



## Project Partner Search Template

### Project Title: Senior Friendly Communities in Europe

#### Background and motivation

##### **Motivation:**

The EU gives a high priority to the promotion of a healthy lifestyle and of contributions to the reduction of specific risks among the 65+ age group (seniors). To this aim several (EU funded) projects were carried out with high quality output, including useful deliverables and the strengthening of networks. The main characteristic of these projects is that they usually do not incorporate activities to support the local governments to promote the actual use and implementation of activities in these domains on a local level.

This current project is designed to promote the actual use and expanding the implementation of tools, making them easily accessible and usable to incorporate in the daily work of the local government and the intermediaries on local level.

As a result substantial larger target groups can be reached in the local community. It is expected that this actual use will contribute to the reduction of health inequalities among seniors at risk in Europe.

In an ageing society frail seniors are a growing group. Our definition of this group is 'seniors that are at risk for developing disabilities, loneliness and depression'. Especially seniors who live on their own have a higher risk of becoming frail, than the senior who already receives healthcare or support, such as seniors living in nursing homes.

Beside the frail seniors there is a rapidly growing group of people with the chronic disease dementia. The economic impact of dementia is tremendous. Providing support and care for those affected by dementia and frailty is expected to consume an increasing share of the health and social care budget in Europe over the next twenty years. Providing dementia care can be a full-time job for informal caregivers without additional support. In 44% of older people with dementia, children of older parents are providing informal care.

The best way to promote a healthy lifestyle among seniors in general and frail seniors and patients with dementia specifically is to have a strategic and full community approach. A healthy lifestyle is not only an issue of treating diseases. Socio-cultural factors as well as structural contexts also play a very important role. For health promotion interventions to have their best effect, such programmes have to take their starting point in the expressed needs, challenges and desires of the individual local community. This is the reason that this project (1) has an empowering and learning oriented approach, and (2) has a "needs driven" approach, where local community pilot projects and interventions are decided upon and developed throughout the project in a close dialogue with the local communities involved.

## **Context (state of the art):**

The percentage of people older than 65-years in the EU will increase substantially, from 17% in 2010, 23% in 2030, to 30% in 2060 (Population of seniors in society Eurostat). Nowadays an increasing group of seniors is associated with physical, mental and social impairments. Indeed, a growing group of senior people will face an accumulation of physical, mental and social problems that may be reason for restrictions in daily functioning and ultimately even lead to nursing home admission. The increasing group of seniors is for several reasons considered as a challenge to our society. According to the Berlin Institute, the top 3 challenges are<sup>1</sup>:

1. More need in need of help: The pressure will be on the intermediary, like professionals and informal caregivers who care for the (frail) senior, but also on the economy and public budgets.
2. More dementia: the estimated percentage of the world population that will have dementia in 2050 is 22%. In 2000 this was 10% of the world population.
3. More mental suffering: The EU calculated that the group of seniors who is nowadays affected by a depression is 10 to 15% and even more are at risk of getting a depression. Older people who suffer from a depression are two to six times more likely to develop at least one limitation in their daily life activities (European Commission, 2011)

It will become more and more necessary to foster informal care and support provided by volunteers and seniors to create an inclusive society for seniors in Europe and to make society economically sustainable and to enhance a healthy lifestyle.

Creating a healthy lifestyle is also well in line with the policies of the EU, the WHO and European Policy Centre. The latter clearly states that, "in responding to demographic change, more attention must be paid to the structure of the health and care sectors, social services, labour markets, financial systems and education, as well as to the integration of migrants. Healthy and active ageing should be promoted as a key part of the solution. If increased life expectancy is coupled with healthy ageing, and older people can continue to enjoy life to the full and contribute to the labour market and society, this will reduce pressure on health and social services, and therefore on public budgets" (EPC, Policy letter March 2012).

The innovation challenge for the partners is to change the potential 'threat' of ageing for society into a chance by creating opportunities for seniors. These opportunities will be realized within the concept of '**senior friendly communities**' (SFC), as an innovative way to deal with the growing senior population and the decrease of the working population at the same time. The aim of the 'senior friendly community' is to create a social inclusive society for seniors by supporting local communities to promote a healthy lifestyle in using innovative and cost-effective health promotion approaches, like the reintegration of seniors in the economy and society and by strengthening their support systems. The participating regions in the EU need to implement innovative strategies, such as e-health interventions, and to overcome the sectoral boundaries to help seniors to remain active and participate in the economy and society more generally and to boost the efficiency and sustainability of the (regional) systems.

## **Objective(s):**

The long-term aim of this project is to encourage healthy lifestyles among the seniors within the EU. In order to reach this aim, it is also within the EU widely acknowledged that local communities should be engaged in a more structured way so that they can be more active and competent in this area. Therefore it is important to raise awareness among local communities and to provide them easy

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<sup>1</sup> The Berlin Institute: 'Alt und Behindert' 2009

access to good practice on innovative and cost-effective health promotion approaches. This access will support local communities to apply more strategic approaches and to use actively several innovative tools and full community approaches which have been previously developed and proposed through a number of former and ongoing (European) projects.

In order to reach this long term aim, the overall objective of this project is to increase the quality of local communities all over Europe with respect to the promotion of healthy lifestyles among chronic diseased and frail seniors, by creating 'senior friendly communities' by means of good practices and results from previous and ongoing (European) projects, based on the development and strengthening of networks and dissemination, through the development of sustainable European support systems.

The main goal of the project is to realize senior friendly communities (SFC) in the EU. But in order to be able to achieve this we need to support the direct target groups (see next paragraph) in their work for frail seniors and the dementia patients and by that boost the efficiency and sustainability of the (health care) systems in the EU.

### **Target group:**

We focus in this project directly on two primary target groups. First, on local and regional governments, who are involved in strategic planning, policy and overall decision making with respect to health promotion focused on seniors. Second, on the intermediaries, like informal caregivers, volunteers, senior associations, healthcare providers and patient organisations within local communities who are and/or must be actively involved in health promotion activities and interventions towards seniors.

Informal care is indispensable to keep society economically sustainable. This underlines the urgency of investing in informal care and to find optimal ways where informal caregivers may combine informal care and other societal roles including paid work. Investing in support for informal caregivers will save costs on the long-term, as it may reduce formal health care costs including the delay of nursing home admission. Informal caregivers are often middle-aged and most likely also involved in out-of-home employment. They may be forced to quit work, to reduce paid working hours, or take a less challenging job in order to provide care. The general policy for most governments is to care for their seniors in their own homes as long as possible and to postpone nursing home admissions. However, many caregivers are pushed to their limits and run the risk of (mental) health problems themselves. Therefore it is necessary to adapt structures on a local level so that informal caregivers will be supported.

The two mentioned target groups will directly benefit from the project, as they will gain knowledge and inspiration from the concept of 'senior friendly communities'. It can assist them to improve their daily work with health promotion and may increase local community-based interventions focusing on healthy lifestyle.

The indirect target groups will first of all be the seniors, particularly frail seniors and patients who are developing dementia. They will benefit from the implementation of local community interventions and the use of good practices by the informal caregivers who are in direct contact with them.

Secondly, indirect target group will be research communities and other actors being involved in European project work, who can use the SFC as a learning community to find well structured inspiration instead of inventing the wheel, and as a future dissemination, where networking and exchange of experiences gained from European projects can take place.

### **Proposed work plan and budget**

**WP1: Coordination of the project**

Action undertaken to manage the project and to make sure that it is implemented as planned.

**WP2: Dissemination of the project**

Actions undertaken to ensure that the results and deliverables of the project will be made available to the target groups.

**WP3: Evaluation of the project**

Actions undertaken to verify if the project is being implemented as planned and reached the objectives.

**WP4: Mapping and analysing**

This WP is the preparation phase. A mapping exercise of good practice tools of former and existing European projects will be carried out. After that these projects will be analysed to see if they can be useful for a Senior Friendly Community for frail seniors and dementia patients.

**WP5: Developing Indicators and Guidelines**

Based on WP4, indicators and guidelines for a SFC will be developed. For specific domains, like IT, informal care, policy and so on the project will suggest specific activities. This for the specific target groups as mentioned.

**WP6: Local community pilots**

The results of WP4 and WP5 will be tested on usability. It also will create awareness, engagement and interventions on local level. There will be a minimum of 2 local communities participating in each country, which is participating in this project. Communities with a minority status and communities with a strong increase of an ageing population will be incorporated in the project.

**WP7: Fine tuning, conceptualisation and Sustainability**

Based on the feedback of the local pilots the indicators and guidelines for SFC will be adapted. This will also be the base for giving recommendations. The final step is to create a sustainability document in which a plan is worked out for the continuation of the SFC.

**Total project budget:**

The estimation of the budget is € 1.500.000,-.

**Partners sought for****Type of partner wanted** (Public authority, research institute, SME, ...):

Local governments, public health authorities, research institutes and intermediaries.

**Competencies needed:**

**Competences in ageing, health promotion, or the willingness to get competence in the area of ageing.**

## Practical information and contact details

**Funding programme** (name and call identifier):

2013 CALL FOR PROPOSALS FOR PROJECTS  
SECOND PROGRAMME OF COMMUNITY ACTION  
IN THE FIELD OF HEALTH (2008-2013)

Call 2: Addressing chronic diseases and promoting healthy ageing  
across the life cycle

**Eligible costs:**

The total project budget is estimated at € 1.500.000,-.

**Funding rate:**

60% of the total costs are funded by the program.

Estimated for the project is € 900.0000,-. The total budget that is available is € 1.000.000,-

**Call deadline:**

22 March

**For further information, please contact:**

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