to listen, to work and to take common decisions, and to work as a team.

#### The advantages of this method are:

- The group facilitates the perception of the own problem also from the perspective of the others and gives different ways to look at it and to solve it
- 2. The group is an advantageous milieu to experiment and exercise certain abilities
- 3. The changes of attitude and behaviour are faster and easier in a group.

The intervention put in practice consisted on one weekly meeting, during six weeks, involving the two groups of aged persons – one in the rural and another in the urban milieu. Every meeting lasted two hours, with a certain plan and evaluation for each time.

#### Results

They validated the premises that the group of informal support was more important in the rural milieu.

At the same time, the factors leading to vulnerability are more numerous at the old age and with a bigger impact in both milieus.

Because of the lack of information or because of a difficult access to the social services, there are more unpleasant consequences on the physical and mental health in the rural milieu.

During the meetings, the possibility to activate a programme for the elders was intended to be offered, inducing the feeling of usefulness and diminishing the sentiments of loneliness and inactivity. The efficiency of the intervention was evaluated at the end of every meeting and at the end of the whole intervention. The fact that the elders accepted to participate at these meetings represents a success by itself and especially that they accepted to talk about their problems, to give and receive advices, and, at the end, their self-esteem grew considerably.

Things were more difficult in the rural milieu because of the mentalities and the way of life.

This intervention represented a step in the fight of the elders with the changes which come with the old age. In the rural milieu, people work until the end, even if they are old and retired; so they do not have the time or the habit for hobbies, like in the urban milieu.

In the village, attempts were made to diversify the services offered by the local administration for the elders and to raise a barrier in order to open the way towards a better socialisation and to give a real importance to the elders.

In town, the focus was to promote the involvement of the society (at least of a part of it) in the integration process of the elders and again, to grow the degree of socialisation. The success was represented by the fact that the elders involved themselves in this intervention, they took the initiative and they continued interacting even after the project ended. In this way, they saw that they can have new roles in the new conditions of age and life.

In addition, this intervention showed a new dimension of the importance of the practice of the social assistance in different milieus of life.

At the end of the intervention, the results and the conclusions were communicated to the local administration in order to further find new ways and methods to support the elders.

### **SERBIA**

# 1. Story from Serbia

From a series of services provided to the elderly in Vojvodina, we have chosen to present the story of the "Association of Alzheimer's" from Novi Sad. The main objective of this association is to help those affected and educate all persons who come in contact with people suffering from Alzheimer's disease, especially for people from the immediate family. The operation of the association is focused on the proper treatment of patients and establishment of positive communication between the person suffering from Alzheimer's disease caregivers – mostly his/her family, and also improving the quality of interpersonal emotional relationships.



The inability of persons suffering from Alzheimer's disease to live alone brings them into a position of dependence on the people who care for them, and in most cases the spouses care for them which usually means that they are also elderly, burdened by diseases and with reduced physical abilities themselves. This creates a number of problems and points towards the need for emergency intervention. As there are no institutions that would adequately take care of this target group comprehensively, the "Association of Alzheimer's" in its day care programme provides a significant help to those affected, including their families.

Activities in the day care programme are conducted by an expert team of the association, and the day care programme operates through workshops in which contents are adapted to the adequate level of intellectual abilities and capabilities of patients.

The group facilitators use applicable forms of communication that provides memory assistance to patients through training on the uses of reminders, then help the patients to revive experiences of the past (especially those who belong to the domain of positive personal experience). This principle contributes to the improvement in terms of behavior, well-being and social interaction.

Relationship-to-reality therapy provides assistance to patients to revive the memory of facts about themselves as well as in relation to their environment. In order to improve physical and mental health, various forms of occupational activities are also carried out. Listening to and playing music improves the level of well-being and encourages autobiographical memory. The introduction of artistic activities provides an opportunity for persons suffering from Alzheimer's disease to express their creativity.





Vladimir Ćurčić, a young Psychologist engaged in the work of the "Association of Alzheimer's" describes his experience:

"The very atmosphere of the Association is positive and supportive, both for users and for those of us who are here for them. People are competent, empathetic and always smiling, so that everyone involved feel welcome and comfortable in such an environment. The Association is trying to work with patients on their cognitive, social and creative skills and abilities. It is a serious challange to fight against a disease that is incurable, and each day, little by little it 'steals' the person away from you. In addition to the planned activities for the patients, the Association brings something new to its programme each day. The real wealth proved to be the unique experiences that the beneficiaies bring to the table through this programme. Employees have an opportunity to look through a window into rich and colorful histories of these people with each of them being intriguing in their own way. Working with people affected by Alzheimer's disease, we learn sensitivity, humanity, respect and patience. And finally, it seems that users are coming to the 'Association of Alzheimer's' to socialise and share life experiences, and also to become close as family members. All this teaches a lesson that the disease is not of central significance, but the relationships between people are more important, since they are building and improving the quality of lives which may otherwise be deleted by the disease unfairly." (www.alchalmer.org)

# **FEEDBACK**

Final questionnaires were handed out to the participant regional partners regarding each conference – in Päijät-Häme, Talsi and Silesia.

Here, such feedback is summarised and presented for open reflection.

The questionnaire itself was divided into two broad sections. Hereafter we expose the correspondent results.

### 1. CONFERENCE FEEDBACK

#### Along these lines, the following was asked:

Dear partners, please provide us your feedback on each conference and on the overall procedural flow of the project now that we have completed all the conference rounds for this term. In this part please rate – in ascending score from 1 to 10 – and/or comment on the conferences as indicated for each question.

#### 1. How did you find the get-together events?

Average score: 9,12

2. How did you find the lectures of expertise, were they useful?

Average score: 8,48

3. How did you find the group sessions, discussions and exercises, were they useful?

Average score: 8,48

4. How did you find the site visits, were they useful?

Average score: 9,61

5. How did you find the practical arrangements (hotel, transfers, dinners, etc.)?

Average score: 8,80

6. During the conference, did you find any best practices, working models or ideas which you would like to apply in your own region/organisation?

#### Päijät-Häme:

"We have realised that the practice of seniors coming to elementary schools is also applicable. Current practice in many institutions in Croatia is for students to visit seniors in nursing homes." (Partner from Zadar, Croatia)

"I wish we had such healthcare centres in Germany too, so we could reach patients better, more easily and earlier – for prevention programmes, for example. How could we ensure that in our healthcare system?" (Partner from Rems-Murr-Kreis, Germany)

#### Talsi:

"One revealing idea for me was to involve the Red Cross in the development of elderly care joint services. We started negotiating with the Romanian Red Cross soon after we returned to our region." (Partner from Cluj-Napoca, Romania)

"The daily care centres based on volunteer work; cooperation connecting students and elderly people in leisure time activities in common life, not only in social services." (Partner from Olomouc, Czech Republic)

#### Silesia:

"The Daily nursing home in Dabrowa Gornicza was an excellent example – with comprehensive and individual help for seniors, people with disabilities and their families in everyday functioning, maintaining independence and the development of talents and interest – that we should have for the elderly people in our own region too." (Partner from Talsi, Latvia)

"I found the model that helps shaping social skills in the Centre of Daily Support for people with mental disorders very interesting and what I liked the most is the fact that this model is based on active collaboration with clients." (Partner from Zadar, Croatia)



#### 2. OVERALL FEEDBACK

Subsequently, the following was asked:

Regarding the goals of the project in general, please reflect and answer the following questions as appropriate.

# 1. How has the awareness of European policies on elderly care increased through this project?

"I can't assess how the awareness has changed in broad terms, but I can say we face many same or similar problems, and when (local) politicians or people with political and public responsibility show effort, desire and will, it is possible to modify and create many things." (Partner from Olomouc, Czech Republic)

"By establishing a network of professionals in about ten European countries, it has increased the awareness of the importance of policies for the care of elderly people. In our country, we are keen on fructifying any constructive opportunity to meet and harmonise our related strategy with the European institutions." (Partner from Cluj-Napoca, Romania)

# 2. How has the project contributed to diminish barriers between working life of elderly care and education/research?

"Sharing knowledge and experiences has led to raising the level of services in the regions involved, in a professional and scientific sense." (Partner from Vojvodina, Serbia)

"There are big differences in ways of action and different cultures and countries. It is important to discuss about them. It is a way to grow your understanding." (Partner from Päijät-Häme, Finland)

# 3. Has the project encouraged young people to work in the elderly care or the current workers to prolong their working carriers?

"Yes, new points of view towards ageing and practice with elderly encouraged young people, as well as current workers." (Partner from Zadar, Croatia)

"In Talsi, the project has improved the cooperation between the local Seniors Day Centre and Children and Youth Centre. These organisations have developed ideas for further interaction between youngsters and seniors. For example, the Youth organisation now wishes that the seniors transfer some of their practical experience to the youngsters, and the members of the Day Centre wish to acquire the use of modern technologies (computer skills, mobile phones, etc.) with the help of the youngsters." (Partner from Talsi, Latvia)

# 4. Has the participation in this project improved the co-operation in your region between local organisations and stakeholders?

"Our region has improved the cooperation between state institutions and other stakeholders to improve the quality of services provided to the elderly. We together used all opportunities to develop new services following some of the models we've seen in other countries, and that has worked." (Partner from Cluj-Napoca, Romania)

"Yes, absolutely. I think this is one of the strongest outcomes of the project." (Partner from Päijät-Häme, Finland)

# 5. Has this project created a possibility for citizens to influence the political decision-makers and become active together in the elderly care Europe-wide?

"There may be a beginning. It is in our brains. I can see here in our region, that senior councils are connecting with politicians and senior groups... and this is the start of a meaningful communication." (Partner from Rems-Murr-Kreis, Germany)

"Yes, we had this kind of elements in the conference programmes (panels, meetings). But this is a very hard aim. Step by step!" (Partner from Päijät-Häme, Finland)

# 6. Have students contributed in the preparation and implementation of the project in your region?

"Students were involved in running the conference. Students took part in the conference programme, group discussions, summarised the results of discussions and guiding the members of the conference." (Partner from Talsi, Latvia)

"Yes, very strong impact in Finland. They organised big part of the programme for the conference in Lahti, and students also took part in another thematic conferences abroad." (Partner from Päijät-Häme, Finland)

# 7. How has this project promoted information and the exchange of experiences of the experts, and deepen the professional cooperation of the project partners?

"For now, mainly through participation and exchanging experiences and knowledge in situ, at conferences." (Partner from Vojvodina, Serbia)

"I think this network is very unique. The better people know each other, the better is the situation to exchange experiences and knowledge. There is also a quite deep trust between participants and regions by now, so it is a good starting point for a future-planning." (Partner from Päijät-Häme, Finland)

# 8. At this point, most importantly: how would like to see cooperation continued in the future?

"As a result of globalisation processes project member countries seem to have similar problems which should be addressed. It is important to know others' good experience or expertise for the possible regional/local solutions. The cooperation should be continued and the topics should be looked in depth with a possibility of transferring and implementing the excelling solutions." (Partner from Talsi, Latvia)

"I would like that this network finds new financing opportunities for future work, also to cooperate further on a common project. I find it important to continue promoting values, rights and opportunities for EU senior citizens, so as to further improve the operability between education and working life." (Partner from Zadar, Croatia)

"In future cooperation, it might be useful to conduct a joint thematic research through a standardised questionnaire with the same set of indicators in all the regions involved, and thus obtain comparable data made available to all of us (on what 'illness', 'disability', 'poverty', 'specialised services', etc., mean in each region)." (Partner from Cluj-Napoca, Romania)

"Similar projects with different topics with this same group of delegations would be most beneficial. We know each other already and it is easy to start working and talking right away when we meet." (Partner from Päijät-Häme, Finland)

"I hope we will have cooperation in the future. But we still have to talk and decide the form, rules and roles – i.e. framework – for it. We have an excellent basis for that kind of actions. But it takes some time to arrange or fix things. Anyway, it is worth planning. Then comes the time to act according to the common plans!" (Partner from Päijät-Häme, Finland)

# **PROJECT SUMMARY**

# Description of the project activities

Professionals, planners, decision-makes, researchers and students of elderly care from working life and education as well as senior citizens, school children and local, regional, national and European (MEP) politicians participated conferences through the horizontal theme improving cooperation between education/research and working life.

In the 1st conference in Päijät-Häme, Finland, conference delegates were divided in the mixed international groups with different nationalities. All groups were assisted by students. Preliminary tasks for working in international groups were given before the conferences. Group discussions were held during all conferences which were connected to different presentations and visits. Interactive panel discussions were organised in all conferences including local and regional politicians and experts from research/education and public sector. In Päijät-Häme conference just before European Parliament election three EP election candidates participated. The evening programmes also served as platforms for discussing the seminar topics. Participants were asked to prepare preliminary answers to present local experiences. Feed back questionnaires were sent to participants after all conferences. Project web site www.ipahew. net contains all the materials of the conferences and previous projects and the facebook profile serves for efficient information dissemination.

Päijät-Häme region conference (Finland): focus theme was rehabilitation and maintaining the everyday physical activity of the elderly people. A get-together event was organised with innovative tasks to get acquainted to project and conference thematic. First day presentations covered health promotion and commercialisation of the health enhancing physical activities (HEPA), elderly care education and working life. Thematic working in small groups took place to reflect on related experiences in the participating countries. A site visit was made to Hollola Onnenkoto elderly care home followed by a presentation on local practices. On the visit to Lahti University of Applied Sciences (LUAS) practical exercises with small-group discussions were combined with reflections on practices in participating countries about the following questions: functional capacity testing and the meaning of the testing for maintaining the everyday physical activity and evaluation of functional capacity; testing, guidance, follow-up activities based on the "Good Ageing in Lahti Region (GOAL) programme: 10-year cohort study and intervention for promotion of functional capability for elderly. Appr. 50 students of LUAS's Faculty of Social and Healthcare took active part in the organisation and implementation of activities.

On the second day visits were made to Lusi Village School and Jyränkölä Settlement. At the Lusi Village School, a "Kyllikki" weekly action day involving senior citizens and school children together. Small-group discussions were conducted how senior citizens and young people are encouraged to meet each other and how everyday physical activity is maintained. At the Jyränkölä Settlement, speeches and an interactive discussion panel with EP election candidates and local/regional politicians was arranged. Thematics of speeches covered senior citizens in the EU and current affairs in the Europe for Citizens programme. Panelists represented major Finnish political parties (Coalition Party, Finns Party, Social Democrats) and thematic research experts. Panel discussion was open to all public with participation of local senior citizens. Second day was finalized with small-group discussions on future project activities. On the third day the Rehabilitation Section of the City of Lahti presented Chaos Falls Clinic in preventing falls and injuries of home-dwelling older adults. Site visit was made to Lehtioja Intensified Housing Services Unit, the facility was shown to the conference participants divided

into groups, and the cultural activities developed for senior citizens were explained. At LUAS small-group discussions were made on prevention of falls and identification of osteoporosis patients on related good practices. Small-group summary discussions were conducted on the results and practices of the previous days and the recognition of needs for more intense cooperation and to apply recognized good practices in their home countries.

Talsi municipality conference (Latvia): a welcoming event was held at Keninkalns to be aquianted with the conference topics. On the first day social services and demographic data regarding the Talsi district were introduced. Site visits were made to Talsi Day Centre, Lauciene Nursing Home, Talsi Children and Youth Centre and Talsi Recreation Centre. Topics to be discussed were challenges and tendencies regarding ageing society (employment, social activities, education, health, income, family relationships and interaction between generations) as well as initiatives to promote successful ageing in governmental/municipal/organisational levels. For these discussions conference participants were again divided into six mixed international groups for which they got to team up with diverse people of different regions and backgrounds. On the second day a site visit was made to the Social Centre Stūrīši (Latvian Red Cross). Presentations were given by local speakers and national representatives from Ministry of Welfare and Latvian Parliament. Topics dealt with Ageing Society in Latvia and Active Aging Project; good practice summary and senior volunteering as effective instrument for interaction between generations and promoting social integration. At Talsi Administrative Centre conference participants were engaged in an open interactive panel discussion with senior citizens, local students and politicians. Panel was participated e.g. by the local politicians, academics from Latvian University and experts from local children and youth Centre. On the last day conference delegates gathered at the Laumu Dabas Park. A final discussion was carried in small groups led to summarise the common lessons learned during the previous conference days and on potential future project forms and activities.

Silesian region conference (Poland): Get together event was organised for conference participants. On the first day at the Silesian Marshall's Office was an official participant welcoming, presentation and discussion of the meeting agenda. Social services and demographic data regarding the Silesian region was presented. Site visit was made to Senior Residence, Home for the Elderly with Dementia. A presentation on the home care innovations on the private facility was given. At Dabrowa Górnicza Daily Nursing Home there was a theatrical performance by the elderly home recidents. At Dabrowa Górnicza University of the Third Age several presentations were displayed on the thematic university activities and on the most interesting initiatives for older people from the province of Silesia. On the second day a comprehensive site visit to care facility, Gorzyce Nursing Home was done. At Cieszyn University of Silesia presentations by the academic staff were given. Interactive panel discussion on prevention of depression issues and loneliness among older people were organised by the academic staff and guests including participants of local government and third sector and students. At Cieszyn Daily Support Centre for People with Mental Disorders a site visit was organised to the specific unit and concluding with a joint performance by local elderly and young members. On the third day at Silesia Park final presentations and discussions took place. It included presentation on "Senior Citizen Congress -SENIOR WIGOR" and a conference summary and discussion on the possibilities of further cooperation in the new EU financial perspective 2014 - 2020.

### Objectives and priorities of the project

In the project the diverse participant composition was able to secure an enriching inter-cultural dialogue. Thus, the participants were representing their own nation and culture, besides their profession. The revelation of similarities and differences in practices and experiences, and joint further considerations have in turn contributed to strengthen a "tighter-knit Europe". The revelation of similarities and differences, the common experiences, various traditions of expertise were discussed to understand regional solutions in the background of different cul-

tures. This also contributed to enhance tolerance and mutual understanding between European citizens, respecting and promoting cultural and linguistic diversity, while contributing to intercultural dialogue.

The specific action targeted by our project "developing thematic and long-lasting cooperation between towns" within the initial expectations, partner regions are to reach a twinning agreement on social affairs including elderly care. In specific terms, this is so to deepen the thematic cooperation already established through earlier conferences; in general terms, to keep up the thematic on the regional/European agenda, to secure a long-lasting European network between participating regions and municipalities for elderly care and social care experts, and to strengthen citizens' engagement with issues which constitute the EU's political priorities. The project performed well on this. The four consecutive projects have strengthened the cooperation and expanded the cooperation from cooperation among five regions in four countries to cooperation among ten regions in ten countries and lead during this last project to the establishment of the Interregional Platform for Ageing, Health and Wellbeing www.ipahew.net Partners from this network keep also now daily online contact through the new facebook profile "Interregional Platform for Ageing, Health and Wellbeing. To contribute for securing long-lasting cooperation "Good will agreement on co-operation among the member regions/cities of the Interregional Platform for Ageing, Health and Wellbeing" has been signed by the partners. A project team has been set up by the partners during the project implementation, to search for the adequate financing instruments that allow such future cooperation. In all conferences discussions were made about the future project ideas and project cooperation. This has deepened the mutual cooperation even more. So far, ten partner regions have been actively involved, showing interest towards the cooperation and acknowledging the importance of the thematic, which actions have significantly contributed to achieve the aforementioned aims.

Regarding the permanent and annual priorities of the Europe for Citizens programme through the network cooperation, expert lectures, workshops, site visits and panel discussions with local and European politicians, the awareness on European policies on elderly care has been increased. Local professionals and citizens were invited to different actions. In particular, panel discussions have been open to all the public, fomenting a more open and horizontal approach to EU-related processes. Through the conferences organised by this project, participants have had the occasion to further understand the values, rights and opportunities created by the EU and their empowerment to play a full part in the democratic life of the EU. More specifically, the conferences began with lectures dealing with policies on social affairs, elderly care and education, at a regional, national, and European level. All the presentations and materials are available for the larger audience outside the project as well. Presentations and materials are gathered to the project web site www.ipahew.net which is marketed through the facebook profile and through the dissemination of the memory sticks to the relevant stakeholder groups of each partner regions. Memory sticks have the programme logo and the web address of the Interregional Platform for Ageing, Health and Wellbeing printed on it.

Regarding the Citizens' participation in the democratic life of the EU this project has concretely looked into senior citizens' opportunities to influence and participate in improving social cohesion, and as already partly stated in the previous point, its horizontal approach diminishes barriers between working life of elderly care and education, also targeting young people and students - especially considering the rather severe EU youth unemployment situation - to encourage them to work in the elderly care. Prolongation of working careers has also been a topic of discussion. Further the public panel discussions have successfully attracted appr. 100 participants in each conference. For instance, during the conference in Finland, the context was of the ongoing European parliamentary election campaign. This Europe-wide network has been a relevant practical example of how citizens may have influence in the political decision-makers, jointly becoming active in the elderly care Europe-wide and thus play a fuller part in the demo-

cratic life of the EU. Already the preparation of this project has improved the co-operation in the hosting regions between local organisations gathered together from public, private, educational, third sector/volunteers and private enterprises and opened channels for influence. Lastly, the results of the previous project 2011 - 2012 during the European Years of Volunteering and for Active Ageing and Interregional Solidarity have been the basis for this newer project - focusing on the priorities of the European Year of Citizens - which actions have contributed to materialise the permanent and annual priorities of the programme.

# Impact of the project

Through a practical approach, the project has offered the participant elderly care and education experts and decision-makers a tangible place of discussion and cover crucial points in European regions on how future elderly care education can be developed and also made attractive for employment - especially the youth employment. Through each periodic conference, partners were able to learn about different working cultures in situ, and transfer and eventually apply certain best practices to their everyday work in their own localities. The conferences also offered place for intercultural dialogue but also in practice they offered to benchmark and learn about target groups work and practices in different countries and to transfer them to own working places for giving added value at the daily work. Many examples during the project series show that the transfer of the best practices did not happen during the project time but afterwards. The cooperation between the local organisations of the hosting regions has also been considerably improved through the project cooperation. The project preparation and implementation gathered together in the conference hosting regions stakeholders from public, private, educational and third sector as well as private enterprises. Many of these organisations did cooperation for the first time and connected them to the international network as well. All in all, the entire preparation of this project has visibly improved the thematic cooperation, within and beyond the hosting regions, between local organisations gathered together from the public, private, educational, and third/volunteer sectors.

All the participants, ranging from senior citizens and local politicians, to professionals, planners, students, teachers and researchers of the related fields have been able to actively participate in the project events. Good practices and stories about the project thematic have been collected into a publication and its content is to be disseminated in the partner regions e.g. through the project web site, facebook profile, memory sticks and the web site of the beneficiaries and project partners. Results of surveys have also been included in it. Some of the conferences' events have been covered by local media (e.g. newspapers, radio or television), for yet further initiative and project content dissemination.

To seal and secure the continuation of all this multi-faceted collective process, a multilateral twinning agreement on social and health care affairs including elderly care "Good will agreement on co-operation among the member regions/cities of the Interregional Platform for Ageing, Health and Wellbeing" has been signed. Through this agreement the regions/municipalities declare the good will and intention to continue and deepen the good co-operation in social and health care affairs among the member regions/cities of the Interregional Platform for Ageing, Health and Wellbeing. This has deepened mutual cooperation even more.







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