

**Policy handbook**

# Supporting the WHO's decade of healthy and inclusive urban ageing

ACPA – Adapting European  
Cities to Population Ageing:  
Policy challenges and best  
practices

Targeted Analysis

# Supporting the WHO's decade of healthy and inclusive urban ageing: a policy handbook

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**Policy handbook**

# **Supporting the WHO's decade of healthy and inclusive urban ageing**

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Cities to Population Ageing:  
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## Foreword

The origins of the report are in discussions held a number of years ago by a small group of European cities, who were forming the Eurocities Urban Ageing Working Group. The aim of the partner cities was, and remains, the building of an effective pan-European platform that

- a) understands the dynamics of modern cities and the impact on ageing populations in the urban context,
- b) can develop effective and successful policy responses to urban ageing, with a particular focus on social and health inequalities and marginalised groups of older people,
- c) promotes the role of older people in designing, leading and implementing programmes of work, and
- d) brings together citizens, policy-makers, researchers and businesses to work together, rather than in the silos that limit progress.

So this report was envisaged as a tool to raise the profile of the ageing agenda with European institutions, city administrations, and NGOs and specifically from the social perspective of ageing. This report therefore combines concerns of conceptual approaches to ageing – principally the World Health Organization’s age-friendly city model – with practical and forward-looking examples of how cities are implementing change.

And delivering change is our number one priority.

A significant amount of work has gone into this report and I would like to thank Piera Petruzzi at ESPON and Erik van Ossenbruggen at ECORYS

and the organisers of the excellent meetings and events, along with colleagues at the Eurocities Office and the Working Group leaders – Tom van Benthem from Amsterdam and Anne-Berit Rafoss from Oslo – who have steered this work.

Closer to home colleagues in the Greater Manchester Combined Authority, especially Jo Garsden, Mark Hammond and Maria Gonzalez, have played an invaluable role, as has Dave Thorley at Manchester City Council, Chris Phillipson and Tine Buffel at the University of Manchester and Stefan White at Manchester Metropolitan University.

I hope that this report is just one milestone in our ongoing work to create an age-friendly Europe and to maintain our collaborate approaches despite the national and international challenges that seem designed to push us apart.

Happy reading.



**Paul McGarry**

Greater Manchester Ageing Hub,  
lead stakeholder of ESPON ACPA  
Targeted Analysis

## Preface

The European population is ageing rapidly and this is particularly evident in cities. According to an OECD study<sup>1</sup>, the number of older people increased by 23.8% in OECD metropolitan areas between 2001 and 2011. In some European city regions, even increases of over 50 percent are visible. This trend is predicted to be further accentuated in the coming decades. Population ageing raises common challenges for these cities: to adapt their environments physically and socially, so that older people's quality of life remains unaffected. This challenge has become even more apparent in the wake of the COVID-19 crisis that has affected our whole society, but older people in particular. The crisis has literally threatened their lives, and those who survived have been faced with increased loneliness. This shows once more how important it is to design our cities age-friendly and keep older people's interest in mind in policy making.

Fortunately, the idea of an age-friendly city has been growing for more than a decade now, sparked by the important seminal work of the World Health Organization. The forthcoming decade has been declared by the WHO as the *Decade of Healthy Ageing (2020 – 2030)*. This coming decade is an extremely important and promising opportunity to counteract the negative consequences of population ageing and guarantee older people's quality of life.

To reach that goal, we need the development and exchange of vision and knowledge. Vision about leadership and a common and appealing narrative, to make sure that all relevant stakeholders join forces, pursue the same long-term strategy and become active – to avoid the situation of the climate change debate, where the risk of lethargy prevails.

Many cities have developed an age-friendly action plan based on the WHO's conceptual framework – with lots of exciting initiatives as a result. Yet, the evidence of these initiatives is relatively scattered, while there is need for an integrated overview of the current knowledge about challenges and good practices in ageing policy. With the present handbook, we provide such an overview. It is based on case studies from eight cities throughout Europe, that were stakeholder in the ESPON ACPA project.

By presenting challenges and corresponding strategic and domain-specific recommendations in volume 1, along with good practices and practical tips in volume 2, this handbook can help policymakers and other practitioners in developing or finetuning services for older people.

Development of new ideas begins with exchange of visions and knowledge. Therefore, you are encouraged to share the content of this book – or the book in its entirety – with whoever you encounter who is interested in creating an age-friendly city.

*You are encouraged to join us in preparation of the age of healthy and inclusive urban ageing.*

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**Piera Petruzzi**  
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<sup>1</sup> OECD (2015) Ageing in Cities: Policy highlights.

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**IN 2050, PEOPLE  
AGED 65+  
WILL FORM  
APPROXIMATELY A  
THIRD OF THE TOTAL  
POPULATION IN  
EUROPE. THAT IS AN  
INCREASE OF 43%  
COMPARED WITH  
TODAY**

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Source: Eurostat (2020)

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**IN THE NETHERLANDS  
ABOUT 37 PERCENT OF  
PEOPLE AGED 65+  
FEELS LONELY. IN THE  
UK, THIS IS 40  
PERCENT. LIVING  
ALONE AND HAVING  
BAD HEALTH  
INCREASES THIS  
CHANCE BY 10 TIMES**

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Source: Statistics Netherlands (2020), Nearly 1 in 10 Dutch people frequently lonely in 2019; ONS UK (2018), Loneliness - What characteristics and circumstances are associated with feeling lonely?; Sundström e.a. (2009), Loneliness among older Europeans

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**OVER A THIRD  
OF ALL OLDER  
PEOPLE IN  
EUROPE LIVING  
ALONE IS  
UNABLE TO FACE  
UNEXPECTED  
FINANCIAL  
EXPENSES**

---

Source: AGE Platform Europe (2019), Ageing Europe - looking at the lives of older people in the EU

---

**TWO OUT OF  
EVERY FIVE  
OLDER PEOPLE  
IN EUROPE AGED  
65-74 YEARS  
HAVE NEVER  
USED A  
COMPUTER**

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Source: Eurostat (2019), Ageing Europe - looking at the lives of older people in the EU

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**ON AVERAGE, A THIRD PERCENT OF EUROPEANS AGED 75 AND OVER SPENDS AT LEAST THREE HOURS A WEEK ON PHYSICAL ACTIVITY, WITH THE HIGHEST PERCENTAGES IN ESTONIA (70%) AND DENMARK (63%)**

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Source: Eurostat (2020)

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**THERE ARE BIG NATIONAL DIFFERENCES IN LIFE SATISFACTION ACROSS EUROPE, WITH 60% OF PEOPLE AGED 65 AND OVER IN DENMARK BEING VERY SATISFIED WITH THEIR LIFE, COMPARED TO LITTLE OVER 5% IN BULGARIA AND PORTUGAL**

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Source: European Centre for Social Welfare Policy and Research (2012), Facts and Figures on Healthy Ageing and Long-term Care

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**HALF OF ALL PEOPLE AGED 65 AND OVER IN EUROPE LIVES IN UNDER-OCCUPIED DWELLINGS, WITH THE HIGHEST FIGURES IN IRELAND (90%), CYPRUS AND MALTA (85%), THE UK (83%) AND BELGIUM (81%)**

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Source: Eurostat (2019), Ageing Europe - looking at the lives of older people in the EU

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## Abbreviations

<b>ACPA</b>	Adapting (European) Cities to Population Ageing
<b>AURAN</b>	Agence d'Urbanisme de la Région Nantaise
<b>AVEM</b>	Arbeidsparticipatie Vrouwen Etnische Minderheden
<b>CCAS</b>	Centre Communal d'Action Sociale
<b>CLIC</b>	Centre Local d'Information et de Coordination
<b>CROW</b>	Centrum voor Regelgeving en Onderzoek in de Grond-, Water- en Wegenbouw en de Verkeerstechniek
<b>EHPAD</b>	Établissement d'hébergement pour personnes âgées dépendantes
<b>ERDF</b>	European Regional Development Fund
<b>ESF</b>	European Social Fund
<b>ESPON</b>	European Territorial Observatory Network
<b>EU</b>	European Union
<b>FNO</b>	Fonds Nuts Ohra
<b>GGD</b>	Gemeentelijk GezondheidsDienst
<b>GP</b>	General Practitioner
<b>HEI</b>	Higher Education Institution
<b>HMRC</b>	Her Majesty's Revenue and Customs
<b>LGBT</b>	Lesbian, gay, bisexual, and transgender
<b>MICRA</b>	Manchester Institute for Collaborative Research on Ageing
<b>NGO</b>	Non-Governmental Organization
<b>RCOAK</b>	Roomsche Catholijk Oude Armen Kantoor
<b>UN</b>	United Nations
<b>WHO</b>	World Health Organization



Volume 1

# policy recommendations

- 1 Strategic recommendations
- 2 Domain-specific recommendations

Volume 1, Chapter 1

# Strategic Recommendations



# 1 Strategic recommendations

## 1.1 Stability. Continuation of the Age-Friendly City network concept

The cities that have been investigated for the ESPON ACPA project and that are part of the Age-Friendly City network are highly positive about the concept. They consider it as a crucial means to structure their policy programme and to apply focus to the most important and demanding topics within the phenomenon of population ageing.

For example, the city of Zaragoza, first had the intention to implement 25 measures after consultation of older people. After streamlining the approach with the Age-Friendly City framework, a more focused approach on several overarching issues for older people in the city was chosen. More emphasis has also been placed on engaging experts and incorporating results of internal evaluations.

In several cities, including Amsterdam and Oslo, representatives highlight the ease resulting from entering the Age-Friendly City network and subsequently developing an Age-Friendly City action plan. This has sparked awareness of population ageing across the various policy departments in the stakeholder cities. Creating an age-friendly city is dependent on a holistic approach to all stages of life and multiple policy domains, thus considering these policies in a cross-sectoral manner has been key to their success. In particular, the need to involve spatial development expertise in other domains such as wellbeing and transport has been realised by many city officials. The membership of the Age-Friendly City has clearly stimulated this mutual cooperation within the municipality departments to collectively work on active ageing. Lastly, the cities highlight the opportunities for exchange of experiences and best practices between the cities, provided by the network. Therefore, expansion of the network is recommended by new cities joining the network.

## 1.2 Ambition. Need for long-term strategy

Many cities do not have a long-term strategy towards 2030. There are indications that this applies to many more European cities. Cities should therefore invest in developing formal strategic and tactical goals related to population ageing, based on a mission and vision.

This should ensure more stability on the long run and a higher probability of reaching steady change – instead of running occasional pilot projects without continuation. The WHO has declared the Decade of Healthy Ageing (2020 – 2030), which provides a useful, critical opportunity to bring together governments, civil society, international agencies, professionals, academia, the media, and the private sector and to develop a strategy and actions together.

Meanwhile, during each city council period, the city's long-term goals should be translated into applicable 4- or 5-year goals, covering the city council's term.

### How to achieve radical change?

The following actions could help in achieving more radical change:

- **Convince politicians** of the issue of population ageing, as they usually react to problems. This requires a good external campaign, showing the anticipated steep increase in number of older people. It should also show the accompanying costs (e.g. healthcare costs), especially when no action is taken.
- A collective approach towards **all relevant European institutions** should be made. For example, as many cities as possible should collectively bring the topic under attention of members of the European Parliament (MEPs) in order to get population ageing higher on the political agenda. In

approaching the European Parliament, it is worthwhile to liaise with AGE Europe, which already works closely with the European Parliament.

- At the national level, the **establishment of a council or round table** with representatives of all relevant stakeholders should be set up to influence politicians. Such a council should represent all cities within the country.
- Within cities, **an ecosystem is needed for more collaboration** of institutional and non-institutional stakeholders. The foundation of a network organisation as linking pin between all relevant stakeholders, led by the municipality, is a good starting point for such an ecosystem.

### 1.3 Learning. More monitoring and evaluation

Ample inspiring examples of success stories can be found in various cities across Europe, but often factual substantiation of the results is lacking. This has two reasons.

Firstly, in some of the projects investigated, there is no monitoring and evaluation involved. That makes it hard to gain insight in the effectiveness of active ageing policies. Secondly, in the cases where there is some sort of monitoring and evaluation, it turns out that measurement of the policy effects is sometimes difficult. Though varying between WHO policy domain, the nature of desired outcomes in some domains causes difficulties with measuring the outcome. For example, social participation is a prominent policy domain in the present active ageing policies, however it is hard to measure the meetings, chats and other social activities that older people employ. Other policy domains are easier, such as adaptations to public space, which can be seen in Gothenburg's report obstacles database (appendix, page 77), amongst others.

In order to gain a more reliable insight in the effectiveness of which best practices really work and which ones do to a lesser extent, it is crucial to place more emphasis on monitoring and evaluation. A good example can be seen in the learning network approach by the cities of Amsterdam and Greater Manchester, where the municipality works together with local universities to set up experiments within projects, measure results and evaluate the outcomes.

Proper *ex post* evaluation, measuring the project outcomes and comparing it to the baseline measurement both quantitatively and qualitatively, will be necessary to further improve efforts by cities to become an age-friendly city.

### 1.4 Flexibility. Keeping an eye of developments and demands

Learning from already developed policies and initiatives through proper evaluation is one thing; it is another thing to keep critically reflecting on the current priorities and to match these with ongoing societal developments and demands from older people.

#### Digitalisation as impediment to inclusion

The need to critically reflect on the match of supply and demand can be seen in one commonality across most cities working to become an age-friendly city. Most of these cities have identified social inclusion as one of their top priorities. This is usually implemented in an increase of social activities for older people.

While that is very beneficial for many older people, at the same time, we all see the increasing digitalisation in our society. However, especially seniors aged 75 and over tend to have difficulties with using computers and smartphones. This provides challenges to the provision of public services, which are increasingly offered digitally by default, including tax declaration and request for social services. Governments and other providers of services for older people should be aware of seniors that cannot use or do not wish to use digital channels, and provide relevant alternatives. This also applies to communication of municipal policies to older

people. Therefore, information about services and activities relevant for older people should be provided via printed media as well, and ideally also via information offices.

### **Adapting to diversifying populations**

Cities are becoming increasingly diverse, and this applies not only to young generations. Also among older people in cities, there are many different sub groups. For example, there are well known inequalities in origin (older migrants), gender, sexual orientation (LGBT) and income. These developments request a tailored approach. A culturally sensitive version of a well known intervention is a good example of this (see page 93 of the appendix). Stakeholders implementing activities for older people should become more aware of these diverse groups and their demands to increase social inclusion.

### **Don't forget about the people around the senior**

It is common to think of the senior as the sole person being in need of care. Nonetheless, an increasing number of informal caregivers report to be under significant pressure due to providing care, sometimes leading to physical and psychological problems.

### **Need for holistic approaches and better cooperation**

Another point of attention for keeping an eye on developments and demands is that many cities have adopted the WHO's age-friendly city framework with the eight policy domains. While these domains provide an excellent starting point for understanding the relevant themes, they also introduce a risk of compartmentalising ageing policy.

However, many developments and demands from older people require an holistic approach. For example, combating loneliness requires involvement from stakeholders across various WHO domains, including social participation and inclusion, health and community services, and housing. The same applies to many other examples. Take falls prevention, which requires involvement from health and community services as well as outdoor spaces and the built environment. Therefore, in order to provide fitting answers to older people's demands, it is also necessary to transcend the eight domains and bring policy makers from these domains in contact with each other more frequently and to stimulate cooperation.

This applies not only to cooperation within city administrations, but also between civil servants and other stakeholders. It is recommended that cities investigate the foundation of a network organisation as linking pin between all relevant stakeholders. Greater Manchester serves as a perfect example with its Greater Manchester Ageing Hub: a network consisting of the Greater Manchester Combined Authority and all ten councils, the Greater Manchester Health and Social Care Partnership, the Age UK Network across Greater Manchester, the city's universities and social organisations and many other stakeholders. The Hub's role is to coordinate a strategic response to ageing by bringing together (amongst others) the mentioned parties.

## **1.5 Positivity. Raising public awareness about ageing**

Many cities are currently developing and implementing age-friendly strategies. At the same time, it can be concluded that in today's society, ageing is sometimes seen very negatively and misunderstood.

More should be invested to raise awareness across the whole society to understand what ageing means and how it can be supported. For instance, when shop keepers are more knowledgeable about dementia, they may be better able to identify and counteract problems that dementia sufferers are coping with. In addition, when younger generations are more aware of the precautions they can take to facilitate healthy and active ageing, they will profit from that directly, and society will profit from that indirectly through lower healthcare costs.



## 1.6 Outreach. From the local to the European level



Facilitating urban ageing is dependent on all geographical levels. Many of the inspiring examples in Volume 2 have in common that they are reliant on professionals and volunteers who act on the local, neighbourhood level, where they know the inhabitants. *Cities should do more to make use of these valuable experts.*

At the same time, there is a need for greater application at the European level. An increasing number of cities is already sharing experiences through platforms as Eurocities, AGE Europe and the European Innovation Partnership on Active and Healthy Ageing. *It is recommended that more cities join such networks to share good practices and learn from each other.*

Also financially, more use of the European level is possible. The ESPON ACPA study has shown that many age-friendly cities use their own budgets almost exclusively for the implementation of active ageing policy. Possibilities for use of European funds was discussed, however none of the civil servants saw this as an option for their own city. This has two reasons. First, many city representatives working on ageing are not aware of possible sources of funding, such as the European Regional Development Fund (ERDF) and the European Social Fund (ESF). Those that are aware of European funding opportunities, indicate that the administrative burden associated with it is too high, making it an uninteresting option for them. Having to dedicate 1 full-time staff member to applying for European funding, and having to refund part of the money in case when the budget is not fully used, are specific arguments mentioned.

Therefore, the relevant European bodies are encouraged to make policy makers and other practitioners more aware of possibilities for European knowledge exchange and funding by outreach and dissemination activities.

Volume 1, Chapter 2

# Domain-specific recommendations



## 2 Domain-specific recommendations

### 2.1 Outdoor spaces and built environment

An important aspect of age-friendliness is that seniors can live an active and meaningful life, and the quality of how outdoor spaces and the built environment are designed with regard to older people is central in this respect.

The availability of sufficient benches and their design, access to green areas can help seniors in being more active in and outside their local neighbourhood. Improvements in security and security perception are also very important, especially at night and in peripheral neighbourhood. It should be ensured that streets have sufficient lighting and that the pavements are free of obstacles. Citizens should have the ability to report physical obstacles and other barriers for older people.

Checklists and clearly defined design standards can help ensure that the city's public spaces are planned in an integrated and consistent manner. However, a balanced approach is important here. Making urban spaces more age-friendly should not only benefit seniors, but people of all ages and abilities. Hence, they should not be designed with only one user group in mind, as this can easily lead to the interests of one group conflicting with the interests of others.

### 2.2 Transport and mobility

Age friendly public transport is a pre-requisite for success in other domains such as social integration, civic engagement, as people need to be able – and feel comfortable – to reach and join those activities. Effective and age-friendly public transport can have positive long-term health effects, as older people can remain active for longer as they go out independently. If public transport is well planned and adapted, it can have an inclusive effect, as older people who otherwise may be bound to their home can become more mobile. This can also lower the strain on their family and caregivers.

Public transportation should be easily accessible and safety of bus stops and bus terminals should be improved. It is positive if transport solutions also serve a social function besides simply being a means of transportation (such as Flexlinjen in Gothenburg and Rosa busser in Oslo). It is recommended that cities provide tailored transport solutions so that seniors can reach destinations that are out of the reach of normal bus, metro and train lines.

Conditional to the financial scope that cities have, it is worth investigating the possibilities to offer reduced public transport fares for older people. It has been proven that this is beneficial for their social participation and inclusion.

### 2.3 Housing

The increase of housing prices and the limited availability of social housing for a growing number of older people is a challenge cities have to face, also in light of the fact that the number of seniors with low income is projected to increase over the coming years.

Housing is a major challenge in many ways, and many seniors live in a dwelling that is not well suited for their needs and moving can be difficult or impossible. Relatively small physical adjustments can help make dwellings more age-friendly and contribute to improved feelings of safety while allowing seniors to live independently for longer. It is recommended to provide older people subsidies for such adjustments.

Employing housing coaches addresses the housing challenge in a different way by offering seniors help in finding housing that better suits the needs of the seniors.

## 2.4 Social participation; Social inclusion and non-discrimination

Activities that promote social participation and inclusion often rely on the active engagement of volunteers. It is also important to have a facilitator who is in charge of coordinating and managing the activities, and for ensuring that the activities are inclusive, respectful and engaging for all. Some initiatives also rely on collaboration with cultural institutions, which means it is important to have well-established ties to these institutions.

Having accessible facilities for organising the activities is also crucial. They should take place as much as possible at the neighbourhood level and associations should facilitate attendance of the seniors by also facilitating logistical aspects. Many seniors experience barriers to cultural participation, and one way of lowering the threshold to participate is by making it free or affordable to take part. This also ensures that high costs are not the reason for people not to participate.

Local associations and locally well known seniors can be the most effective ambassadors to mobilise individuals at the local level.

The domains of social participation and inclusion lend themselves well to combination of goals. For instance, tackling social exclusion while also building some skills or facilitating intergenerational contacts.

## 2.5 Civic engagement and employment

For some policymakers one of the mistakes often committed is to assume to know what senior people need, which is often misleading. The seniors are not a homogeneous category and their needs evolve quite rapidly. Their active involvement on policy design is therefore crucial.

Seniors are first and foremost citizens and want to be perceived as such rather than as a special category. Emphasising that they are expected and indeed welcome to play an active role in society is crucial. That requires awareness raising and confidence building as well as efforts to mobilise those less keen to play an active role at the very local level.

Creating favourable conditions to empower them and make them feel comfortable with expressing their views requires the city to think about formats, logistical arrangements and ways to make seniors feel that their needs have been taken into account.

## 2.6 Communication and information

It is important for older people to have access to information about what type of services and activities exist. Cities should place emphasis on spreading information about what type of transportation solutions, housing alternatives and cultural and leisure activities are available for seniors.

Digital exclusion is a major challenge that many seniors are confronted with, and from this perspective it is important that information is not only provided digitally, as traditional sources of information, such as printed materials and telephone are still the preferred choice for many seniors.

Some cities also have information offices or contact points that seniors can turn to with questions of all kinds, and it is preferable if a wide range of information can be provided through such an integrated channel.

Reaching socio-economically weak groups and seniors with a migrant background is often a persistent challenge. It may be advantageous to provide information using images rather than purely relying on text. Having information readily translated into different languages is another way of addressing this, assuming the city has sufficient resources available.

## 2.7 Community support and health services

Physical exercise and training are important for ensuring active and healthy ageing. These can be important for improving cognitive skills that can help stimulate feelings of security, competence, control.

At the same time, healthcare costs are increasing in many countries. In order to alleviate pressure from health facilities and hospitals as well as to restrict costs, cities should invest more in decentralised and domicile care provision by facilitating the formation of informal support networks around older people.

Also, more emphasis on prevention and awareness raising are necessary among younger generations. Children seeking advice and information for their old parents can become a target audience.

Volume 2

# approaches and good practices of policy design

- 1 Introduction
  - 2 Help! We're getting older!
  - 3 Strengthening your potential for success
  - 4 A catalogue of age-friendly practices
- Appendix: additional good practices

Volume 2, Chapter 1

# Introduction



# 1 Introduction

After reading volume 1, you will probably have a good idea of which challenges cities face regarding population ageing, and what should be done. But you may still wonder *how* this should be done. Which steps should I take myself as a policy maker, professional, volunteer or whatever stakeholder working with older people?

Many local authorities are in search of proper ways with which the challenges associated with ageing can be tackled. Cities are not alone in this endeavour. Throughout the EU, many places face demographic developments with an increasing share of older inhabitants. These places all encounter similar challenges and attempt to find solutions for these challenges. Where some cities struggle, other cities manage to devise practises to deal with the challenges. Innovative ways of supporting older people are emerging across Europe and it would be unfortunate not to share these ideas with the rest of the European community.

Following the policy recommendations in volume 1, it is now time for practical solutions. In this volume, we present such practical examples. They are based on the ESPON ACPA study, which revolves around the attempts of eight different European cities (Amsterdam, Barcelona, Gothenburg, Greater Manchester, Hengelo, Nantes, Oslo and Zaragoza) to become age-friendly cities. Each city develops its own approach towards dealing with ageing, with different priorities in varying policy domains. The best practices from these approaches are gathered in a condensed form in this practical guide.

The practical guide can be used as a starting point for local authorities and policy makers that wish to learn more about successful age-friendly practices. It starts with practical, yet general ways of working which help to achieve outcomes of the policies in a more effective and efficient manner. These ways have been structured around the policy cycle – helping you to improve the whole process from problem signalling to policy design, implementation and evaluation. Next, it contains good practices that relate to thematic challenges such as staying healthy, having access to proper transportation and housing, and topics such as social inclusion and participation.



Volume 2, Chapter 2

# Help! We're getting older!

## 2 Help! We're getting older!





We all want to stay healthy and active for as long as possible. However, as we grow older, it becomes increasingly difficult to do this. It is normal for older people to be less mobile. You could develop issues with your back for example, or have difficulties with your sight. These small physical problems can in turn prevent you from joining the social activities that you used to enjoy. On top of that, it may suddenly be hard to move around in your own house, because it is difficult to get up the stairs. You can see how these issues could add up to greater problems: perhaps you will have to move to a different house, away from your friends and family, and perhaps you will experience loneliness because you cannot move around freely anymore.

The situation described above is quite bleak, yet all too real for many older people. What starts as a small issue can culminate in a combination of problems that lead to uncomfortable situations. Age-friendly cities aim to prevent these situations, by helping people to stay healthy and active and to enjoy the activities that they want to enjoy, in their own living environment.

### 2.1 Age-friendly policy domains

Our story hints at a set of four main overarching areas or policy domains that are central to the development of age-friendly practices. Within these four, one can trace the eight WHO domains of an age-friendly city.

Table 2.1: Age-friendly city policy domains

 1. Housing and the built environment	<ul style="list-style-type: none"><li>• Outdoor spaces and buildings</li><li>• Housing</li></ul>
 2. Transport and mobility	<ul style="list-style-type: none"><li>• Transportation</li></ul>
 3. Health and care	<ul style="list-style-type: none"><li>• Community support and health services</li></ul>
 4. Social life	<ul style="list-style-type: none"><li>• Social participation</li><li>• Respect and social inclusion</li><li>• Civic participation and employment</li><li>• Information and communication</li></ul>

These four areas are closely interdependent and deterioration in one field could lead to a domino effect such as in our first example. At the same time this also means that measures that have one theme as primary goal will always contribute to the other themes to some extent. For example, age-friendly transport initiatives all have a main focus on transport and mobility, but also serve a social function, and contribute to improving life quality for people who otherwise might be confined to the boundaries of their own homes. We have to keep this in mind when good practices are being presented at a later stage.

## 2.2 What does our city need?

Policy makers should be aware of the main challenges for older people in their respective cities. Thorough problem analysis is a key start of any policy cycle and is essential for the formulation of effective policies. With a problem analysis, you can identify the challenges the city faces as the population gets older. This should be done through different data gathering processes, both qualitatively and quantitatively.






### Example of problem analysis: Amsterdam's age-friendly city plan

The city of Amsterdam joined the World Health Organization's Age-Friendly City network in 2015, and quickly started developing an action plan, which was eventually launched in 2016. A phase of thorough preparatory analysis, coined the "urban analysis", was the first step to arrive at the action plan.

In Amsterdam's problem analysis, there is one central aspect that plays a pivotal role, being quality of life for older people. This concept was the basis of the analysis to gain a clear overview of the current state of affairs across the city. In order to gain insight into the quality of life for older people in the city, an analysis was made in two different ways:

1. A quantitative, statistical analysis on the neighbourhood level. The seven city districts (stadsdelen) have a total of 96 neighbourhoods, for which data was collected that reflect the quality of life for older people. Table 2.2 provides an overview of the data with a description of indicators used.

Table 2.2: Possible indicators for measuring quality of life on the neighbourhood level

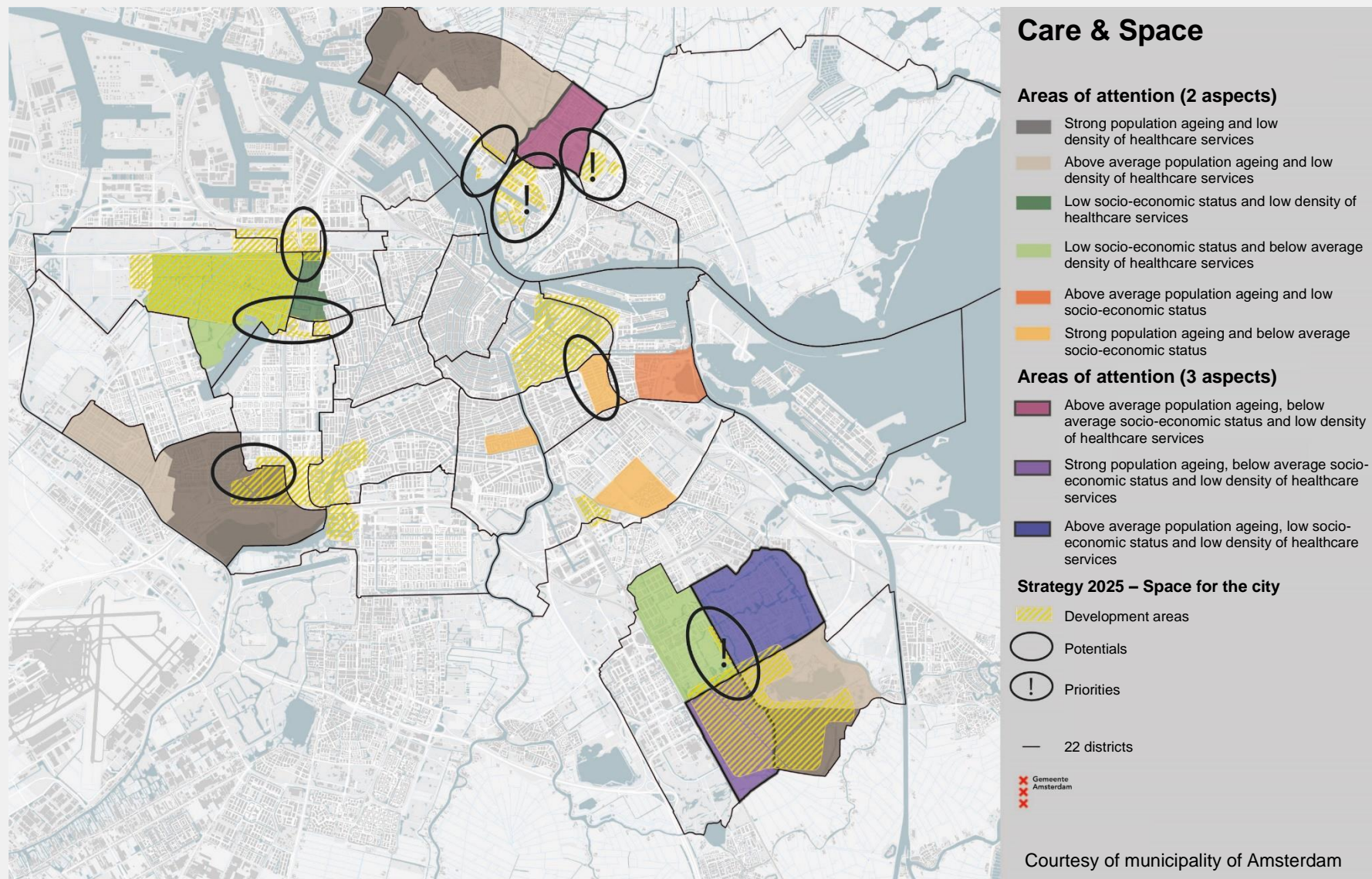
Indicator	Examples of measurements
 Demographic development	<ul style="list-style-type: none"><li>• Share of people aged 65 and over;</li><li>• Increase in number of people aged 65 and over;</li><li>• Projected number of people aged 65 and over in the future.</li></ul>
 Socio-economic status	<ul style="list-style-type: none"><li>• Average disposable household income;</li><li>• Share of households with low education and low income;</li><li>• Share of non-western migrants.</li></ul>
 Healthcare supply	<ul style="list-style-type: none"><li>• Number of healthcare services per 10.000 inhabitants;</li><li>• Split into hospitals, general practices, physiotherapists, daytime activities.</li></ul>
 Supply of other public services	<ul style="list-style-type: none"><li>• Number of cafes and other hospitality services, cultural venues and other cultural services; retail shops.</li></ul>
 Connectivity (transport options)	<ul style="list-style-type: none"><li>• Train, tram and metro lines;</li><li>• Bus stops.</li></ul>

However, this data was then turned into meaningful maps, showing particular areas of concern based on the different indicators mentioned above. Figure 2.1 shows such a map.

2. Qualitative consultations of older people. In each of the seven city districts, focus groups with older people were conducted to discuss their perception of urban daily life, with particular attention to challenges and barriers perceived, and how to tackle these problems.

Such a preparatory problem analysis can be a very effective mechanism to know which neighbourhoods need most attention, and what kind of policy themes and programmes should be developed to support the older people that need it the most.

Figure 2.1: Urban analysis map, showing areas of concern regarding the age-friendly city action plan

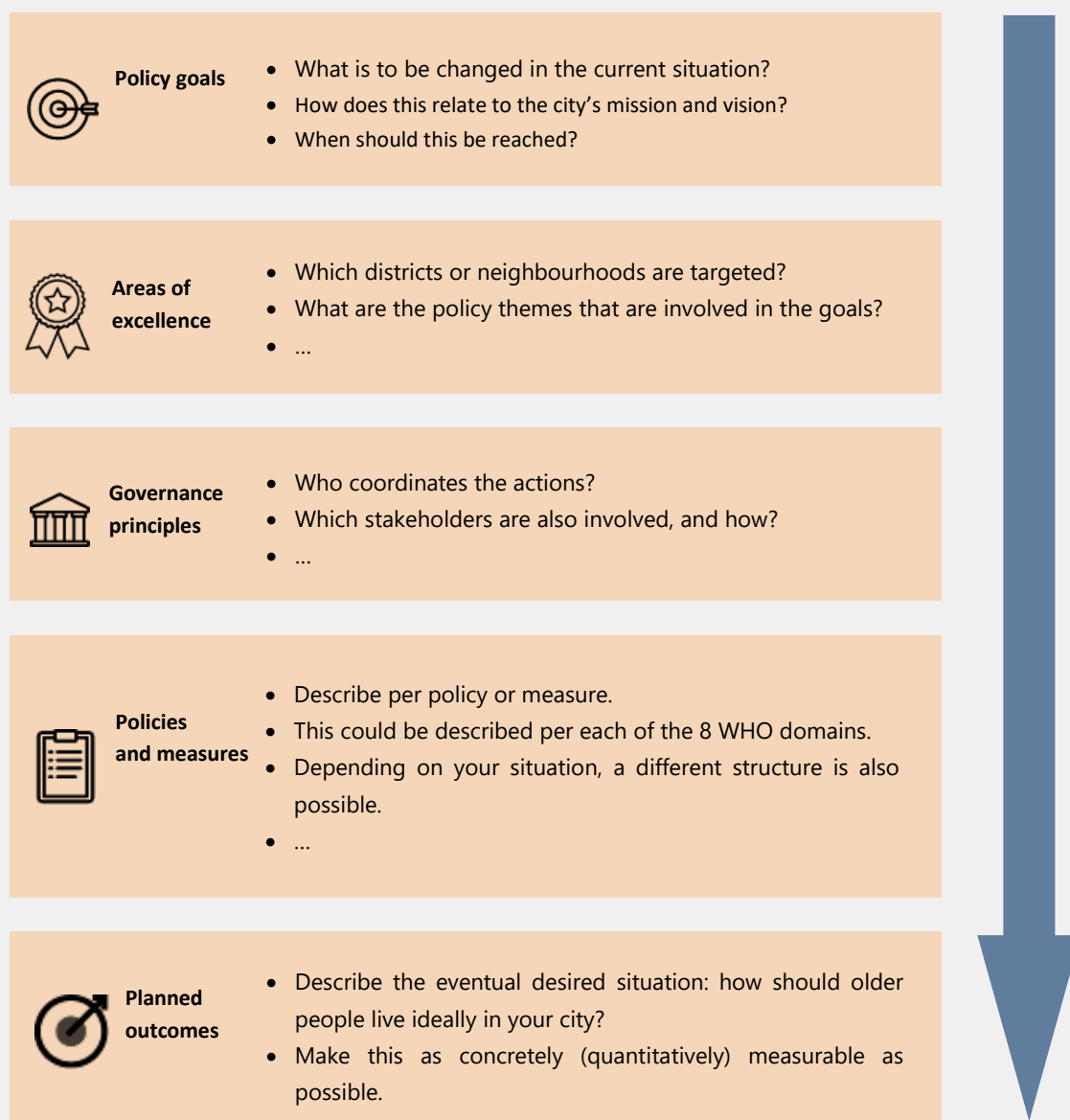


## 2.3 Towards an action plan

As a result of your problem analysis, write out the challenges you have encountered. They will most likely fit one or multiple of the policy domains described above. Keep in mind that most of these challenges are cross-cutting and will entail multiple domains at the same time. Once you have finalised this problem analysis, you can start thinking about policies and measures to tackle the challenges.

It may be helpful to structure this – and how you plan to counteract the challenges identified – schematically. The example below provides a possible way of formulating goals and translating them into actions and planned outcomes. The scheme below is meant for structuring the action plan as a whole, but it is equally usable for structuring individual policies and measures.

Figure 2.2: Age-friendly strategy diagram



Source: own elaboration by service provider

Volume 2, Chapter 3

# Strengthening your potential for success



### 3 Strengthening your potential for success

The previous chapter provided the insight that good urban ageing policy requires preparation and strategy development. For the latter a scheme was provided to work out a mission, vision and strategy. The last part of your strategy should contain a plan for concrete initiatives. You could be in the situation where you are improving your current policy programme, or in a situation where you want to start a brand new initiative.

In this chapter, you will find several practical tips that will help you to effectively and efficiently deliver support to older people. Going through the various steps of the implementation process, we provide you with tips on how to create more support for your plans, how to effectively reach the target group, how to administratively arrange the process, and how to make the implementation a process of ongoing learning and improvement.

#### 3.1 Participatory methods to create support

Still too often, governments are inclined to develop policies and initiatives from behind the drawing table, making little or no use of valuable expertise that is present in the neighbourhoods which the initiative is focusing on. Such expertise can come from residents that have lived in the area for a long time and know a great deal about local trends and developments – regardless of their age. Or from older people that will have to use the services being developed, making it crucial to check whether the planned initiative will meet their needs and wishes. There are multiple ways of collecting and making use of these valuable resources.

##### Public consultations

The first way of participatory practice is to organise open public consultations for older people, where they can express their opinions on current developments and policy initiatives.

In most cities, there are advisory boards consisting of older people that critically reflect on new policy initiatives. While these boards are necessary, a point of attention is that they are usually comprised by relatively vital older people. Often, they have a relatively high socio-economic status and have been politically and/or socially active for a significant part of their lives. The efforts by these engaged citizens should be cherished, but it is worth pursuing the views of the less active, more frail older people as well.

The older people advisory boards can of course reflect the views of these less active, more frail older people, however it would be preferable to hear their voices directly. As shown in figure 3.1, the city of Oslo organises open public consultations where all kinds of older people are invited to reflect on their life in the city and what needs to be done to improve it.

Figure 3.1: Public consultation in Oslo



Picture courtesy of city of Oslo

### Older people as co-researchers

The next step is not only the feedback of the older people, but to actively involve them in the process of looking for improvements. Multiple cities have successfully employed older people as so-called 'co-researchers'.

Greater Manchester can be seen as a pioneering city in this regard. Supported by Professor Dr. Tine Buffel (University of Manchester), older people have been trained in research methods and urban planning. This enabled them to conduct research in their own areas, looking for improvements from an age-friendly perspective. The academic support and advice was provided throughout the whole process.

The co-research activities included:

- Focus groups with local older people and representatives of community organisations;
- Interviews with 'hard-to-reach' older people (i.e. those who experience poverty, social inclusion or health problems), focusing on their perception of life in Manchester and what should be done to improve their quality of life;
- Reflections on the research methodology, and how to get better access to older people;
- Participatory observation in public space to assess the quality of spots such as parks, pubs, local shops and bus stops from an age-friendly perspective;
- Co-development of key research findings with the co-researchers, presented on leaflets;
- Organisation of dissemination workshops, bringing together older people, community organisations and other interested stakeholders to discuss steps to be taken.

*Figure 3.2: Older people in Manchester analyzing the situation for older people in their city*



*Picture courtesy of MICRA, University of Manchester*

The cities of Oslo and Amsterdam have similar experiences with letting older people assess the situation in their neighbourhoods. In Oslo, seniors assessed the quality of public spaces ("seniortrakk"), as seen in figure 3.3.



Figure 3.3: Older people in Oslo assessing the quality of pavements and street furniture



Photo courtesy of Oslo kommune

Involving older people as co-researchers has multiple advantages. In the first place, they tend to be better able to access hard-to-reach seniors than civil servants, and therefore they can help construct a more representative picture of how older people perceive quality of life in a city. Furthermore, it provides an effective way of activating older people. In their role as co-researchers, they make new contacts and keep up mentally – thus being also beneficial with respect to social participation, inclusion and health.

### Service provision by older people

One further level of involving people can be seen in the stage of service provision. In Zaragoza's Social gathering centres for older people ('Centros de Convivencia'), older people can fulfil a role as volunteer. In some instances, older people take the lead on the design and implementation of some of the activities. Older people can also help to deliver services as can be seen in [this video \(YouTube\)](#).

## 3.2 Cooperation for efficiency

Seeking smart approaches to governance can vastly improve efficiency of ageing policies. This does not only relate to the practical provision of services, but also to the cost efficiency. For example, this can be seen in two recent promising practices related to healthcare governance: the barrier model and the social trials.

### **Promising practice: Hengelo's barrier model**

The barrier model ensures cost efficient provision of care by cooperation between fourteen municipalities in the region of Twente, in which Hengelo is located. OZJT/Samen14 is responsible for the purchase, contract management and monitoring of childcare and social support. OZJT/Samen14 organises this for the municipalities of Almelo, Borne, Dinkelland, Enschede, Hof van Twente, Haaksbergen, Hellendoorn, Hengelo, Losser, Oldenzaal, Rijssen-Holten, Tubbergen, Twenterand en Wierden. By cooperating, administrative burdens can be reduced and it is also easier to develop new and innovative care solutions.

OZJT is responsible for € 210 million worth of contracts with care providers. In order to ensure the care provided is of high quality, the organisation makes use of a newly developed barrier model. With this approach, fraud in the care sector is prevented.

The approach consists of three phases. In phase one, potential providers are put up to strict requirements in a screening session. Providers that have committed fraud in the past, or have underperformed, are rejected. In phase 2, a pre-monitoring of the quality and legitimacy of providers is performed. If any risks are identified in this phase (e.g. lack of qualified employees), the provider will be subjected to further investigation. In phase 3, the results of the pre-monitoring are arranged alongside a list of risk indicators.

Based on these indicators, a provider either receives a 'red', 'orange' or 'green' light. This is an estimation of the risk that comes with contracting this particular provider. When a provider receives a red light, action is taken to either improve the providers situation, or disband any contracts that the organisation has with this provider. In this way, fraud is limited to a minimum.

OZJT consists of a relatively small core team. Per subject, a larger team is built up jointly with professionals from the different municipalities. In these situations, the local professionals work in the name of OZJT while they are formally employed by their local municipalities.

OZJT shows organisational innovation in two different ways. First of all, the cooperation between the different municipalities is innovative. The manner in which employees of the municipalities are working together in working groups with dedicated tasks, leads to stronger bonds in the region. In addition, jointly contracting services reduces administrative burdens and costs overall. Second, the barrier model in itself brings a novel way of testing and examining the quality and validity of care providers.

### Promising practice: social trials in Amsterdam

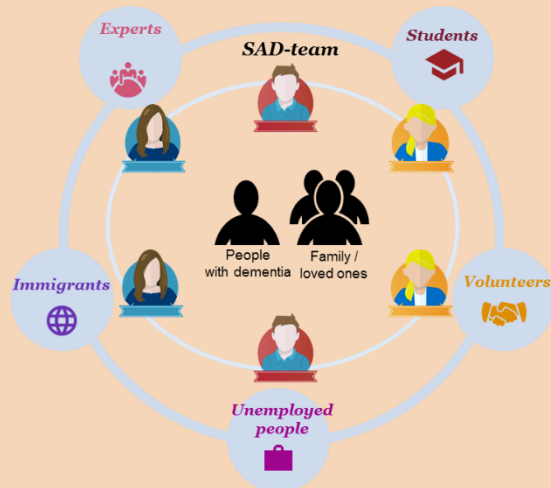
During the last years, Professor Dr. Anne-Mei The has developed the Social Approach to Dementia, as opposed to the traditional clinical approach.

The clinical approach treats dementia as a brain disease that can be solved in the end by effective medication. Not only does this incur high medical costs, it also leads dementia sufferers to believe that they have become incapable and dehumanized. Instead, what dementia patients desire the most, is to continue their normal life as much as possible, with their beloved ones. The's Social Approach to Dementia stresses not only the medical treatment, but also the effect on the personal life of the patients and their informal support network.

Together with PwC, Professor The has calculated that by pursuing a more social approach and allowing dementia patients to live at home for two additional weeks due to good supportive networks, the Dutch healthcare sector can save 700 million euros annually.

In order to test the model, The has started an experiment called the Social Trial – first in Amsterdam which has been expanded to multiple Dutch cities. In the Social Trials, support networks are formed by “maatjes” (buddies) as core, surrounded by nurses, psychologists, other healthcare profs, students, immigrants with a residence permit and other volunteers as backup. The support network tries to identify the type of care that matches with the needs and desires expressed by the person with dementia. For example, the network members pay home visits to chat with the person – since people with dementia desire to be treated as normally as possible – and do tasks such as daily shopping or arrange leisure activities for the person. Personal attention and creating a feeling of safety and cosiness are central in the approach.

Figure 3.4: Schematic overview of the support network



Courtesy of Tao of Care

The preliminary results show that:

- People with dementia in the social trials experience higher quality of life;
- Therefore, they have significantly lower desire of committing euthanasia;
- As a consequence of avoided hospitalization, healthcare costs drop significantly.

The Social Trials require extensive cooperation between different providers of care, ranging from municipalities to providers of short-term and long-term care. Currently, these are financed by different Dutch healthcare laws, creating a complicated customer journey and an inefficient allocation of healthcare budgets. The Social Trials therefore experiment with departmenting the current healthcare laws and budget. The concept is supported by Dutch minister of Health, Welfare and Sport, Hugo de Jonge. When the results are indeed convincing, the national dementia care system will be adopted accordingly.

### 3.3 Communication is key

It is one thing to design perfect policies and activities for older people. Yet, it is another thing to reach your target group with these envisioned services. Older people cannot be equally targeted as other population groups. It requires a special outreach strategy to ensure that older people will take notice of your plans and activities and that they will actually show up.

Communication is a very important element in such a strategy. Below, we have outlined a few useful tips related to, amongst others, succesful communication, which were gathered through historical experience.

#### Whom do I want to reach?

Everybody knows that a succesful communication strategy can be a convincing answer the five Ws: what, who, why, where and when? The logical answer to the question 'who?' may seem a simple 'all older people'. Still, *the* senior does not exist.

Roughly speaking, there are two different (sub) groups of older people: those between 65 years and 80 years, and those over 80 years. The latter group has been raised before or during the World War II with a spirit of collectivism and values care and support, though often feels uncomfortable to ask for it. These seniors rarely use digital devices. In contrast, the younger group, between 65 and 80 years, has learned to be more independent and to "seize the day".

Even so, the above picture is quite simplified. It does not necessarily include migrant older people, frail older people, older people that prefer cultural activities, or older people that prefer sports activities. Indeed, it is important to specify your target group very deliberately – otherwise there is the risk that a senior may feel excluded and not addressed at all.

#### Digital versus analog

Communication and marketing seems to be an increasingly digital phenomenon. However, experience teaches us that older people prefer analog channels over digital ones. This applies to a great extent to the group aged 80 years and over, but even the younger generation has this preference.

Alet Klarenbeek, founder of UP! – which is showcased in Volume 2, pages 32-33) – conducted research together with Dutch students on information use of older people. She concludes that most seniors obtain information through word-of-mouth advertising, usually from their children or other relatives and friends. Local newspapers are often a secondary source of information.

This finding is corroborated by most of the succesful examples presented in the next chapter. In most of these examples, it is concluded that the initiative's success (and continuity) is highly dependent on key figures, influencers who spread the message among their peers.

#### Content in the right language

Even though word-of-mouth advertising should be used in the first place, the additional deployment of printed media is desirable. With printed media, choices about content and language are to be made.

Older people tend to have relatively more difficulty with filtering valuable information than others. Therefore a letter, flyer or poster should be concise and its design should be clear and orderly, yet remaining appealing and welcoming. A clearly distinguishable header with an inviting and activating message is the first necessary element. Second, a photo or image is also effective. It should be easily relateable – for example, with a situation that is desirable or appealing for the person. The remaining space is for (concise) text. This combination should be presented with good use of contrast, since older people sometimes have difficulty with their sight.

In addition to the design, the right use of language is also important. The older the target group is, the more formal the use of language should be. Difficult words are to be avoided – one in six people have difficulties with basic literacy. What may be more important, is to avoid stereotypes and stigmatization. The very use of the words 'senior and 'older people' is to be avoided: seniors do not feel attached to these titles. The same applies to words such as 'art', 'culture', 'politics', 'philosophy', 'technology' and so on: a common reaction is that the senior does not qualify because he or she is not good enough at it.

Also, when describing services or activities, it is important to present background information along with the core information. For example, many older people would like to learn about the accessibility before they decide to go. That is: how to get there? And is the venue easily accessible? It is useful to include a telephone number, which the senior can use to obtain additional information.

### **The art of convincing**

Some older people are easily convinced, while others require more persuasion. Some practical tips can assist here.

One is to repeat the limiting thought. For example, refer to someone who also felt unqualified or inept, but who took the courage anyway and was completely surprised how positive his or her experience was.

Second, the use of targeted visual material can have a nudging effect. The use of photos that depict male participants has shown to attract substantially more men, compared to a photo of a predominantly female group of participants. This can come in handy for activities where it is traditionally hard to attract male seniors.

Lastly, let participants convince their own peers. Trust is essential here. Instead of civil servants or project representatives, older people themselves have a much bigger impact on other seniors in the neighbourhood, and are more likely to convince them than the traditional recruiters, because they are trusted.

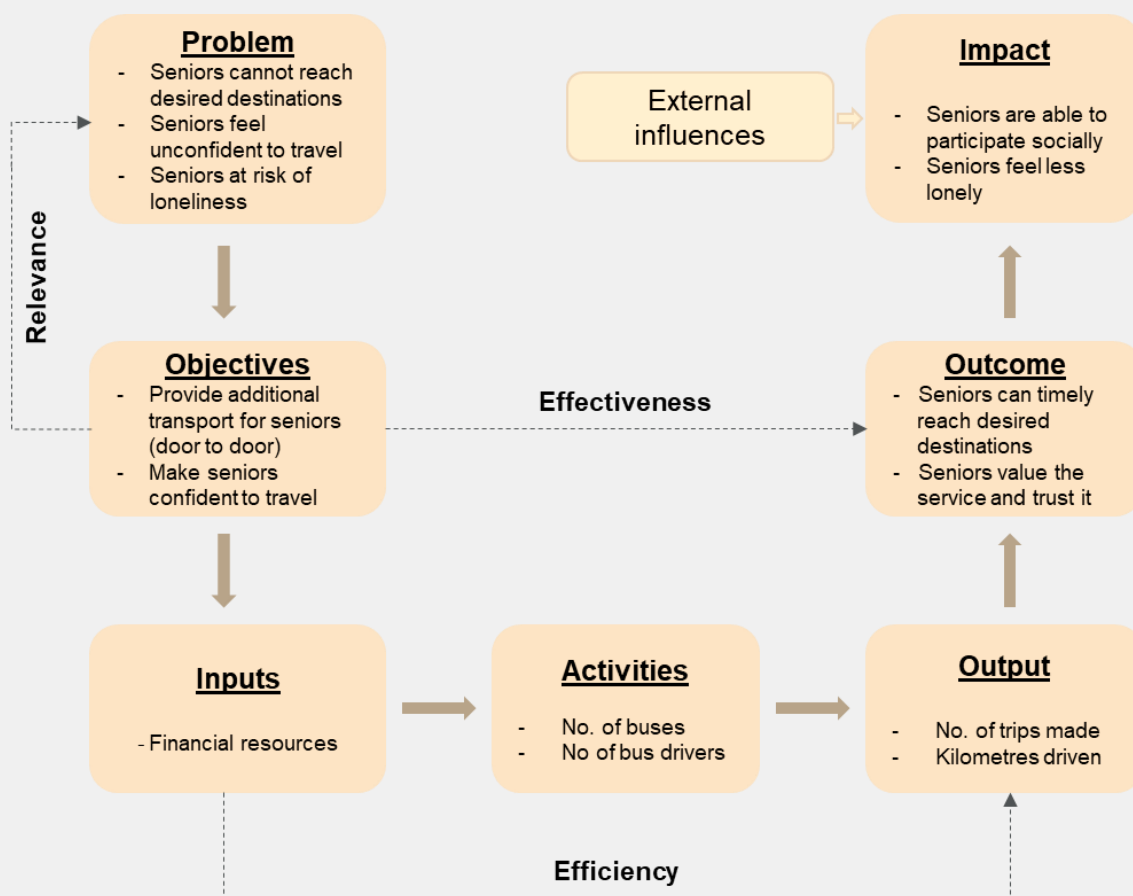
## **3.4 Learning from ageing**

Lastly, it is very important to ensure that your efforts for an age-friendly city are an interactive and iterative learning process. This involves policy evaluation. Evaluating your policies and initiatives provides you with conclusions about necessary improvements, and when the results are shared with other policy makers and practitioners, it provides them with useful insights to implement in their activities.

The first step to facilitate efficient evaluation is to have a clear understanding of your intervention logic. This defines the project objectives and expected outcomes in a measurable way. When this is clear, only then it is possible to assess the effectiveness of your policies and activities by comparing the initial and eventual situation.

Using the intervention logic, it is then possible to perform a mid-term or *ex-post* evaluation. Often, this uses an evaluation framework. It relates the objectives to the efforts made (activities and outputs) and the resources used for that (inputs), as well as the eventual results (outcomes) and longer term, higher level impact. Figure 3.5 outlines how such a framework could serve the example of the Rosa busser (p. 28-29).

Figure 3.5: Example of an evaluation framework



Source: service provider's own elaboration

### Learning from failures

It is worth mentioning that apart from focussing on successes and the factors that can be attributed to it, another valuable source for learning is to focus on less successful stories. In this regard, the example of La Libellule (Nantes) can be given. This was an initiative in the domain of transport, which has not been successful. The concept was to provide in two communes vehicles and voluntary drivers to support older people and other people with reduced mobility to move within their district. It was used by seniors primarily for medical appointments or going to the market. However, the ADT, which is in charge of the transport in Nantes Metropole, observed that only a few requests were made. The service was scarcely used. Among the main limitations was the fact that it was not possible to go outside the district, the limited timeslots in which the service was available and the fact that the procedure to request the assistance was not user friendly: it involved a complicated administrative procedure which was often not understood by the senior users. While the initiative does not represent a success, it did attempt to tackle a primary issue that older people, especially those with limited mobility, still face.

Another failure factor is the unnecessary use of technology to reach older people. In Amsterdam, the municipality hired a private consultancy company to monitor the 'Amsterdam narrates' project (appendix, p. 73). For the monitoring, an online survey was sent to older people involved in the programme. However, hardly any response was obtained, because older people found it too difficult to fill in the survey, or were not even aware of having been invited for the survey.

# In an age-friendly city...



## 1. Outdoor spaces and buildings

- There are meeting spaces with benches that have back rest and 45 cm seat height
- Public spaces provide a sense of safety and stimulate intergenerational meetings
- Streets have broad pavements (min. 2 m) that are free of obstacles such as loose tiles and manhole covers
- Streets are designed with heat resistance in mind: correct choice of materials (reflective, hard materials) and provision of cooling and shade by green and blue infrastructure
- Streets can be crossed safely due to traffic lights with long crossing times and zebra crossings)
- By means of ramps and elevators, buildings are accessible for wheelchairs



## 2. Transportation

- Older people can book flexible door-to-door mobility in advance
- Older people are assisted by bus drivers or volunteers to organise and undertake a trip
- Use of transportation comes at a reduced price for older people



## 3. Housing

- Older people are assisted financially and practically to make adaptations to their home, facilitating prolonged independent living
- There are residential communities for older people, with services and amenities closeby
- There are mixed residential communities that stimulate intergenerational contacts, for example students and older people
- Housing coaches provide assistance to older people in finding a more suitable home



## 4. Social participation

- There are public events for older people where they can discuss various topics related to ageing
- There is a network of actors working together to prevent loneliness
- Older people can use a discount card to attend cultural and sportive activities
- There are cultural activity centres where older people can become involved in the provision of services and activities themselves

# In an age-friendly city...



## 5. Respect and social inclusion

- There are initiatives that bring together different generations
- Older people from minority groups have tailored activities
- Older people from minority groups can discuss problems encountered related to racism and exclusion together and with city officials



## 6. Civic participation and employment

- People aged 50+ get assistance in finding a job or re-skilling
- There is eye for older peoples skills and capabilities they have to offer
- Older people can become volunteers in public services or initiatives
- There are channels for older people to report obstacles, hindrances or submit ideas for improvement of urban life for older people



## 6. Civic participation and employment

- There are information centers where older people can get information about public services
- Older people are doing research on the age-friendliness of their city themselves as co-researchers
- There are courses for older people to improve their digital skills



## 8. Community support and health

- There are supportive networks of healthcare professionals, relatives and volunteers around frail older people
- Relatives and other informal care givers around older people have the possibility to get relief temporarily
- There are sports groups tailored to older people
- There are culturally sensitive versions of proven interventions



Volume 2, Chapter 4

# A catalogue of age-friendly practices



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## **WHAT IF PUBLIC TRANSPORTATION IN THE CITY BECAME FREE FOR OLDER PEOPLE?**

Where: Gothenburg (as well as the rest of Sweden)

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## **WHAT IF OLDER PEOPLE THEMSELVES BECAME PARTIALLY RESPONSIBLE FOR SERVICE PROVISION WITHIN SOCIAL GATHERING CENTRES?**

Where: Zaragoza

How: More information on the social gathering centres can be found in the appendix

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## **WHAT IF OLDER PEOPLE BECAME RESEARCHERS OF AGE-FRIENDLINESS?**

Where: Greater Manchester

How: More information on co-research can be found in the appendix

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## **WHAT IF THERE WOULD BE SPECIAL MEETING AND SOCIAL ASSISTANCE GROUPS FOR OLDER MIGRANTS AND OTHER MINORITIES AMONG OLDER PEOPLE?**

Where: Hengelo

How: More information on the AVEM-groups can be found in section 4.5

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## **WHAT IF OLDER PEOPLE PRACTISED URBAN GARDENING AND SPORTS TOGETHER WITH YOUNGER GENERATIONS?**

Where: Oslo

How: More information on green and healthy city initiatives can be found in the appendix

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## **WHAT IF WE ALSO CARED FOR THE OLDER PEOPLE'S CAREGIVERS?**

Where: Nantes

How: More information on the Maison des Aidants can be found in section 4.8

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## **WHAT IF OLDER PEOPLE DEVELOPED A VIRTUAL NETWORK OF THEIR CONNECTIONS THROUGH A SMARTPHONE APP?**

Where: Barcelona

How: More information on the Vincles app can be found in the appendix

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## **WHAT IF PROVEN HEALTHCARE INTERVENTIONS WERE ADAPTED TO SUIT THE SENIOR'S CULTURAL BACKGROUND?**

Where: Amsterdam









How: An example can be found in the appendix (A Matter of Balance for Older Migrants)

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## 4 A catalogue of age-friendly practices

The ESPON ACPA study identified a group of age-friendly good practices that can help to tackle the different challenges that older people encounter. This chapter highlights eight examples – one per domain of the WHO's Age-friendly City framework and one per case study. This way, you will find at least one example that suits your policy area. You can share the remaining examples with your colleagues who are working on different domains related to population ageing.

Table 4.1: Overview of good practices presented, by corresponding WHO Age-friendly City domain

	Domain	Good practice example	City
	<b>1. Outdoor spaces and buildings</b>	Comercios amigables con las personas mayores (Friendly shopping)	Zaragoza
	<b>2. Transportation</b>	Rosa busser	Oslo
	<b>3. Housing</b>	Viure i Conviure (Living and Sharing)	Barcelona
	<b>4. Social participation</b>	UP! – een nieuwe kijk op ouder worden (a new perspective on ageing)	Amsterdam
	<b>5. Respect and social inclusion</b>	Arbeidsparticipatie Vrouwen Ethische Minderheden (Participation of migrant women)	Hengelo
	<b>6. Civic participation and employment</b>	Working well	Greater Manchester
	<b>7. Communication and information</b>	Life filming	Gothenburg
	<b>8. Community support and health services</b>	Maison des Aidants (House for Helpers)	Nantes

The majority of all good practices are aimed at social aspects. There are two explanations for this. First of all, social participation and inclusion is a main priority in the stakeholder cities. Second, the average cost of these measures is lower than measures in other fields. For example, the provision of free public transport for older people is much more expensive than the organisation of social activities with the help of volunteers. A downside of the social initiatives is that it is often hard to measure the effect of these initiatives. In cases where effects have been measured, this is mentioned in the text.

Following table 4.1, the eight different good practices are described in more detail. They can serve as inspiration for cities aiming to become more age-friendly. For each good practice, we have outlined:

- its design and delivery of services;
- its impact, looking at direct outputs and (longer term) impact;
- lessons learned – with special attention to the transferability of the example to other cities and contexts.

Should you have become interested in more inspiring examples, then you are recommended to take a look in the appendix (starting on page 43) for 25 more good practices. They can be found under the same colours corresponding to the eight domains, as in this chapter.

## 4.1 Outdoor spaces and buildings

Comercios amigables con las personas mayores (Friendly shopping)	
City	Zaragoza
Geographical focus	City-wide
Launched in; current status	2015; ongoing
Further information	<a href="#">Comercios Amigables. Ayuntamiento de Zaragoza</a> (online) <a href="#">Campaña Comercios Amigables Personas Mayores</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

The senior-friendly stores (Comercios amigables con las personas mayores) seek to create a network of local businesses that are accessible, easy to use, attentive and sensitive to the needs of older people.

They also foster the participation of older people, as they are responsible for assessing local businesses and advising on what changes may be required to make them age-friendly.

#### Target group

The initiative is open to all local business within the city of Zaragoza.



*Courtesy of City of Zaragoza*

#### Coordination and stakeholder involvement

The initiative is one of the actions identified by older people during the participatory diagnosis of the city that was conducted upon Zaragoza joining the WHO Network.

The Technical Office for Older People oversees the project and provides support both to the stores and the older people that are involved in the implementation of the initiative. The Office is also responsible for publicising and monitoring the results of the initiative. For this, the Office coordinates with other departments within the City Council to help dissemination.

### Effectiveness and impact

#### Impact

Approximately 670 stores are part of this initiative – 131 stores more than in 2018. As the network of Friendly Stores grows so does the awareness about the needs of older people. By focusing on enhancing the quality of the service provided, it also benefits other segments of society.

### **Monitoring of results**

The Technical Office for Older People regularly supervises the project, which was also assessed as part of the evaluation of the 2014-2018 Action Plan the city developed after joining the WHO's Global Network for Age-friendly Cities and Communities in 2011. Older people that took part in the evaluation positively viewed the role of this project, particularly as it relates to the physical accessibility of the stores.

### **Innovativeness**

New method: an important feature of this initiative is the involvement of older people in the assessment of the stores that apply to become part of the network of Friendly Stores.

### **Transferability and sustainability**

#### **Replication and conditions**

The initiative has not been replicated elsewhere yet. However, this initiative can easily be transferred to other settings, as it does not have any context-specific condition.

#### **Lessons learned**

Having older people assess stores for their "age-friendliness" and propose required changes is key to the relevance and effectiveness of this initiative. At the same time, the commitment from participating stores (which do not benefit commercially from this) is necessary for the initiative to succeed. In this sense, age-sensitive awareness campaigns conducting this initiative at community level, such that older people assess the stores in their proximity, also fosters the buy-in and support from the community and, most importantly, from participating stores.

## 4.2 Transportation

Rosa busser	
City	Oslo
Geographical focus	Nordre Aker; Sagene; Vestre Aker
Launched in; current status	2016; 2018; 2019; ongoing
Further information	Oslo kommune - Aldersvennlig transport (rosa busser) (online)

### Objectives, content and organisation

#### Design and delivery of services

The 'Rosa busser' concept is a door-to-door service available to people over the age of 67, with a driver who is trained in assisting older people with cognitive or mobility challenges. Age-friendly transport was developed as a response to the need for a flexible transportation system. It helps achieve the vision of allowing people to live independent, safe and active lives. Being independent has a great impact on public health as it prevents loneliness and isolation and contributes towards a social interaction, a sense of achievement and a newfound zest for life. It has the potential to contribute towards generating socio-economic value as it is a cheaper and more climate-friendly than other forms of transport offered to older people. The tickets are based on standard concessionary rates, at 18 NOK.

Age-friendly transportation is an initiative and collaboration between the transport company Ruter and its daughter company Konsentra and the municipality. Being positively received in the pilot city district of Nordre Aker, it has since become available in Vestre Aker and Sagene, and the user numbers are steadily increasing. The minibuses have 16 seats and room for one wheelchair. The number of buses available are dependent on the size of the city district. Thus, Nordre Aker has three buses, Vestre Aker has four and Sagene has one (2019).

#### Target group

The target group is those aged 67 years or older. The bus is also available to wheelchair users and rollator users. From September 2018 to July 2019 there were 1.833 unique users of the service, with an average of 2.56 users in the minibus at any one time.



*Photo courtesy of Ruter*

#### Coordination and stakeholder involvement

Age-friendly transport is coordinated and run by Konsentra, a subsidiary to Ruter; the public transportation company in Oslo and Akershus. It is currently fully financed by the Department for Older people, Health and Employment as the concept is relatively new and has not generated significant revenue yet from ticketing. The pilot on age-friendly transportation was run in the city district of Nordre Aker and it has since expanded to the districts of Vestre Aker and Sagene. There are plans to make it a city-wide service. System developers in Ruter have involved older people in the development of the new mobile application for the transportation system, to make sure that it was age-friendly.

### Effectiveness and impact

#### Impact

One of Oslo's main visions is to enable its senior citizens to feel safe, be active and included. Age-friendly transportation is key to ensure that this can be realised. The immediate output of the transportation system is connected to the ease of getting around, doing activities such seeing friends at a more regular basis,

running errands and continue to live as usual despite age and level of mobility. It is also an alternative to the taxi service, including the TT-service (adapted transportation), which lowers the threshold for use. In the long term, age-friendly transportation will contribute towards improving public health, especially mental health, as the users are meeting peers at a more regular interval. Age-friendly transport improves quality of life for a segment of the population which otherwise might have been confined within the boundaries of their own homes, and whom would be less inclined to use the services and activities across their city district.

### **Monitoring of results**

It is difficult to monitor change in life quality, but Ruter conducts user surveys and interviews. Konsentra keeps track of the number of individual users, number of trips and hours, and the number of people per ride. The city districts themselves, too, conduct user-surveys and can report increased life-quality amongst the users. The interviews additionally revealed that age-friendly transport is contributing positively to the users ability to socialise and be active for longer. The high number of uses per person shows the market gap and need that this form for transport is filling. The number of users is continuously increasing in the city districts where this is on offer.

### **Innovativeness**

Tailored transportation services are not new, but the social innovation of this service is novel to Oslo. The collaborative initiative between the city district and Ruter, and later with the Department of Older people, Health and Employment is also new, as it combines stakeholders that would not otherwise cooperate. Furthermore, it takes on and tests what is perceived to be the future of public transportation – an on-demand service directed by its users.

### **Transferability and sustainability**

#### **Replication and conditions**

The initiative will be introduced in Trondheim in 2020, which shows to the transferability of the initiative. The initiative is not dependent on specific conditions but may also work well in non-urban areas with greater distances and less access to public transport.

#### **Lessons learned**

There is a significant potential to continue the age-friendly bus initiative, especially if the financing model is re-evaluated. This type of age-friendly transport may help transfer a lot of the current users of the TT-services, and in that way save both funding and the environment. This transportation concept also indicates the need to work increasingly cross-sectorial to achieve an age-friendly city. One of the greatest lessons learned is how to broach cross-disciplinary topics in a way that appeals and is relevant to the various departments working to improve the lives of citizens in Oslo. This age-friendly transport has also demonstrated that it is instrumental in ensuring that older people feel safe, active and independent.

## 4.3 Housing

Viure i Conviure (Living and Sharing)	
City	Barcelona
Geographical focus	All city districts
Launched in; current status	1996; ongoing
Further information	<a href="#">Ajuntament de Barcelona - Programa Viure i Conviure</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Viure i conviure (Living and Sharing) is an inter-generational initiative where an older person hosts a student at home during the academic year. This combats loneliness among older people and offers free housing for young students, while promoting solidarity.

#### Target group

People with the following profiles can apply:

Hosts:

- At least 65 years old;
- Preferably living alone;
- Physically and psychologically able to carry out their daily activities autonomously;
- With a home meeting the minimum conditions in terms of liveability and hygiene;
- Willing to share their home;
- Able to speak Catalan and/or Spanish.



*Courtesy of Ajuntament de Barcelona*

Guests:

- Up to 30 years old (35 in the case of postgraduate, master's or PhD students);
- Enrolled at university;
- With no home in the city where they study;
- Willing to share time with their hosts and with a positive attitude towards older people;
- Willing to live with the hosts during at least one academic year;

A total of 86% of the hosts are women, aged 87 on average and 76% of the guests are girls aged between 18 and 23. Many of the students are of Latin American origin. Most 'couples' live in the district of l'Eixample.

#### Coordination and stakeholder involvement

In Barcelona, this initiative is managed by the Roure Foundation in cooperation with the Regional Government or *Generalitat* (Interuniversity Council of Catalonia) and the City Council. The Roure Foundation is a private, non-profit organisation which provides assistance for older people and their families. It operates in the neighbourhoods of Sant Pere, Santa Caterina and Ribera. These areas present a significant proportion of people aged over 75 and a high level of loneliness. Other stakeholders involved are the universities of Barcelona, Pompeu Fabra and Ramón Llull.



## Effectiveness and impact

### Impact

This initiative has been running for over 20 years with very positive results. In 2018, 190 senior citizens and young people (that is, 95 couples) took part in the project. Many participants have repeated the experience over several academic years. It has reduced loneliness suffered by older citizens and allowed young people from low-income families to pursue university studies at a time where housing prices in Barcelona are very high.

### Monitoring of results

Once a month, a professional (e.g. psychologist) visits the older person, while the student is regularly interviewed at the *Viure i Conviure* coordination office. Psychologists and social workers play the role of moderators and advisers, helping the participants with the co-living experience.

### Innovativeness

*Viure i Conviure* differs from conventional actions designed for older people, as it encourages them to stay in their homes while strengthening their social relationships. Its innovation also stems from the combination of two people in very different stages of their life, who do not know each other and typically end up developing emotional ties with each other.

This initiative touches several domains, such as housing, participation and inclusion, and community support. It goes beyond the material exchange, offering participants the chance to share experiences, provide mutual company and help each other. It also promotes the values of solidarity, mutual respect, empathy and tolerance

## Transferability and sustainability

### Replication and conditions

*Viure i Conviure* has been replicated in other Catalan municipalities such as Cerdanyola del Vallès and Sant Cugat del Vallès. It does not depend on specific local conditions, but could be more easily replicated in cities with high education campuses. Outside Catalonia, this initiative has been replicated in other Spanish cities like Madrid and Valencia.

### Lessons learned

The fact that many couples continue living together for several academic years shows the potential of intergenerational initiatives to improve the lives not just of the older people, but also of the community. They also result in a more efficient use of public resources, as the older people participating in these activities stay in their homes and tend to present a positive state of mind, thus requiring no alternative housing and generally less medical attention to tackle mental health issues.

## 4.4 Social participation

UP! – een nieuwe kijk op ouder worden (a new perspective on ageing)	
City	Amsterdam
Geographical focus	City wide
Launched in; current status	2017; ongoing
Further information	<a href="#">UP! - een nieuwe kijk op ouder worden</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

UP! was founded by theatre producer Alet Klarenbeek, who noted that public opinion about ageing tends to be negative, that certain ageing topics are taboo and that older people do not easily talk about ageing. She wanted to use theatre as a medium to open up older people's hearts and to spread a positive image about ageing. This is done via four products:

- **UP! Talkshow:** regularly scheduled talkshows with “a bit of talk and a bit of show”. These talkshows are about diverse themes, but always sensitive ones. Themes include meaning of life and regret of things seniors did not do during their life, dementia, loneliness, preparation for end of life, but also music, technology and intimacy. The talkshows always have an interactive element, and a scientific expert is also present to provide input.
- **In je Uppie:** a smaller scale version of the talkshows, with a more intimate atmosphere. This allows the participating older people to have more conversation with each other about sensitive topics.
- **(Regional) events,** usually in the form of conferences, where innovative approaches to ageing are showcased and discussed by older people and providers of these solutions. Recently, the possibilities of serious gaming to assist physical exercise were explored.
- **Specials** (special events), commissioned by companies or institutions.



Left: UP!Talkshow; right: In je Uppie Magazine with reports of sessions.  
Photos courtesy of Marlise Steeman and Marije Kuiper.

#### Target group

There is no explicitly defined target group in the approach of UP!, meaning that all older people are welcome and encouraged to participate. One of the key elements of the approach is that the content should be highly accessible for ordinary people.

## **Coordination and stakeholder involvement**

The UP! organisation coordinates the events to guarantee that the delivery is according to the original formula (see Lessons learned). In every event, special guests are invited as speaker or similar interactive element, often scientific experts, but also artists and celebrities.

## **Effectiveness and impact**

### **Impact**

The UP! Talkshows have 175 participants on average, sometimes up to 250. For the In je Uppie sessions, this is between 20 and 30 participants. The biggest impact is the activation and empowerment of older people. According to the participants, the events are a good medium to:

- Provide space for meeting, discussion in a safe environment and participating in a group process (mentioned by 94%);
- Reflect on important societal and personal questions (61%);
- Be seen and heard (52%);
- Gain more insight in one self and one another (29%);
- Feel part of a community (21%).

### **Monitoring of results**

*Ex-post* evaluation is used. For In je Uppie, a collaboration was made with prof. Maurice de Greef (Free University of Brussels), who performed in-depth interviews with the participants to learn about their motives and to find out what is so succesful about the product. The regional events are sometimes evaluated by means of online surveys, though not systematically.

## **Innovativeness**

Focus on novel needs: UP! facilitates a platform for discussion about sensitive topics, while maintaining an informal atmosphere. Also organisational innovation: interested leading figures in other geographical areas can apply to implement UP! in their region.

## **Transferability and sustainability**

### **Replication and conditions**

UP! has not been replicated in other regions yet. However, there are some conditions for transferability. The UP! methodology should be followed, and a skilled discussion leader is necessary who acts accordingly – meaning no judgment, no interpretation and no help or intervention. Even though financial resources are necessary, this need is relatively modest.

### **Lessons learned**

A couple of factors are responsible for the success of UP!. This has mostly to do with its style of communication: asking older people open questions (what are your needs), the use of everyday language, acknowledging that ageing is a dynamic process and no judging. UP! challenges older people to become active, but does not problematise ageing nor does it advise older people how to live their lives.

## 4.5 Respect and social inclusion

Arbeidsparticipatie Vrouwen Ethische Minderheden (Participation of migrant women)	
City	Hengelo
Geographical focus	City wide, 11 local groups
Launched in; current status	2016; ongoing
Further information	<a href="#">Wijkkracht – AVEM-ontmoetingsgroepen</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Older people that immigrated to Hengelo often face similar challenges: they have a less favourable socio-economic position, suffer health problems at a younger age and are less self-reliable than other older people. AVEM-groups help these people deal with their challenges.

AVEM-groups (Arbeidsparticipatie Vrouwen Ethische Minderheden; Participation of migrant women) function as meeting places for older people who speak Turkish, Suryoyo or Arabic. In the groups, participants *and* volunteers communicate in their mother tongue. The participants develop and maintain social contacts and have the opportunity to ask questions or help one another with questions they have. Participation costs € 1 per time, which includes a cup of coffee or tea.

The AVEM-groups have an important underlying objective: prevention of unnecessary use of the formal healthcare system. In the Netherlands, older people can ask the municipality to arrange care, like daytime activities, support with doing groceries or help with cooking. While this is a great system, for some people it is tempting to apply for these services while they are not yet fully necessary. The AVEM-groups help the older people to stay active. At the same time they provide social workers with deeper insights in the personal needs of the target group and of individual participants. This helps in the assessment of requests that the municipality receives for additional care. Through this programme, unnecessary care is prevented, with estimated healthcare cost savings of € 170.000 per year.



*Photo courtesy of M. Sumer*

#### Target group

The target group of the initiative is non-western immigrants aged 55 years or older. In Hengelo, there are three main groups of immigrants: Turkish labour immigrants that arrived in the 60s, Suryoye refugees that arrived in the 70s/80s and other refugees from Arabic countries. AVEM-groups are organised for these different groups of older people.

## **Coordination and stakeholder involvement**

The activities are organised by Wijkkracht, a welfare organisation. Next to a project leader, there is involvement of two professionals for 28 hours per week and there is a group of 22 volunteers.

## **Effectiveness and impact**

### **Impact**

Since the inception of the AVEM groups in 2016, the number of participants has grown significantly, from 134 individuals in 2016 to 239 individuals in 2018. According to the 2018 evaluation of the AVEM groups, the initiative prevented the use of government help in 164 cases. This has clear financial benefits for the local government as indicated earlier.

Aside from these quantitative results, the AVEM groups realise their biggest impact in changing the mind-set of older immigrants. First of all, they help the target group to understand the system of care in the Netherlands. This prevents misuse of the system. Second, the older people are stimulated to act more independently. Where family based values are central in the cultures of the target group, within the Dutch society this is often less important. Through the AVEM-groups, older people develop a stronger sense of self.

### **Monitoring of results**

The AVEM-group results are monitored and reported twice a year. The evaluation of the results is done by the project leader. As main source for the evaluation, the registration of participants is used. There is also information available on the use of formal care by all of the participants. There is regular contact between formal care providers and the social workers that are involved in the AVEM groups. Therefore, decrease in / prevention of formal care use can be registered.

### **Innovativeness**

Organisational innovativeness: The organisation of the AVEM-groups is key to their success. There is direct contact between the professionals of the municipality, the volunteers and the formal care providers. In this way, in depth knowledge of the situation of the participants is shared which helps to make a proper assessment of the needs of the individuals.

## **Transferability and sustainability**

### **Replication and conditions**

The initiative has not been replicated elsewhere yet. It is not highly dependent on local conditions, though there are a few important factors that should be taken into account. An important factor for the success of the initiative is the availability of volunteers that are able to speak in the native language and understand native culture. Additionally, the groups should be organised on a weekly basis to ensure consistency and encourage change and learning.

### **Lessons learned**

Integration between formal care and AVEM is valuable because the AVEM professionals have additional insights in the wellbeing of the individuals. The AVEM system could also be applied in a broader context (e.g. with non-immigrants), though the need probably is less big because in the case of non-immigrants the language and culture differences are not relevant anymore.

## 4.6 Civic participation and employment

Working well	
City	Greater Manchester
Geographical focus	City-wide
Launched in; current status	2014; finished, but follow-up has been launched
Further information	<a href="#">Greater Manchester Combined Authority – Working Well</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Working Well began in March 2014 as a pilot programme which provided support to 5,000 benefit claimants (of all ages) who had completed the government's Work Programme but had not found work. The aim of the pilot was to improve all clients' work readiness, and achieve job start outcomes for 20%, with 75% of those sustaining employment for at least one year.

At the heart of the Working Well pilot programmes is the notion of providing intensive, personalised support, fully integrated into Greater Manchester's public services. There are various key elements to this:

- The programme was designed around the principles of intensive and holistic support from a 'key worker' who draws on, sequence and integrate other public service interventions to support people to address presenting issues that hold them back from starting work
- Local authority based 'local leads', Integration Boards, and Local Delivery Meetings ensure buy-in from, accountability to, and responsibility for local authorities in the delivery, with a key role in enabling effective integration.

In April 2016 the pilot programme grew, expanding its offer support to a further 20,000 people across a more varied client group. The 2014 Devolution Agreement gave Greater Manchester the responsibility to co-design (with the government's Department for Work and Pensions) and commission a devolved equivalent to the new national Work and Health programme. Greater Manchester's Working Well: Work and Health Programme started in early 2018 and will run until 2024, supporting a further 23,000 people.

#### Target group

Working Well has adopted a whole population approach to health, skills and employment, working with unemployed people of any age, including older people aged 50+. The programme is committed to continued development of support packages that target Greater Manchester's challenges in ageing populations, disability unemployment, those at risk of or that have already fallen out of employment due to poor health.

#### Coordination and stakeholder involvement

Key to Working Well's model is local collaboration through a consistent and shared strategic approach from outset. The Working Well programme in its design and delivery has remained closely aligned with the Greater Manchester Strategy.

### Effectiveness and impact

#### Impact

To date the Working Well has supported over 4,000 people into work and has supported over 20,000 clients across a complex range of skills, mental health, physical health, housing and financial needs. The programme has supported clients aged over 50 to a great extent, with a larger proportion of the cohort receiving employment, health and skills and qualifications support compared to those aged under 50. There have been 645 job starts for clients aged over 50.

## **Monitoring of results**

Match funding from the European Social Fund (ESF) has complemented work around data capturing and evaluation. Greater Manchester has built on ESF results and outcome requirements to measure employment sustainability in more depth. The continuous learning supported by independent evaluators has influenced the development of the next phase of Working Well programmes.

## **Innovativeness**

To support the approach further, a bespoke Working Well: Early Help Project which aims to support 11,000 people either at risk or newly unemployed. The project went live in March 2019.

## **Transferability and sustainability**

### **Replication and conditions**

The Working Well programme has helped to shaped the design of the national Work & Health Programme, which was devolved to both Greater Manchester and London. Key data sharing agreements made with HMRC to provide Real Time Earnings (RTE) evidence to corroborate employment starts and earning levels has also been significant. Earnings evidence will provide a better picture on the quality of employment. Over time, this should represent a more accurate measure of a programme's success, rather than based on providers using resources to confirm outcomes with residents and employers.

## **Lessons learned**

Local commissioning and management is perceived to be central to the success of Working Well programmes. Greater Manchester has aimed to ensure their Working Well programmes have been designed and delivered to:

- Meet the needs of local people in recognising local ward level challenges to clients in terms of barriers to employment (health, skills, housing etc.) as well as understanding local access/existence of appropriate services to meet such need;
- Joined up approach to provision whereby local authorities are jointly (with Greater Manchester Combined Authority) responsible for their local performance, local integration of local services to Working Well programmes and customer experience.

## 4.7 Communication and information

Life filming	
City	Gothenburg
Geographical focus	The method has been used in several neighbourhoods
Launched in; current status	2014; ongoing
Further information	<a href="#">Life filming</a> (Göteborgsregionen, online); <a href="#">research paper</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Life Filming is a method that has been used in Gothenburg as a way to introduce modern technology to seniors and at the same time allowing them to share their experiences, needs, memories and knowledge. The method focuses on content and form, using images and videos as a point of departure. Employing this method, seniors have used tablets to make their own films, for example, about what is good in their local area and what kind of improvements are needed. The purpose has been to increase participation and gain a better understanding of how older people see and experience the urban environment while also introducing new technology to seniors.



*Photo courtesy of Christian Falk*

#### Target group

Life Filming has been used with seniors in Gothenburg, but this participatory method has also been used with other groups, such as children and youth as well as people with disabilities.

#### Coordination and stakeholder involvement

*Life Filming* started as a joint project between the Health Promotion and Prevention Unit at the City of Gothenburg, city district Centrum, and the Centre of Culture and Health at the University of Gothenburg. Life Filming is inspired by the artistic methods used in Barnfilmskolan (children's film school) at Valand Academy at the University of Gothenburg. The first Life Filming workshop was held in 2014 at Mötesplats – Kulturhus, a cultural centre for senior citizens in the city district Centrum.



## **Effectiveness and impact**

### **Impact**

Following the first Life Filming workshop that was held in 2014, in the Centrum district, more than 120 participants have created films and images in a total of 11 workshops. The method has also been used in several other neighbourhoods in Gothenburg.

### **Monitoring of results**

The results of life filming as a method have been monitored by evolution studies that have been initiated by the Gothenburg Region.

One of these evaluations, published in 2016, studied how well-suited this method is for enhancing participation among seniors and youth and gaining their perspectives. The evaluation found that seniors viewed Life filming much more positively than younger participants. Among the positive aspects and advantages concerning this method that are mentioned in the evaluation is that it made participants more conscious about their surrounding environments, and that it promotes exchange between different generation. From an urban planning perspective, practitioners found the method to be a new way of engaging in citizen dialogues and gaining the perspectives of different age groups that can be used to support planning.

The method has also been evaluated in a scientific article: Gustafsson et al. (2017) Life filming as a means of participatory approach together with older community-dwelling persons regarding their local environment. A web link to this paper can be found in the table on page 38.

## **Innovativeness**

The main innovativeness of the Life Filming method could be considered its basic idea of introducing new digital technology to older people, who are not always comfortable using modern technology, while at the same enhancing participation. As our societies become more digitalized, digital exclusion is a major challenge that especially older age groups are facing, and against this backdrop Life Filming is a method that can help seniors improve their digital skills in a creative way.

In addition, as the method allows the users to share their knowledge, perspectives and needs, it can also be a way to gather new insights in a visual form. As the method is based on visual images and videos, an advantage is also that it may be a way of gaining perspectives that otherwise might be difficult to communicate verbally or in written form.

## **Transferability and sustainability**

### **Replication and conditions**

City officials in Gothenburg are not aware of the method being replicated in other cities, but the method is not in any way context dependent and could easily be replicated elsewhere.

### **Lessons learned**

One of the lessons learned mentioned in the evaluation report of the method is that it is important that the instructors and the participants have clearly defined roles. Especially for the older participants, it is also highlighted as important to ensure that they have enough time to get accustomed to using the tablet.

## 4.8 Community support and health services



Maison des Aidants (House for Helpers)	
City	Nantes
Geographical focus	City-wide
Launched in; current status	2009; ongoing
Further information	<a href="#">Maison des Aidants – plaquette de présentation</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

The Maison des Aidants (House for Helpers) responds to the need to provide support to the Aidants (or the helpers) of people who suffer from neurodegenerative illnesses. While the attention is usually focused on the patient, the needs, difficulties and fragilities of these people are often overlooked, first and foremost by themselves. This initiative by the CCAS provides a space that offers moral support to these individuals, through the provision of expert medical advice (mostly psychological) and care, but also through the offer of leisure activities to leave the routine or strengthen ties with the old person they support. It therefore combines a focus on individual and convivial needs. It also offers the helper the opportunity to take time off and take care of the helped as well as provide training and education activities to assist them in their role. In the near future, they would like to develop domicile services, and for instance allow psychologists to visit the families at home. Most of the new users are referred by their doctors or pharmacists, or by word of mouth, although the initiative is widely promoted by the city as well.

#### Target group

According to the association, 50% of the beneficiaries are family members, most of them are women. Few men, and only about 10% are children of the old person.

About 500 beneficiaries are supported every year. So far, very few professional helpers have been engaged (only 2 or 3 per year). For the largest part, and although the service is free, it is mostly families with a middle-high income that make use of this service so far. According to the association, this is probably due to a mind set and cultural dimension.



Photo courtesy of Ouest France

#### Coordination and stakeholder involvement

The initiative is based on a strong network of partners, which provide financial (city) and operational support. This includes the contribution and participation of professionals (doctors, psychologists). Partners include the Centre hospitalier, and notably a centre on neurodegenerative illnesses, the CLIC, associations of families, the CCAS and other institutional services.

## **Effectiveness and impact**

### **Impact**

The work of the Maison has already reached a vast number of people and families. Progressively there is less and less hesitation by helpers to benefit from this support –resulting in a change of mind-set in that respect. The effects of the assistance are not only beneficial for the helpers but also for their assisted. The number of beneficiaries has been growing steadily over the last years and the association is progressively expanding the array of services and facilities. The Association observes an improvement in the attitude of the helpers, lower stress level, improved engagements and better preparedness for assisting their loved ones.

### **Monitoring of results**

An annual evaluation survey is spread among the users to monitor satisfaction levels; so far results have been positive. A Consultative Committee of the users has been put in place to evaluate performances in order to help refine the approach. There are other evaluation groups in place, more informal, which are also more effective in terms of mobilising participation.

### **Innovativeness**

The main novelty element is represented by the very specific target group, often overlooked. The initiative also combines focus on conviviality, human attention, and moral aspects. In addition, the combination of expert support and advice, the training and educational dimension as well as the more leisure related activities make the initiative unique in its type.

## **Transferability and sustainability**

### **Replication and conditions**

There are 130 similar platforms in France. The Maison des Aidants however is the only one offering the contribution of social experts as a distinctive aspect, which makes it unique. In order to replicate a similar initiative it is essential to have a strong network of stakeholders willing to contribute as well as the financial resources to pay salaries for these professionals. In smaller cities what could be considered is to have such a platform to run on a part-time basis, depending on the local demand but also availability of resources and time.









### **Lessons learned**

One of the main obstacles encountered has been the resistance by potential helpers to accept help and support. This is specifically true when going outside of the highly educated and relatively high-income groups. More should be done to engage and reach out to families from different social extraction, as well as cultural background to promote this service and assistance. Again, it is first and foremost a matter of awareness raising which the city should also support.

## Appendix: additional good practices

As part of ESPON ACPA, in total 33 good practices have been identified. Eight of these good practices have been highlighted in chapter 4: one per city and one per WHO age-friendly city domain.

Have you become inspired to learn more about good practices related to population ageing in European cities? In this appendix, you will read about the remaining 25 good practices:

	Domain	Good practice example	City
	<b>1. Outdoor spaces and buildings</b>	Green city initiatives from an age-friendly lens	Oslo
		Levensloopbestendige routes (Age-friendly routes)	Amsterdam
		Public-space checklist	Amsterdam
	<b>2. Transportation</b>	Flexlinjen (Flex line)	Gothenburg
	<b>3. Housing</b>	Lang zult u wonen (You shall live long)	Hengelo
		Logements bleus (Blue housing)	Nantes
		Senior House Pastor Fangensvei	Oslo
		Trygghetsboende (Safety homes)	Gothenburg
		Wooncoaches (Housing coaches)	Amsterdam
	<b>4. Social participation</b>	Aanpak eenzaamheid (Combating loneliness)	Amsterdam
		Carte Blanche (White card)	Nantes
		Centros de Convivencia (Social Gathering Centres for older people)	Zaragoza
		Cultural and inter-generational initiatives	Oslo
		Nos gusta hablar (We like talking)	Zaragoza
		O'Menu	Nantes
		Vincles (Bonds)	Barcelona
	<b>5. Respect and social inclusion</b>	Amsterdam vertelt (Amsterdam narrates)	Amsterdam
	<b>6. Civic participation and employment</b>	Anmäl hinder (Report hindrance)	Gothenburg
		User involvement	Oslo
	<b>7. Communication and information</b>	Centres locaux d'information et de coordination – CLIC (Local information and coordination centres)	Nantes
		Collaborative research by Higher Education Institutions	Greater Manchester
	<b>8. Community support and health services</b>	GoldenSports	Amsterdam
		Salud en Red en Los Barrios (Health networks in the neighbourhoods)	Zaragoza
		Radars	Barcelona
		Strength and Balance Pathway	Greater Manchester
		Zicht in evenwicht voor oudere migranten (A Matter of Balance for Older Migrants)	Amsterdam

## 1. Outdoor spaces and buildings

Green city initiatives from an age-friendly lens	
City	Oslo
Geographical focus	City-wide
Launched in; current status	2016; ongoing
Further information	<a href="#">Den grønne ringen</a> , <a href="#">Havnepromenaden</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

There are various initiatives under the umbrella of greening the city of Oslo, and by that way making the city more accessible to its inhabitants regardless of age. Examples of such green social infrastructures include the 'Green Circle' (den grønne ringen) surrounding the city district centre of Berkje, *Hovinbyen*, where aspects such as easy accessibility, access to public toilets and ways in which younger and older generations may enjoy each other's company are considered. Other initiatives that have included aspects of age-friendliness are initiatives such as Havnepromenaden (harbour promenade) and Trettenparken (park), and car-free city centre initiative (bilfritt byliv). The Planning and Building Agency in Oslo municipality has been instrumental in this work and their newfound focus on age-friendliness is a great asset in the holistic approach to green infrastructure.

Local initiatives are centred around communal vegetable boxes, a pétanque-course, chess sets in sunny parks in the city districts and rickshaw-biking initiatives both as a taxi-service in some of the city's nursing homes. Rickshaw-bikes are also part of the local initiatives in e.g. Sagene, where older and younger inhabitants are providing velotaxi services to older people in the area. Trekking routes and shorter walks have been prepared by the Urban Environment Agency. Opening up recreational areas and parks may be done simply by placing benches at shorter intervals, generating increased opportunities for inter-generational contact. These green initiatives stem from the municipal action plan on making Oslo a greener city, and the city districts and the departments central to the municipality are adapting age-friendly policies under this green policy umbrella.



*Photo courtesy of Oslo Kommune*

#### Target group

The green initiatives are for those that are physically fit and those who are wheelchair-bound or otherwise impaired. Initiatives surrounding a green city is key to an age-friendly city, and it goes beyond universal design principles.

#### Coordination and stakeholder involvement

There has been heavy user involvement in ensuring an accessible city, and the green city initiatives for all is a great example of the width of age-friendly policy aspects when considered in cross-sectoral manner. Ensuring a greener and more accessible social infrastructure and places with agendas for the users requires close collaborations with departments outside the Department for Older People, Health and Employment. The Planning and Building Agency of Oslo municipality has been instrumental in this work.

## **Effectiveness and impact**

### **Impact**

Greening the cityscape is positive in many respects but in terms of older people it incentivises increased activity amongst older people and a more active use of the city itself. It facilitates social meeting spaces and contributes to better health and a sense of achievement. In the long term, it will mean a more accessible city for all including children, families, younger and older people.

### **Monitoring of results**

There is currently no monitoring in place but surveying the users of certain parks that has a newfound purpose, or new local initiatives may be an idea. The number of toilets has increased by one in the area of Sognsvann (Marka) and the city centre. Installing light and benches have increased in the recreational area of Marka and in city centre has a greater number of benches.

### **Innovativeness**

It is innovative in the sense that it gives new lenses to old practice and renews the perspective on parks and recreation to serve all in a better way. The way age-friendliness is incorporated as part of the supporting documents in the Planning and Building Agency's social infrastructure plans is also a witness of how age-friendly policies are compatible with and can be included in planning social infrastructures.

## **Transferability and sustainability**

### **Replication and conditions**

Various versions of this has been replicated elsewhere, such as the street improvements in the older parts of Trondheim. Green initiatives are highly transferrable but requires political commitment and cross-departmental collaboration at the municipality.

### **Lessons learned**

As for all age-friendly policies that go beyond the idea of concrete policy objectives, age-friendliness relies heavily on good and purposeful cross-sectoral collaboration. Thus, it is to be advised that age-friendliness is incorporated in ways that makes it a horizontal policy objective, often by way of a vertical governance structure.

Levensloopbestendige routes (Age-friendly routes)	
City	Amsterdam
Geographical focus	Indische Buurt, Kortvoort and Buitenveldert
Launched in; current status	2016; finished
Further information	Imke van Moorselaar (email)

## Objectives, content and organisation

### Design and delivery of services

The goal was to combine physical improvements of public space for older people with stimulating social participation and meetings. Therefore, this project could be seen as a combination of domain 1 (outdoor spaces and buildings) and domain 4 (social participation). In different neighbourhoods across the city, routes have been developed between areas with high concentrations of older people and areas with concentrations of services that older people regularly use. These routes guide older people past bus stops and public meeting spaces. This stimulates them to stop and have chats with their peers.

In each neighbourhood, older people have scouted the area to detect necessary adaptations. Along the route, physical adaptations have been made, including the placement of benches, accessible toilets, the creation of broad pavements that are free of obstacles, as well as livening up the area with a petanque court, a chess table and an artwork.



Soft map of age-friendly routes and measures to be taken. Courtesy of municipality of Amsterdam.

### Target group

The age-friendly routes have been designed for all older people, including those with disabilities. Geographically, the choice has been made to implement the routes in the neighbourhoods with the highest concentrations of older people.

### Coordination and stakeholder involvement

The municipality of Amsterdam has initiated the implementation of the age-friendly routes. Each area is being scouted and assessed by a team of older people, the municipality and local scientific experts. Before

the start of each new route, the municipality sets one condition: that the older people in the area set up a resident group which oversees the maintaining of the new elements along the route.

## **Effectiveness and impact**

### **Impact**

On output level, 34 adaptations to public space have been made, to make it more age-friendly. The outcomes of the routes are a more appealing public space, for multiple generations, and more social interaction in the neighbourhoods. Not only do the older people meet up more often, also youngsters come to the artworks to have lunch there. Moreover, the routes have become a connecting function, because the meeting spaces for older people have simultaneously become a playground for children, where older people watch after playing children.

### **Monitoring of results**

The project is monitored and in December 2019 an evaluation was published, which concluded that the measures have probably positively affected the mobility and social behaviour of older people in the investigated neighbourhoods. The conclusions have been taken with reservation, because no baseline measurement was available. In future evaluations, it is important to measure the situation before the intervention – for example the participant's social behaviour and mobility.

## **Innovativeness**

An innovative element is the fact that it is not a new project, but a follow-up of the existing process of co-research with older people. In a process of placemaking, the routes have been made together with older people.

## **Transferability and sustainability**

### **Replication and conditions**

In the Greater Manchester Area, similar efforts of making public spaces age-friendly through co-research and placemaking by older people have been made. A couple of local conditions are necessary for replication: careful involvement of older people, full cooperation of older people and the existence of meeting spaces that are landmarks along the routes to be created.

### **Lessons learned**

Good location analysis beforehand and a participatory, bottom up approach to placemaking have proved crucial for successful implementation. This requires committed project leaders, but also avoiding involvement of too many different stakeholder groups. The older people will not become active then, whereas it should be their role to indicate the needs and maintain the routes. This is a matter of expectation management.

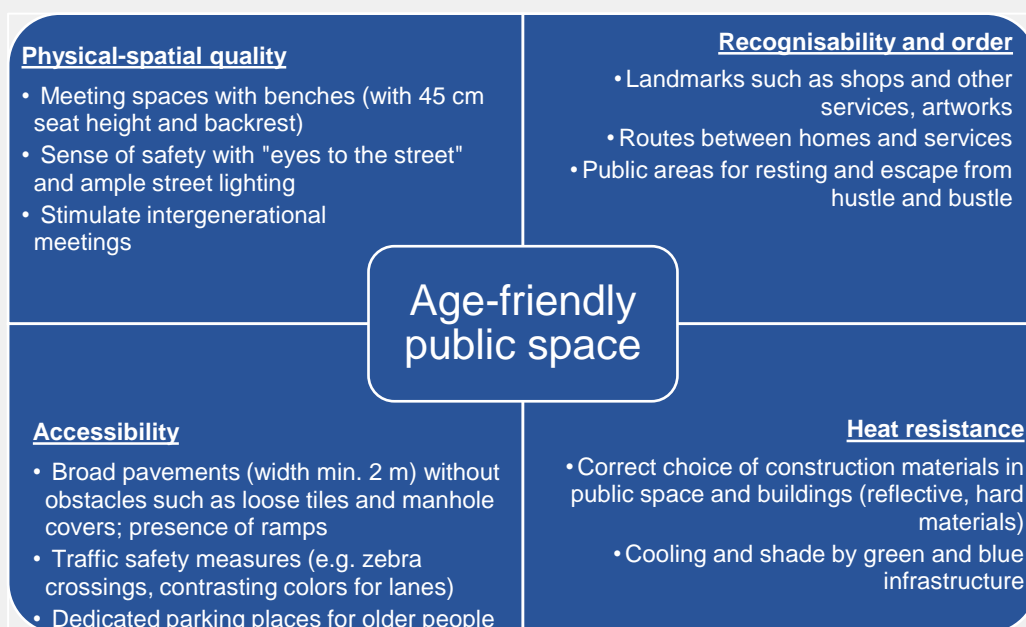


Public space checklist	
City	Amsterdam
Geographical focus	City-wide
Launched in; current status	2017; ongoing
Further information	<a href="#">Laura Hakvoort</a> (email)

## Objectives, content and organisation

### Design and delivery of services

Urban planning has always played a prominent role in the Netherlands and this can be seen in the attention it gets within Amsterdam's Age-friendly City policy. Fall prevention is one of the key targets and that requires careful maintenance of public spaces. However, the city's policy is broader than that. It is centered around making adaptations to public spaces that make it more comfortable for older people to stay in them. As a result, a checklist for interventions in public space has been developed. This checklist is centered around four themes: physical-spatial quality, recognisability and order, accessibility and heat resistance.



*Enough benches, green infrastructure and reflective materials (left) and wide pavements that are free of obstacles (right). Courtesy: Municipality of Amsterdam (2017)*

## **Target group**

The checklist was centred around all inhabitants aged 65 and over. However, with the necessary adaptations, Amsterdam strives to be a city for all ages.

## **Coordination and stakeholder involvement**

The municipality of Amsterdam initiated the checklist. To develop it, the municipality has employed an 'urban ergonomist', who has knowledge of both national design guidelines as formulated by CROW (Dutch knowledge platform for design of public space and mobility) and practical experience of proven measures. Also interest groups for older and disabled people have been consulted.

## **Effectiveness and impact**

### **Impact**

The checklist has become part of the city's Handbook for Design of Public Spaces, meaning that from now on, all new adaptations of public spaces in the city will be made with age-friendliness in mind.

### **Monitoring of results**

No formal monitoring is being undertaken. A suggestion is to keep track of the number and type of physical improvements that have been made after inspections of public spaces.

## **Innovativeness**

Novel method: the creation of guidelines for an age-friendly public space, that are standardised for the whole city, is an innovative element.

## **Transferability and sustainability**

### **Replication and conditions**

Checklists have been constructed by many Dutch municipalities, but also in many other countries abroad. The initiative is not dependent on specific conditions. However, it is advisable to keep monitoring the situation. This can be done by volunteering older people as scouts.

### **Lessons learned**

With the checklist, there is a risk of too much focus on older people's needs. For example, when placing benches for older people in public space, it is attractive to pick benches that are ergonomically suited for older people (sitting angle as straight as possible). However, it tends to get overlooked that other population groups dislike such benches, and will make less use of them. So a balanced and flexible approach is necessary.

## 2. Transportation

Flexlinjen (Flex line)	
City	Gothenburg
Geographical focus	City-wide
Launched in; current status	Pilot launched in mid 1990s; the service has been expanding since
Further information	<a href="#">Flexlinjen - Göteborgs Stad</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Flexlinjen (Flex line) is a form of age-friendly public transport consisting of minibuses that operate on 29 different flex lines and covers all districts in Gothenburg. One of the key rationales behind Flexlinjen was to develop a new form of public transportation that is so accessible that it can be used also by people who have difficulties using ordinary public transportation. The minibuses are accessible, and suitable for bringing along pets, luggage or strollers, and the travellers are guaranteed a place to sit in the buses, which is possible due mandatory registration. Flexlinjen also serves a social function, as many travellers have expressed that they enjoy the social aspect of travelling together. The buses operate within a set area, and there are many stopping points. The bus only stops where someone has booked to board and alight. Passengers can receive assistance boarding and alighting the bus if required.



*Photo courtesy of Lo Birgersson*

#### Target group

Flexlinjen can be used by anyone, but the main target group consists of those who find it difficult to use ordinary public transport. The vast majority of passengers are older people. Approximately 70 % of the passengers are women and 30 % are men.

#### Coordination and stakeholder involvement

Flexlinjen is coordinated by Serviceresor, a specific section of the City of Gothenburg's Traffic Office, that is tasked with arranging assisted transport in the city. Serviceresor has been assigned with this task by Västtrafik, who is responsible for public transport in western Sweden and also operates the minibuses on Flexlinjen. In developing the transport system, there has been ongoing collaboration with older people in Gothenburg through citizen dialogues and by organising arenas of exchange. Other initiatives include the use of so-called passenger ambassadors, who provide help to passengers, as well as a customer service that people can contact with questions and to share their opinions.

## **Effectiveness and impact**

### **Impact**

An early version of flexlinjen was introduced in the mid-1990s, and the city has continuously been working to develop the system. In the late 1990s, it was decided to make the system city-wide, and the transport system in its current form was completed in 2010. The number of passengers on Flexlinjen has increased significantly since its introduction. The total number of passengers in 2000 was approximately 24,000, whereas the total number of annual passengers has ranged from around 200,000 to 240,000 during the last few years. Flexlinjen was mentioned as a success in most of the interviews conducted in Gothenburg, and it is considered to be an initiative that has older people more active and outgoing.

### **Monitoring of results**

The city officials who work with Flexlinjen continuously monitor the system. The city receives and addresses passengers' perspectives on a daily basis and a more elaborate assessment based on these perspectives is carried out twice a year. The number and type of travels on Flexlinjen and the other public transport systems in the city is carried out on a monthly basis. There are also continuous and ongoing efforts to improve the monitoring of Flexlinjen.

### **Innovativeness**

Flexlinjen could be viewed as a hybrid between public transportation and a taxi service. The rationale was to develop a good and cost-effective transportation system that can be used also by people who have difficulties using ordinary public transportation. What makes the system especially convenient for older travellers and people with disabilities is that passengers are guaranteed a place to sit.

## **Transferability and sustainability**

### **Replication and conditions**

Flexlinjen in Gothenburg has been replicated in Sweden at least in the municipalities of Uppsala and Lerum, where similar transportation solutions have been introduced. A similar type of transportation system, inspired by Flexlinjen, has also been introduced in Oslo under the name Rosa busser. Developing similar types of public transport solution also in other cities would be fully possible.

Three main points could be stressed as important for implementation. Firstly, it can be recommended to have the same drivers who frequently operate the same lines, as this is something that can make passengers feel more comfortable and secure and strengthened personal relations. Secondly, having a guaranteed place to sit is also something that is valued highly. Thirdly, the possibility to order Flexlinjen to a given location is something that makes Flexlinjen accessible for passengers who cannot use regular public transport.

### 3. Housing

Lang zult u wonen (You shall live long)	
City	Hengelo
Geographical focus	City-wide
Launched in; current status	2010; ongoing
Further information	<a href="#">Hengelo - Lang zult u wonen</a> (online)

#### Objectives, content and organisation

##### Design and delivery of services

Lang zult u wonen ('You shall live long') is an awareness campaign aimed at improving comfort and safety in peoples' homes. The goal of the initiative is to stimulate people to make improvements in their homes *before* these improvements are necessary. By anticipating the decrease in mobility before this is necessary, accidents can be prevented and housing can become safer at the right time. In addition, it is often cheaper to make adjustments in a timely manner than when these adjustments have to be made *ad-hoc*.

The initiative provides both tips for small adjustments that can be made in the house (for example the removal of door thresholds, to make moving around the house with walking aids easier). Next to these practical tips, since 2013 the municipality also provides a subsidy of € 1000 per home for age-friendly measures. As prerequisite for receiving the subsidy a 'house scan' is carried out by a professional. In this house scan, professional advice is given on personal housing situations. Due to this advice, subsidiaries often take more measures than originally planned. This reduces risk in the long term.

##### Target group

The target group of the initiative is inhabitants of all ages, but the subsidy is only available for inhabitants of 65 years or older. Between 2013 and 2018, 64% of the subsidies were granted to people aged 65 – 80 and 36% of the subsidies were granted to people aged 80 years or older.



Photo courtesy of municipality of Hengelo

##### Coordination and stakeholder involvement

The municipality is responsible for the implementation of the initiative. A single employee takes care of the coordination Lang Zult U Wonen. A team of volunteers helps with the house scan. These volunteers receive a one day training about the different aspects of the house scan.

#### Effectiveness and impact

##### Impact

Between 2013 and 2018, 626 subsidies were provided to house owners. These people often apply for a subsidy to take a specific measure. Due to the results of the house scan, around a quarter of the people that apply for the subsidy make more changes in their house than initially intended. This is seen as an important

added value of the subsidy. In the short term, the municipality had to invest around € 226.000 worth of subsidies, but saved around € 500.000 on residential facilities. In the longer term, the improved safety of houses can help older people to live at home for a longer period of time and prevent accidents. This leads to savings in health care costs in the long run. Apart from these quantitative results, people involved in the implementation of the initiative also found that general awareness of measures to improve safety and in home comfort has grown.

### **Monitoring of results**

The results of the initiative are being monitored, but not in a formal way. Comparisons on municipal spending related to house improvements are done regularly. These comparisons show that Hengelo spends relatively little on house improvements for older people, and also spends less and less each year. Additionally, the knowledge of the people involved is regularly updated to ensure the most effective new improvements are included in the house scan advice.

### **Innovativeness**

Novel method: the main innovative factor in the 'Lang zult u wonen' initiative is the pro-active rather than reactive approach. By implementing measures in homes at an early stage, accidents are prevented and costs are kept lower. The campaign is also not aimed solely at older people. Awareness raising is also relevant for people of younger ages.

### **Transferability and sustainability**

#### **Replication and conditions**

The initiative is replicated in other municipalities in the Netherlands (23 out of 25 municipalities in the Province of Overijssel). The basic conditions for the initiative are also easy to replicate and not dependent on local contexts. As a main prerequisite, the initiative will be more effective if the house ownership of older people is high. It is also important to assess whether there is an actual need to improve housing comfort in the particular city. When the majority of houses already is easily accessible, there is no need for an initiative like 'Lang zult u wonen'.

#### **Lessons learned**

There is a myriad of potential dangers in homes that can cause injuries or hamper movement when people get older and less mobile. While it is not legally possible to force people to identify and tackle these dangers, it is possible to make people aware of these dangers. This can save healthcare costs in the long run. The key to the success of the initiative is the implementation of 'house scans', which help to identify dangers that the target group is not yet aware of. In this way, people are stimulated to take more and more appropriate preventive measures.

Logements bleus (Blue housing)	
City	Nantes
Geographical focus	City-wide
Launched in; current status	2008; ongoing
Further information	<a href="#">Les logements bleus - Ville de Nantes (online)</a>

## Objectives, content and organisation

### Design and delivery of services

According to recent estimations by the AURAN, in the metropolitan area 90% of senior people wish to age at home. Allowing older people to live by themselves for as long as possible is one of the city's top priorities. To allow people with limited income and that are progressively losing their mobility and autonomy to fulfil this aspiration – as well as to alleviate the pressure on public facilities, Nantes Habitat and the city of Nantes have created the *Logements Bleus (Blue Housing)* in 2008. These accommodations are located close to public transport and usually have a convention with home delivery services for meals, provision of bricolage services and other types of assistance. They are usually formed by 1 to 3 rooms and are located on either the ground floor or the first floor, or are accessible with a lift. To ensure convenience and safety, they are furnished according to the needs of older people who are losing their autonomy, by providing for instance electric shutters, switches and sockets at an appropriate height, replacement of bathtubs with showers, grab bars and anti-slip floors. So far there are 1.050 apartments distributed across various districts.

### Target group

This opportunity is reserved to people older than 65, with a limited income. The income threshold for an individual is € 20.111 while for a couple it is € 26.856 per year. The picture refers to the recently built Maison Helena, which includes 24 apartments.

### Coordination and stakeholder involvement

The initiative was launched in 2008 by Nantes Habitat and the CCAS (Centre Communal d'Action Sociale), which is part of the city of Nantes. Several associations and other city services closely collaborate. For instance, the CLIC makes sure that older people and eventually their families have access to all information related to this opportunity, including the application process and the different options which are offered. Associations providing leisure activities, and support *à domicile* (home delivery services, pick up, health assistance) are closely in contact with the Logements bleus personnel.



Courtesy of Espacil Habitat

## **Effectiveness and impact**

### **Impact**

First and foremost, the Logements Bleus allow people to live independently for a longer period of time and at least until they have a certain degree of autonomy. They prevent isolation as people living in these accommodations have contact not just with their peers and neighbours, but also with the volunteers and associations who are very much present and bring the city and local association's offer of services and support. Yet, they allow privacy to their tenants, contrary to other options such as the foyer lodgement. This makes the accommodation appreciated. However, they are limited in number and, although they are reserved to people with a limited income, the rent has to be paid by the tenant, making it less accessible.

### **Monitoring of results**

There are no specific studies available to assess the impact of the initiative, however the City and Nantes Habitat foresee a visit by an evaluator of Nantes Entour'Âge to the accommodation every three months, to assess the status of the accommodation, make sure it still meets the needs of the tenant and assess whether improvements or changes are necessary.

### **Innovativeness**

This initiative allows for a dynamic and personalised assistance to the old person that wishes to live on his own while starting to lose some autonomy. The fact that the facilities are adapted to the needs and that there is an initial in-depth and then periodical assessment make this initiative worth of attention.

## **Transferability and sustainability**

### **Replication and conditions**

This specific initiative has not been replicated elsewhere yet. While the initiative is not dependant on specific conditions, what makes it successful in the context of Nantes is the strong cooperation across different institutional and civil society organisations, making sure additional services and support are provided to the tenants.

### **Lessons learned**

One of the issues encountered while discussing with older people in a focus group is the complexity in the application process and difficulty in getting access to the accommodations, for which applications are competitive. This is due to the high increase in the demand for accommodations, of which the city is very much aware but which can still not be matched with an equally fast-developing offer. The diversity of accommodation types and solutions which are being developed though might help alleviate pressure on this type of accommodation, which remains one of the most popular.



Senior House Pastor Fangensvei	
City	Oslo
Geographical focus	Nordre Aker
Launched in; current status	2017; ongoing
Further information	<a href="#">Pastor Fangens vei 22 seniorhus</a> (online)

## Objectives, content and organisation

### Design and delivery of services

Pastor Fangensvei 22 is a Seniorhuset (senior house) located in the city district of Nordre Aker. The Seniorhuset consists of apartments for seniors and is also an activity centre for older people. This includes group work out through dance, intergenerational meetings where school children and teenagers are invited to spend time with older people as well as other activity groups and activities. The house also includes a service called 'AHANS' and 'Pastor'n'.

One of the main concerns of older people is to have someone to ask. Thus, AHANS (Alltid Ha Noen å Spørre-always have someone to ask) became a reality. The older people are able to ask about anything regarding ongoing activities in the city district, such as fitness groups, cultural activities including e.g. the cultural activities provided through the initiatives established through the collaboration between Oslo municipality and the Norwegian Opera and Ballet, courses and transport services (Rosa Buss). All information is available by phone as well as in the Senior house. 'Pastor'n' is a service and meeting place for someone who is becoming forgetful or is in the early stages of dementia. It is a daily activity offer that is sociable through fitness groups and excursions. Some activities and excursions might require some self-funding. The Seniorhuset also provides advice and guidance for those who have recently been diagnosed with dementia, as well as providing the surrounding families with information and support.

In addition to providing these services, the Seniorhuset also includes 29 apartments for older people, and 7 of these are specifically laid out to suit someone with dementia who is capable of living independently but requires some assistance. There are students living in two apartments at reduced rent in exchange for a 30 hours minimum per month spent with the older inhabitants. Activities include cross-country skiing, going for walks and making food. The senior house also functions as a node and resource centre for the local community. Collaborations with e.g. local kindergartens through the network 'Joyful lives for older persons' and initiatives involving teenagers in need of a job or volunteering opportunity to become an activity friend for the users are other examples of how the senior house is becoming embedded in the local community.

### Target group

The target group is 60+, but the house is open to all and encourages intergenerational meeting.

### Coordination and stakeholder involvement

The city district of Nordre Aker established the Senior house and is in charge of the coordination. Other stakeholders involved in the process towards establishing the Senior House were older persons from the city districts, as user involvement has been the centre of all developments in connection to Age-friendly City in Oslo. The idea is that volunteers, the community, the family and the users assist in the running of the house and its activities.

## Effectiveness and impact

### Impact

The placement of the Seniorhuset has been positive for the local community and services such as AHANS have been positive for the city district of Nordre Aker. The fact that everyone who has questions has

somewhere they can go to is a way to promote a more active and healthy ageing without stigma. Connecting the Seniorhuset to the age-friendly transportation services (Rosa Busser) is another way of binding the senior house closer to the urban fabric of its surroundings.

### **Monitoring of results**

The number of users and the number of people living in the senior house apartments are two clear indicators. In the local community it is evident that age-friendly policies are becoming increasingly integrated, also through various initiatives by the city district of Nordre Aker (e.g. to give the staff in local stores an introduction and a tool to handle age- and dementia related challenges), and that the Seniorhuset is the node for enabling the support for becoming an increasingly age-friendly city district. The range and number of different actors involved in the Seniorhuset' activities is an indication of the effect the house has in the local community.

### **Innovativeness**

The Senior House Pastor Fangens vei 22 Seniorhus is a one-stop-shop for all older people that need specific information about services and opportunities. It is an excellent example of how to encourage the use of areas and spaces with an agenda, that indirectly becomes a social arena. Integrating safety homes with special adaptations for older people with e.g. mild dementia is also an innovative aspect, as it encourages activity and stimulation through group activities within the safe frames and environment of the senior house. Since opening the senior house students have also moved into the building-complex, demonstrating how senior houses are not limited to people of a certain age but is open to all. The idea to open the house up to younger generations came from a survey with older people, asking for different arenas to meet younger people. The students moved to their new student flats in Pastor Fangens vei 22 in February 2018. The students are living at reduced rent in exchange for 30 hours spent with the other inhabitants per month.

### **Transferability and sustainability**

#### **Replication and conditions**

No special conditions needed, and the project is highly replicable. Pastor Fangens vei 22 Seniorhus is developed as a node for all information and activity that promotes active ageing and is a resource centre for the local community. The idea to include student flats into new retirement homes and activity centres is a great way to encourage intergenerational meetings and could be considered in the development of new senior housing.

#### **Lessons learned**

Being able to live active and healthy lives for longer is enabled through the stable frames of the senior house. However, it is important to keep in mind that there are currently three generations of older people with different needs and wishes. Branding and marketing play an important role for reaching the various generations with the activities that might suit them best – some older people feel to young to go to a senior house, though their needs and opinions thereof might change. The activities at Pastor Fangens vei 22 combines these in a good way. Establishing Pastor Fangens vei 22 Seniorhus as a node and resource for the local community is also a resource for ensuring that the local community is getting onboard with age-friendly thinking.

Trygghetsboende (Safety homes)	
City	Gothenburg
Geographical focus	Safety homes can be found in most of Gothenburg's city districts
Launched in; current status	2008; ongoing
Further information	<a href="#">Trygghetsboende - Göteborgs Stad</a> (online)

## Objectives, content and organisation

### Design and delivery of services

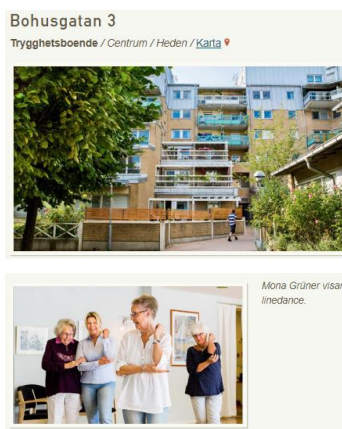
Safety homes (*Trygghetsboende*) provide a new way to live where safety and community are key elements. In Gothenburg, safety homes are targeted at people aged 70 and over. This type of housing has been developed with consideration to the ambition that people typically want to avoid moving from their homes as they age, and it is based on the idea that certain small adjustments in the dwelling can make them safer and more comfortable. These include making the apartments more accessible, installing a peephole in the door and an oven alarm, as well as extra handles in the bathroom. Not only apartments should have good physical accessibility, but the building entrance and exterior should also be accessible. There should also be an elevator with a possibility to sit as well as a safety alarm in the buildings. Another central principle is that there should be a common space adjoining to the safety homes, where residents can meet a safety host and participate in activities with other residents. The idea is that residents themselves take the main initiative in organising the activities, that should all be free of charge.

### Target group

Safety homes in Gothenburg are intended for people aged 70 and over. However, if there are two people living in a safety home, it is sufficient if one of the two persons is at least 70 years of age. The age group 70 and over constitutes roughly one-tenth of the total population in the city.

### Coordination and stakeholder involvement

In Sweden, the state provides investment aid for building safety homes, and many municipalities also provide their own investment aid for safety homes. In Gothenburg, such support is provided to property owners for converting apartments into safety homes. This investment aid was introduced by the municipality as a way to provide support for creating common spaces adjoining the safety homes and for hiring safety hosts. In Gothenburg, property owners can apply for this investment aid from the city's Housing Office.



*An advertisement for a safety home. Courtesy of Boplats Göteborg*

## **Effectiveness and impact**

### **Impact**

The number of safety homes has increased in Gothenburg during recent years. In total, there were 830 safety homes in Gothenburg in the beginning of 2019, and these dwellings are found in nine of Gothenburg's 10 city districts. Safety homes can also be found in other municipalities in the Gothenburg Region and in other parts of Sweden.

### **Monitoring of results**

An example of how safety homes in Gothenburg have been evaluated is an external evaluation report that was published in 2015. This report focused on how residents in safety homes in Gothenburg and two other municipalities in Western Sweden felt about their housing arrangements. Safety homes are generally perceived positively by the seniors that inhabit them. According to the evaluation, residents especially appreciate the social aspect of living in safety homes, including the social ties that many residents have established with their neighbours. The common spaces that are used for common activities is something that strongly contributes to this, as well as the safety hosts who provide support for residents. At the same time, the fact that the safety homes are physically accessible is something that contributes to the autonomy of seniors who would not manage to live in a regular apartment.

### **Innovativeness**

Most of the safety homes in Gothenburg have been established in the existing housing stock within the public housing companies, and the main innovation of safety homes could be considered the fact that by making relatively small adjustments, regular apartments can become safer and more convenient. Safety homes could be viewed as a hybrid of regular housing and assisted senior housing.

## **Transferability and sustainability**

### **Replication and conditions**

There are more than 11.000 safety homes in more than half of Sweden's municipalities. There is no obvious reason for why the basic idea, i.e. the notion that small adjustments can make regular apartments more age-friendly, could not be transferred elsewhere. However, as most safety homes are regular apartments that have been converted into safety homes, a replication of this concept requires that there is an existing housing stock that can be converted into safety homes through relatively small adjustments and modifications. In order to establish safety homes in the newly built stock, certain criteria should be met in the design/construction phase.

### **Lessons learned**

Having a centrally led coordination is advantageous, as this can ensure that safety homes can be implemented and developed in a consistent manner. This can help find well-functioning and cost-effective solutions, such as optimal design standards and what types of stove alarms should be installed. Detailed checklists can be an effective way of ensuring that certain criteria and standards are met.

Wooncoaches (Housing coaches)	
City	Amsterdam
Geographical focus	City-wide
Launched in; current status	2016; ongoing
Further information	<a href="#">Wooncoach voor senioren</a> (online)

## Objectives, content and organisation

### Design and delivery of services

Many older people end up living in a house that is bigger than they demand and can manage. In these situations, it is often already too late to move to a more suitable home without difficulty. The city of Amsterdam has appointed housing coaches to anticipate on such problems. The housing coaches are volunteers who pay home visits to older people and discuss their housing situation, with the intention to make them aware of the importance of early anticipation on moving. Together with the housing coach, the older people get assistance in finding a new suitable home and the actual process of moving.

There are two different forms of suitable housing that are offered by the housing coaches. The first one is called 'From high to low', where housing associations offer older people who currently live in an apartment building without elevator to move to a ground-floor home or to an apartment building with an elevator, in the same neighbourhood. The older people will continue to pay their existing rent price. The second scheme is called 'From big to better'. In this scheme, housing associations help older people to move from a home with at least 5 rooms and 70 square meters to a smaller and accessible home, also while retaining their existing rent price. Older people are very satisfied with this service and the demand is growing steadily.

### Target group

Older people who currently live in an social housing unit without elevator ('From high to low'); older people living in a social housing unit with at least 5 rooms or 70 square metres ('From big to better').

### Coordination and stakeholder involvement

The housing coach assists the senior in cooperation with other stakeholders, shown in the diagram:

Phase	Reaching	Signalling	Awareness	Information	Advice	Choice	Supporting	Home adaptation	Moving
Senior									
Municipality									
Housing coach									
Housing association									
Healthcare professional									
Resident council									

## **Effectiveness and impact**

### **Impact**

Across the city of Amsterdam, 18 housing coaches have been active. They make older people aware of the necessity to think ahead about their housing situation in the future. Since the coaches are focusing more on helping to find a new home and helping with the actual moving, they receive a lot of praise.

Evaluation of the results has shown that the housing coaches have been able to realise approximately 130 relocations per year through 'From high to low', and about 60 relocations through 'From big to better'.

### **Monitoring of results**

An *ex-ante* evaluation was done based on the results of the pilot phase in four pilot districts. In 2019, the *ex-post* evaluation of the 'From high to low' and 'From big to better' interventions was finished. The older people's opinions on the housing coaches could be an additional indicator to be measured, since this is currently only qualitatively known.

## **Innovativeness**

Organisational innovativeness: with the concept of the housing coaches, a successful cooperation of multiple stakeholders (older people, housing associations, municipality, healthcare professionals and social workers) has been set up.

## **Transferability and sustainability**

### **Replication and conditions**

Housing coaches are active in many large Dutch cities, such as Utrecht, Rotterdam, but also in smaller towns. Both municipalities and social housing associations can implement housing coaches. Human and financial resources are the most important conditions for transferability.

### **Lessons learned**

In the pilot phase of the initiative, four coaches per district were paying small numbers of home visits – about 12 per month per district. In the pilot evaluation, it was concluded that many older people did not demand and appreciate the involvement of the housing coaches. They felt that while the housing coaches provide advice, they do not really help older people with the actual process of finding a suitable home and moving.

Therefore, in the improved project implementation, the assistance to older people covers a longer time span, is more focusing on concrete and practical support and more stakeholders are involved.

## 4. Social participation

Aanpak eenzaamheid (Combating loneliness)	
City	Amsterdam
Geographical focus	City wide
Launched in; current status	2016; ongoing
Further information	<a href="#">Amsterdams Netwerk Eenzaamheid</a> (online)

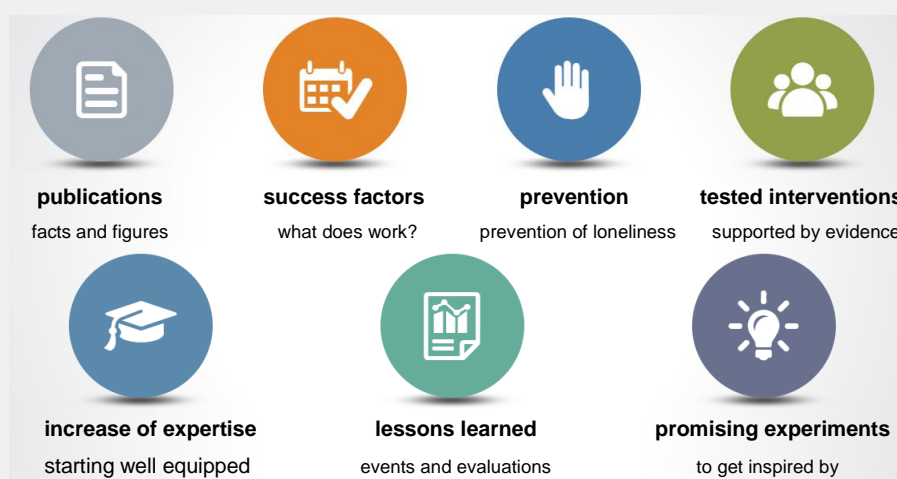
### Objectives, content and organisation

#### Design and delivery of services

Amsterdam has nominated loneliness as one of the four main action points in its current Age Friendly City policy. The Combating Loneliness programme consists of three distinct elements:

- **Learning approach:** development of knowledge about proven interventions to counteract loneliness. Execution of experiments by universities and knowledge institutions, together with trainings for healthcare professionals and social workers;
- **Amsterdam Loneliness Network:** consisting of over 600 stakeholders, such as the municipality, healthcare providers, knowledge institutions, interest groups and foundations. Together they form a so-called learning network that organises a) physical connections by means of conferences in the city's conference centre Pakhuis De Zwijger and b) digital connections by means of an online toolkit with best practices and proven interventions for the prevention of loneliness. Furthermore, the network aims to foster further knowledge development by facilitating experiments and exchange of knowledge. Within the learning network, multiple succesful products have been developed that together form a toolkit.
- **Municipality as stakeholder:** the municipality aims to function as a catalyst by providing basic services (such as meeting spaces in all neighbourhoods) that can generate multiplier effects, as well as bringing together and matching all involved stakeholders.

Toolkit with knowledge about proven interventions and other tips, collected from all participating stakeholders.



#### Target group

It is estimated that about one third of the inhabitants of Amsterdam (roughly 300.000 people) feel lonely; 13 per cent feels severely lonely. Among these people, seniors have a large share, especially those from minorities like migrants and LGBTs or those without partner.

## **Coordination and stakeholder involvement**

The municipality of Amsterdam coordinates the programme and has involved 600 stakeholders, spread over the categories of resident groups, knowledge institutions, healthcare professionals, social workers and miscellaneous groups (entrepreneurs and policymakers from other cities).

## **Effectiveness and impact**

### **Impact**

A diverse set of results has been made. A selection of outputs from 2018 includes:

- 6 thematic conferences have been organised;
- 40 trainings on prevention of loneliness have been given to approx. 600 professionals;
- 2 instruments have been developed for policymakers to develop policies for combating loneliness and to assess subsidy requests for loneliness projects;
- a practical guide 'Lonely in Mokum' has been developed, with theoretical insights about loneliness, stories from lonely people and social workers and promising projects;
- the online toolkit contains 22 proven interventions and 12 promising projects, as well as guidelines for prevention and combating of loneliness.

The outcome is an increase of knowledge about loneliness, both in terms of fighting the taboo and disseminating good practices in prevention.

### **Monitoring of results**

There is no systematic monitoring of the results. This is comprehensible given the diverse nature of the activities, but an overview of outputs per programme element could be created.

### **Innovativeness**

Focus on novel needs: there is still little known about effective interventions concerning loneliness. The Combating loneliness programme brings together theory and practice, by creating a clear overview of guidelines and proven interventions (toolbox) and by means of conferences.

Adapted from: Amsterdam Loneliness Network (<http://www.amsterdamsnetwerkenzaamheid.nl/toolkit>)

## **Transferability and sustainability**

### **Replication and conditions**

The approach is unique, but recently, the Dutch ministry Ministry of Health, Welfare and Sport has announced an eponymous nation wide programme that has an almost identical design. The transferability depends on the local or regional existence of a knowledge institution that can assist in gathering new knowledge, for example through evaluation of local experiments.

### **Lessons learned**

The network approach is very effective, although it requires solid leadership and stakeholder management. A challenge is how to reach minorities such as migrants, since they relatively often perceive loneliness as taboo.



Carte Blanche (White card)	
City	Nantes
Geographical focus	City-wide
Launched in; current status	2012; ongoing
Further information	<a href="#">Carte Blanche - Ville de Nantes</a> (online)

## Objectives, content and organisation

### Design and delivery of services

Nantes has extensively invested in diversifying its cultural offer and bringing it close to its citizens, primarily because it is seen as a powerful tool to promote integration and social inclusion.

The Carte Blanche has been a useful means to facilitate access to culture by offering more affordable prices but also an array of subsidiary services which have helped in attracting new users to cultural and sport events. It provides access to discounts in more than 60 cultural venues and sports facilities: amongst others theatres, cinemas and exhibitions. It was first launched in 2012, and while it is not specially dedicated to the senior citizens, it has been widely used by them. There are three versions:



Courtesy of Carte Blanche

- *Basic*: Reduction of prices for everybody below the threshold income level;
- *Carte blanche mediation*: reduction of tariffs but also support of people with handicaps or mobility problems, who need to be escorted to reach the destination. This has been the most interesting for senior citizens;
- *Aide a la ratification pour amateurs (Support for amateurs)*: to support artists who wish to practice and launch their initiative (with a subscription).

### Target group

This is reserved to all citizens, and price reductions are calculated based on income. The Card Mediation is specifically created for older people or individual with reduced mobility. So far, over 3.000 citizens have made use of the card.

### Coordination and stakeholder involvement

The Carte Blanche is an initiative of the city, which works in partnership with now 60 cultural and sport facilities and an ample array of associations and organisation which provide additional support and services. For instance they play an important role when it comes to supporting disabled or older people with reaching the venues of interest as well as receiving target advice and assistance on how to choose an event or activity which best suits the specific needs of a beneficiary. Some of the initiatives and shows are also promoted by local associations, which sometimes can mobilise and organise visits for groups of people.

## **Effectiveness and impact**

### **Impact**

The initiative has helped bringing closer to culture and sports many segments of the society which were traditionally excluded not only because of financial constraints, but also because of lack of interest. The wide offer also helped break down the prejudice that culture is only for well educated people, as the portfolio also offers access to cinema, sport competitions and a wide range of other entertainments. The City of Nantes has also observed that while seniors are often more attracted by cinema and classical music they progressively start discovering other domains and activities. Beyond bringing people closer to culture (not just as spectators but also as performers and artists), the increase in participation and attendance rate has also had a positive effect in breaking the cycle of isolation and social exclusion and has promoted the creation of new bonds and relationships.

### **Monitoring of results**

A satisfaction survey has been issued in 2015. The response has been positive, with the exception of some complaints related to the tariffs, which for some respondents were still seen not enough competitive. It is possible that an evaluation of the initiative will be undertaken in the near future.

### **Innovativeness**

The initiative is innovative because it does not just allow for a reduction of prices to increase access to culture and sport but also pays attention to other aspects (both logistical and moral) which might refrain people from participating and tries to tackle those too.

## **Transferability and sustainability**

### **Replication and conditions**

Nantes dedicates a large portion of its budget to the cultural policy. An initiative like Carte Blanche requires willingness by the city administration to invest in this domain. Especially if the ambition is to target those people who are not already engaged in cultural activities for financial constraints. The prices offered have to be affordable.

In addition, it is important to have on board a wide number of facilities, as the offer needs to be wide and diversified. Finally coordination and partnership with associations and local organisations is crucial to ensure a full package of services and support can be offered.

### **Lessons learned**

Nantes has observed that the effects of cultural policies on social cohesion and inclusion are often only visible in the long term. This is something that has to be taken into account when designing initiatives in this domain. The city has realised that tariffs should only be based on the income and not the age. This notion has been introduced in recent years and has been applied not only to Carte Blanche but also to other domains.

<b>Centros de Convivencia (Social Gathering Centres for older people)</b>	
City	Zaragoza
Geographical focus	City-wide
Launched in; current status	1990s; ongoing
Further information	<a href="#">Centros de Convivencia - Ayuntamiento de Zaragoza</a> (online) <a href="#">Derechos Sociales – Personas Mayores</a> (online)

## **Objectives, content and organisation**

### **Design and delivery of services**

The Social Gathering Centres for older people or *Centros de Convivencia* are a community space available for older people to socialise and participate in a wide range of activities, such as conferences, workshops, trainings, day trips, etc. The Centres also provide older people with access to information and other services that are relevant to them, such as legal counselling. There are 31 Centres spread across the city (see the map below) and organised as a network, which means members are allowed to access activities from any of the Centres in the city.

The Centres are seen as a tool to increase the wellbeing of older people by facilitating social interaction and promoting the active engagement in a wide range of activities. The Centres help older people continue to be physically and mentally active as well as to build social support networks which also helps avoid undesired loneliness.

### **Target group**

The Social Gathering Centres for older people are open to all retired people aged 60 years-old and above. As of 2018, about 69,000 people were members (46.8 % of older people in the city). They are mostly used by older people within the 65-75-year-old bracket and those that are physically independent.

### **Coordination and stakeholder involvement**

The Centres are funded by the City Council and coordinated by the Technical Office for Seniors. Each Centre is managed by a director and a team of municipal staff.

Activities are often implemented with support from other organisations. Centres open the opportunity for older people to also actively engage in the design and implementation of some of the activities.



*Courtesy of City of Zaragoza*

## **Effectiveness and impact**

### **Impact**

The Social Gathering Centres for older people existed long before Zaragoza joined the WHO Global Network, but since then have transitioned from being places where older people would go to spare some time to places where they actively engage, including in the design and implementation of activities. A high and growing number of members (nearly half of older people in Zaragoza, up by 10% from 2015) and high level

of participation to the activities of the Centres (in 2018 over 4,800 people used the Centres daily) suggests the Centres are helping seniors to remain active.

### **Monitoring of results**

The Technical Office for Seniors, supported by the Directors of the Centres, continuously monitors the activities organised. They track the type and number of activities implemented and how many older people participate per activity. They also assess the satisfaction and how older people perceive participation to the activities of the centre is affecting their daily lives.

### **Innovativeness**

While the City Council funds and manages activities and provides the overall strategic direction of the Centres, day-to-day management allows for a bottom-up approach to the activities organised in the Centres. This means members can suggest activities and contribute to the design and implementation of activities, which opens up additional ways of becoming engaged.

### **Transferability and sustainability**

#### **Replication and conditions**

The idiosyncrasy of social relations in Zaragoza, deeply rooted in rural communities and a strong sense of belonging to a community, has been key to the success of the Centres as an effective model for social participation and social inclusion. However, this is not necessarily a prerequisite, for the Centres themselves provide a platform for facilitating social interaction. In cities where older people may be less predisposed to socially interaction and community engagement, having facilitators/social workers may help bridge the gap. Thus, this model can be replicated in other urban environments.

#### **Lessons learned**

The Centres have worked well for older people that are still emotionally and physically vital. It has been more difficult to engage people who are more dependent, physically challenged to leave their homes and/or unwilling to participate to the activities of the Centres – perhaps because some still consider these to be spaces to 'keep warm and play cards' and for very old people. This has also highlighted the importance of dissemination activities as well as of exploring ways to involve more dependent and hard-to-reach older people.

Cultural and inter-generational initiatives	
City	Oslo
Geographical focus	City-wide
Launched in; current status	2016; ongoing
Further information	<a href="#">Senior i Sentrum-uken</a> (online)

## Objectives, content and organisation

### Design and delivery of services

Cultural activities are part of objective Domain 4: Social participation and inclusion (employment, volunteering and culture). Oslo municipality has had a close collaboration with the Norwegian Opera and Ballet, the Oslo Philharmonic Orchestra, Oslo museums and additionally appointed cultural ambassadors to help advocate for participation. There has also been a collaboration with some of the city's cinemas, the Culture and Literature Houses, and there has been collaborations with Oslo Metropolitan University on debate series targeting older people. The UN's International Day of Older Persons on the 1<sup>st</sup> of October is celebrated as the final day of the 'Senior Week' (*Senior i Sentrum-uken*), which has been coordinated by Oslo municipality's Department of Older People, Health and Employment and has been organised since 2013. The week includes the Rollator Race, Nordic Walking-race and the Generation Games, the 'Senior Prize' and there is a Gala Performance with speeches and musical contributions.

In addition to these centrally coordinated activities, there are several inclusive initiatives in the city districts through the Senior Houses, but also ensuring benches around a football field is a way to encourage intergenerational meeting. Additionally, creating 'arenas with an agenda and a social dimension' is a way for people to meet whilst going somewhere for a specific purpose, whether it is a space for renting tools, working in a communal garden, or handing in old clothes.



*Photo courtesy of city of Oslo*

### Target group

The cultural initiatives and the senior houses are aimed at people of age 67+. The Senior Week is for people of all ages: older persons, family, children and youth, volunteers and the like.

### Coordination and stakeholder involvement

The department of older people, health and employment has the coordinating responsibility of the senior week and all centrally organised activities, but it relies on close collaboration with the Department of Culture at Oslo municipality, The Norwegian Opera and Ballet, Oslo Philharmonic Orchestra, Oslo cinemas and Oslo museums. During the Generation Games and the Senior Week, local schools, sports organisations and the Oslo Police are also involved. The city districts are also involved and have the continued responsibility of running the Senior Houses.

## **Effectiveness and impact**

### **Impact**

The Senior Week and Senior Day with the Senior Prize is highly valued by the older persons as it encourages inter-generational contact. It focuses on the abilities and achievements of older persons and make them feel seen and valued in their own right. The cultural activities in general are highly appreciated by its users, and the topics of e.g. the debate series hit the target group well. The Senior Houses are used as a place to meet old friends and make new acquaintances, join theatre groups or other types of activities. It also functions as a safe space and a 'one-stop-shop' to go to if a person has questions surrounding various aspects of being an older citizen.

### **Monitoring of results**

There is monitoring of number of participants in e.g. the Rollator Race. There is no monitoring of the users of other cultural activities, but with the debate series there was room for monitoring participation. Feedback has also been key to the development of age-friendly policies in Oslo, and thus qualitative interviews and feedback has been given on various topics.

### **Innovativeness**

The collaboration between the Department of Older People, Health and Employment and the Department of Culture is an innovative approach to ensuring further anchoring of age-friendly policies in the city. Furthermore, celebrating older people through a week of activities with older people at the centre is a way to place older people on the political and social agenda.

## **Transferability and sustainability**

### **Replication and conditions**

Cultural activities and inter-generational initiatives are highly replicable. It required the involvement of several different stakeholders and leadership in the coordination of the programmes, but it requires no special conditions.

### **Lessons learned**

Cultural activities are a way of ensuring social inclusion and participation, as music, sports and shows are something that reaches all. Stakeholder involvement is key to ensure the operationalisation of such initiatives. Opportunities of inter-generational meeting is also something that older people highly appreciate as it is an opportunity for mutual learning and enjoyment.

Nos gusta hablar (We like talking)	
City	Zaragoza
Geographical focus	Three neighbourhoods in the city, with plans to city-wide scaling up
Launched in; current status	November 2017; ongoing
Further information	<a href="#">Nos gusta hablar - Ayuntamiento de Zaragoza</a> (online) <a href="#">Nos gusta hablar – Derechos Sociales</a> (online)

## Objectives, content and organisation

### Design and delivery of services

The project We like talking (“Nos gusta hablar”) aims to create a space where people come together to chat face-to-face. Its goal is to reduce moments of undesired loneliness and isolation. The idea was to open the opportunity for people who feel alone to meet and interact with other people in ways other activities organised in the Social Centres – such as workshops or trainings – are not conducive to.

It consists of daily meetings held at actually four Social Gathering Centres for older people. When this initiative is first organised in a Centre, meetings are initially facilitated by a social worker every two weeks and then self-managed by participants who attend any time they want without having to sign up beforehand. The meetings encourage people who feel the need to meet and talk to other people, while promoting the autonomy and social relations of older people.



*Courtesy of City of Zaragoza*

### Target group

This activity is open to both members and not members of the Social Gathering Centres for older people. It's also open to people of all ages, but is mainly targeted to older people. The project was piloted in one of the Social Centres, then replicated in three additional Centres and the City Council has now approved scaling it up across all Social Gathering Centres for older people, based on the success of the program and the demand from other Centres.

### Coordination and stakeholder involvement

This project was envisaged by the Technical Office for Seniors in collaboration with the Aragonese Institute of Health Sciences (Grupo de Investigación del Instituto Aragonés de Ciencias de la Salud, IACS-IIS Aragón), whose research concluded that people need to have a certain number of face-to-face interactions to keep healthy and prevent illnesses.

## Effectiveness and impact

### Impact

Daily participation to this activity is 15 people per day per centre (i.e. 75 people per day in total, as the program has been implemented in four out of 31 Social Gathering Centres for older people of the city of Zaragoza). A recent evaluation assessed the perception of 47 users of the program. Most participants reported frequently taking part in these chats and indicated these have helped them build new social networks and have contributed to an improved emotional wellbeing. Participants also reported the project has increased their motivation to come to the Social Centres.

### **Monitoring of results**

The program was recently evaluated by the Department of Social Sciences, University of Zaragoza (Facultad de Ciencias Sociales y del Trabajo de la Universidad de Zaragoza). It is important to note, however, that this evaluation was conducted with a very small sample (47 people). Once the project is scaled up to other centres, it will be important to continue to assess the effectiveness of the program.

### **Innovativeness**

While the project is based on a rather proven concept, an important feature of this project is the role of the social facilitator. The aim is to have older people lead and manage these spaces, but to ensure conversations are inclusive, respectful and engaging for all. For this, facilitators provide participants with tools to guide and manage conversations.

### **Transferability and sustainability**

#### **Replication and conditions**

Implementing this project requires a comfortable space and the *ad-hoc* support from a social facilitator, making it easily transferrable to other contexts and settings.

#### **Lessons learned**

Creating these spaces for older people to get together and talk has supported the role of the Social Centres as local collective venues. The high demand and positive feedback from users indicate these meetings help meet the need for older people to interact with their peers in order to fight loneliness.

A key factor contributing to the success of this initiative has been, as noted above, the role of facilitators, who play a catalytic role in encouraging people to engage in a respectful and active conversation when the meetings start to take place in a Centre. At the same time, phasing out the role of facilitators helps create a sense of ownership among older people which further contributes to their active engagement.

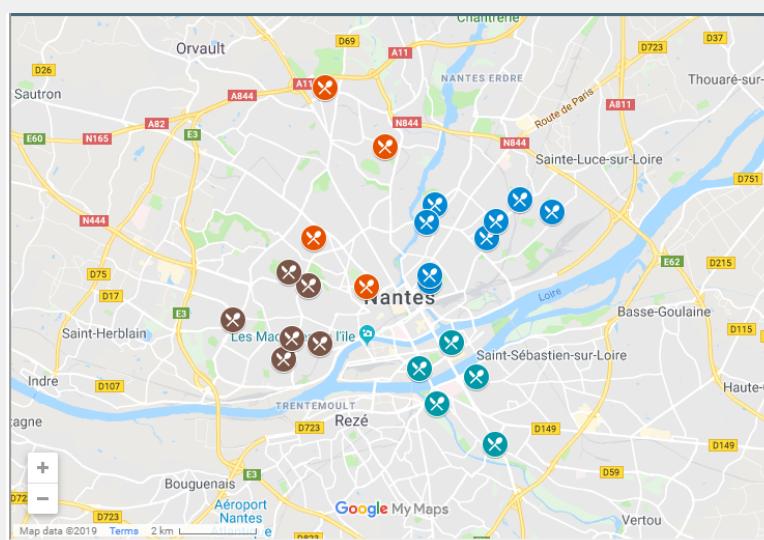


O' Menu	
City	Nantes
Geographical focus	Metropolitan level
Launched in; current status	2012; ongoing
Further information	<a href="#">Bénéficiaire de l'offre de restauration O'Menu (online)</a>

## Objectives, content and organisation

### Design and delivery of services

The *Services Prestations* provided by the City of Nantes include a variety of services delivered at home or in partner facilities for people with a low income, with a difficult social and economic situation, or mobility issues. As part of these, there is a package of services specifically thought for the seniors, to support them with for instance small bricolage interventions in their homes at subsidised prices. In particular one service that is worth mentioning is O' Menu, which provides senior people with the opportunity to receive a complete meal at home or in one of the intergenerational restaurants as well as associative restaurants distributed across the metropolitan area. The initiative therefore targets different types of needs: those of people who cannot or do not want to leave their home or cook, who may have mobility constraints, but would still like to enjoy a full meal in their premises; and those who wish to have a convivial experience, but at affordable prices and near home. The city estimates that about 450 meals are delivered every year, while currently 23 restaurants have joined as partners. These are distributed across the area as shown in the map.



*Courtesy of O' Menu*

### Target group

This initiative is reserved to citizens older than 60, and prices are based on income (on average between 1,70 to 11 euros). Reservations can be made 3 days before the date of the desired meal. The service is open to individual households as well as facilities such as Établissement d'Hébergement pour Personnes Âgées Dépendantes (EHPAD, retirement home), which often have an agreement in place. The menu can be to some extent tailored to the individual dietary needs.

### Coordination and stakeholder involvement

The Service is provided by the city in partnership with a number of restaurants (mostly intergenerational and associative restaurants) on the metropolitan territory. Currently there are 23 partner institutions. As mentioned above, the initiative also has partnership agreements with EHPADs as well as other institutions.

## **Effectiveness and impact**

### **Impact**

The home delivery option has allowed many seniors with reduced mobility or progressive loss of autonomy to benefit from a home delivered meal of good quality. They can benefit from this service as much as they wish and with no commitment. This is not just an important service for those people who otherwise might have difficulties buying grocery and cooking, but also helps them keep a good and balanced diet at very affordable costs. The option which involves meals at partners restaurants very much favours social integration, integration including with other generations and provides seniors an opportunity to go out and have a good moment of conviviality.



*Courtesy of Dolcerama/YouTube*

### **Monitoring of results**

Evaluations of the initiative have mostly been done informally and through group discussions or bilateral feedback sessions with the users.

## **Innovativeness**

The initiative is innovative because it does not just allow for a reduction of prices to increase access to a meal of good quality and optional conviviality, but it also pays attention to other aspects (both logistical and moral) which might refrain people from participating and tries to tackle those too.

## **Transferability and sustainability**

### **Replication and conditions**

If the objective is to make the service affordable for people who would generally not have the means or see going out for a meal as a "luxury", it is very important that the city is in a position to meaningfully subsidise the meals. The quality of meals is also key; they shall be designed according to the dietary needs of the beneficiary group, while being attractive. It is also crucial to have a large enough network of partners on board, in order to provide a variety in the choice, as well as accommodate logistical needs.

### **Lessons learned**

One of the main difficulties that the city has faced is to make this opportunity known to the less engaged, or more isolated senior people. There are also some hesitations from people to allow a stranger home for the meals delivery, as well as some reluctance to leave home and join one of the restaurants. It is therefore essential to put in place efforts to raise awareness, present this opportunity, offer testimonies and as much as possible dedicate ad hoc attention to these households before they feel encouraged to join. This of course requires extensive capacity, which cities – and the volunteers who are implicated – often do not have.

Vincles (Bonds)	
City	Barcelona
Geographical focus	All city districts
Launched in; current status	2016; ongoing
Further information	<a href="#">What is VinclesBCN - Ajuntament de Barcelona</a> (online)

## **Objectives, content and organisation**

### **Design and delivery of services**

Vincles is a “service designed to combat loneliness by reinforcing the social relationships of senior citizens who feel lonely, using new technologies to improve their well-being”. With the help of an user-friendly app, it aims to enable older people to communicate and interact with their family and friends, as well as with other senior citizens belonging to the Vincles network through video calls and text, video or voice messages. Through this app, users can stay in touch with their loved ones, and meet new people with shared interests.

The City Council provides users with a tablet with internet connection and the app; for users who already have a tablet/smartphone and internet connection, the City Council assists in installing the app. New users receive training to learn how to use the app. Relatives and friends who wish to be connected to the users can download the app to their devices. If a user encounters any problem with the tablet or the app, there is a free helpline available.

### **Target group**

Vincles is designed for people meeting the following criteria:

- At least 65 years old;
- Registered as resident in Barcelona;
- Willing to create and maintain active social relations;
- Motivated to learn to use the App;
- Able to speak Catalan and/or Spanish.



Courtesy of Ajuntament de Barcelona

### **Coordination and stakeholder involvement**

This initiative is coordinated by the Barcelona City Council. Other stakeholders, such as the Bloomberg Philanthropies Foundation, are also involved in the implementation of Vincles by providing funds, monitoring the results, and analysing the potential for replication in other cities. NGOs like Amics de la Gent Gran, specialised in addressing unwanted loneliness, provide support.

## **Effectiveness and impact**

### **Impact**

The Vincles initiative has received very positive reviews, as it facilitates communication between senior citizens and their family and friends, making them feel accompanied, motivated and self-sufficient. Moreover, it helps seniors to meet people and learn new skills. In December 2018, the app had a thousand users. In March 2020, the number of users has risen to 2.331.

### **Monitoring of results**

A team of professional Vincles social workers and animators provide support sessions for users, ensuring that they can use the app. They also conduct periodic personalised follow-up to monitor progress. The Bloomberg Philanthropies Foundation and the City Council maintain regular progress calls in order to monitor the development of the project.

### **Innovativeness**

Vincles is considered a project of social innovation. In 2014, the proposal was awarded the first prize of the Bloomberg Philanthropies' Mayors Challenge recognising social innovation projects to improve the quality of people's lives. The prize, worth €5 million, served as an important boost. In the near future, local authorities want the Vincles app to become the 'senior citizens app'. This would entail including in the app information about all activities and services offered by the city for older people, along with an online GP videoconference service for the less mobile.

## **Transferability and sustainability**

### **Replication and conditions**

Vincles has not been replicated outside Barcelona yet, although several cities have expressed interest in this project. This is the case of Singapore, Santiago de Chile, Jalisco and Malaga. Some countries have started experimenting with digital platforms to support social participation and fight against loneliness: e.g. CareZone (USA), Tyze (Canada) and Voisin-Âge (France). Vincles can be easily transferred, as it does not depend on particular local conditions. Sustainability in the long term would be facilitated in contexts where (at least some) senior citizens already have smartphones or tablets, as it would reduce costs for local authorities.

### **Lessons learned**

Vincles has demonstrated that technology has a remarkable potential to improve the lives of senior citizens. City officials realised that this app could help users to do much more than staying in touch with their families; it could broaden their social relationships and strengthen their bonds with the local community, thus reducing the feeling of loneliness and preventing some health problems. This initiative has also challenged stereotypes about older people not interested in technology, as it has succeeded in across all city districts and is expected to continue growing. 80% of users are women, which highlights the high level of interest of older women in age-friendly activities.

## 5. Respect and social inclusion

Amsterdam vertelt (Amsterdam narrates)	
City	Amsterdam
Geographical focus	City wide
Launched in; current status	2016; finished
Further information	<a href="#">Amsterdam vertelt</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

Amsterdam vertelt (Amsterdam narrates) started as part of the bigger programme Long Live Art (2013-2016) by the Dutch cities Amsterdam, The Hague, Eindhoven, Leeuwarden and Maastricht, with the goal of increasing and diversifying the supply of cultural activities for older people, as well as increasing intergenerational contacts. In Amsterdam this was implemented as Amsterdam vertelt, which evolved into a stand alone project in 2016.

Amsterdam vertelt has two pillars: photography and literature. In both pillars, older people become familiar with the opportunities of the respective activity. They do this together with younger people, in pairs.

In the photography pillar, older people are able to participate in masterclasses and workshops, provided by professional photographers. They learn about technique and composition, after which they walked through the neighbourhood to make pictures, together with their fellow (a young person). Similarly, in the literature pillar, professional writers offer masterclasses and workshops, after which the pairs start writing their own prose or poems.

#### Target group



Courtesy: Public Library of Amsterdam / OBA (2019)

All older people (of age 65 and over) in the four participating city districts were part of the target group. In these four target districts, the target group is approximately 66.000 older people.

Since the project is dependent on youth as well, they also belong to the target group. Their number in the target area is around 137.660.

#### Coordination and stakeholder involvement

Amsterdam vertelt is a joint initiative developed by the city's photography museum Foam and the Public Library of Amsterdam. The project was funded by several cultural funds (The Art of Impact, FNO, Fonds voor Cultuurparticipatie, Fonds Sluyterman van Loo). Older people were involved prior to the start: by means of co-research among their peers, older people identified the target group's wishes and preferences related to cultural activities.

## **Effectiveness and impact**

### **Impact**

The project takes place during one year, sequentially in the involved neighbourhoods. Annually, in total approximately 300 older people participate, together with 150 young people.

There are multiple outcomes of the project. In the first place, intergenerational contacts are stimulated and strengthened by the formation of the pairs of youngsters and seniors. They get to know more about each other's living worlds, which improves mutual respect. Moreover, by the nature of the activities, the participants improve their cultural and linguistic skills. The older people involved in the photography activities learn how to use digital cameras as well. Among a share of the participants, interest in cultural activities has been sparked by the project.

### **Monitoring of results**

During the development of the initiative, older people have been involved by means of a seniors panel. During the project and after, there have been a mid term and ex post evaluation using the same (qualitative) panel approach.

### **Innovativeness**

The project has a few innovative elements, such as the pairing of older and younger people, but what may be more impressive, is that the project formula succeeds to tackle multiple issues older people struggle with at once, including loneliness, technical and cultural illiteracy and physical exercise.

## **Transferability and sustainability**

### **Replication and conditions**

Initiatives with similar approach exist (e.g. Together Old and Young, funded by the EU's Erasmus+ Programme), although no exact copies of the Amsterdam vertelt project are known. When the project is being replicated, there are a couple of conditions that should be assured. First, effective connections between the participating volunteers and cultural institutions are necessary to provide a diverse set of cultural activities and to make sure that the activities are well guided. Second, financial resources are necessary to involve professional writers and photographers that provide workshops.

### **Lessons learned**

The impact was increased by working on the neighbourhood level and by involving inhabitants (in the approach, recruitment, implementation and finishing). Moreover, organizing extra activities increased the embeddedness of the project in the neighbourhood and rest of the city, because it increased the chance of inhabitants learning about the project. Displaying the photos in the city's Foam photography museum led to another 40.000 people learning about the project.

## 6. Civic participation and employment

Anmäl hinder (Report obstacles)	
City	Gothenburg
Geographical focus	City-wide
Launched in; current status	2017; ongoing
Further information	<a href="#">Anmäl enkelt avhjälppta hinder - Göteborgs Stad</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

In 2017, an app called Anmäl hinder (report obstacles) was launched by the City of Gothenburg. This app allows the user to report places where there would be a need to improve accessibility to allow a better use of public spaces. The app was launched by the city's Housing Office (Fastighetskontoret) as part of its work to improve the accessibility of the city, thus also contributing to making Gothenburg an age-friendlier city. In this work, the most concrete goal is to remove unnecessary obstacles in the urban environment, such as heavy doors, bad lighting and stairs without railings. The Anmäl hinder app allows the user to take a picture of a place that would require attention and to describe and categorise the obstacle while including a geotag of its location. The user can also voluntarily leave their contact information when reporting. The app uses an open source code, so it could be replicated also elsewhere.

#### Target group

The purpose of the app is to allow citizens to contribute to making the city more accessible for people of all ages and abilities. The app is not specifically aimed at a certain user group.

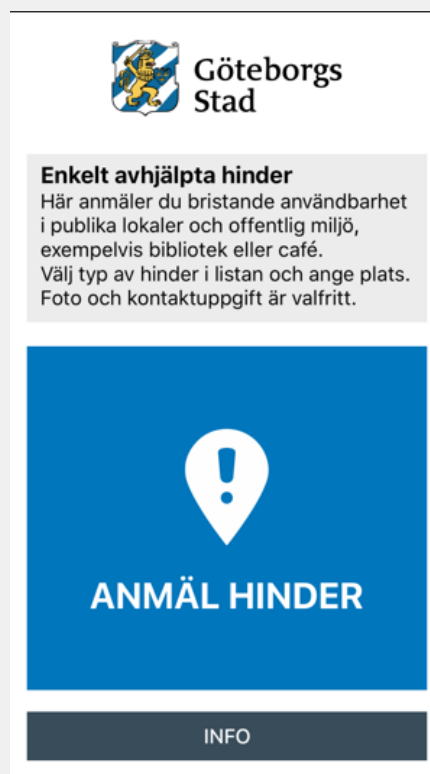
#### Coordination and stakeholder involvement

The City of Gothenburg's Housing Office (Fastighetskontoret) is engaged in making Gothenburg a more accessible city. Numerous measures have been taken in working towards this objective, including launching the Anmäl hinder app. This app was developed by the Housing Office in cooperation with a private company that was in charge of designing the app.

### Effectiveness and impact

#### Impact

The impact of the Anmäl hinder app can be seen in number of obstacles that have been reported. The app was launched in March 2017, and during 2017 and 2018 a total of 378 reports were sent to the city. This can be compared to the number of reports from the ten-year period preceding the launch of the app, between 2006 and 2016, when 156 reports were made. This means that roughly 70 percent of all reports from the last 12 years are from the time following the release of the app.



*Courtesy: Göteborgs Stad*

### **Monitoring of results**

The city monitors the use of the app and follows up on the number of reports of obstacles. Statistical follow-up is also carried out according to what types of obstacles are reported and which departments have the main responsibility for removing the reported obstacle.

### **Innovativeness**

In 2018, the Anmäl hinder app was awarded the Swedish eGovernment Award by the Swedish Association of Local Authorities and Regions for the most innovative digital solution in public administration. Compared to traditional ways of reporting obstacle, an advantage of the app is that the user can take a picture of the obstacle, which can help the city assess what types of measures are needed.

### **Transferability and sustainability**

#### **Replication and conditions**

There are no obvious context-specific conditions that would hinder the replication of the Anmäl hinder app. Particularly as the app uses an open source code, this means that it can be replicated also elsewhere in Sweden and abroad. At this stage the app has been replicated in Sweden in at least the municipalities of Sjöbo and Trelleborg.

#### **Lessons learned**

Having an app that is based on an open source code provides good conditions for transferring the app to other cities. While this app has been designed to allow users report obstacles in the city, a similar app could be used also for other purposes, e.g. for identifying places that people consider to be unsafe. More broadly, an app like this could be seen as having a lot of potential as a participatory urban planning tool that could be used to obtain a residents' perspective on how particular location should be developed.



User involvement in urban planning	
City	Oslo
Geographical focus	City-wide
Launched in; current status	2016; ongoing
Further information	<a href="#">Medvirkningskonferanse</a> (online)

## Objectives, content and organisation

### Design and delivery of services

One of the most important measures taken in Oslo is the decision to develop the action plan for an age-friendly city based on input from various methods involving older people. This includes public meetings ('Medvirkningskonferanse'); inspection rounds with older people to help visualise and demonstrate the good and bad aspects of being older in certain parts of the city (so-called 'Seniortråkk') and involving older people in focus groups and targeted conversations to uncover underlying issues. User involvement has also been important in anchoring age-friendly perspectives in departments such as the Planning and Building Services and the Urban Environment Agency of Oslo. In these cases, older people have been involved through e.g. the 'Seniortråkk' (inspection) where the topics of benches, lights and public toilets were on the agenda, to ensure easily accessible green spaces and social infrastructures in their city districts. This was evident in the development of Hovseter, an area in the city district of Vestre Aker where the older inhabitants were actively involved in the planning process alongside the Planning and Building Department and the Environmental department. New benches, pathways, pavements and exercise areas were crucial to staying fit and healthy, with or without a rollator. Ease of access and safety when using the nature reserves surrounding Oslo, namely Marka has also been part of similar rounds with the Urban Environment Agency.

Older people were also trained in using iPads, and being inspired by initiatives in Gothenburg, older people filmed their day. This helped uncover both the excellent and worse parts of being an older person in a city. User involvement has changed the way these departments perceive their target groups, ensuring an accessible and safe city for all.

### Target group

Age-friendly city is primarily focused on people aged 60+. Moreover, the initiative 'Age-friendly Oslo' has purposefully not defined subgroups and target groups outside people over 60+, though the policy initiative does appeal to the segment of the population that is able to live at home independently, or semi-independently. This is also why their action plan has not included housing and care, as other plans are covering this in Oslo.



Photo courtesy City of Oslo

### Coordination and stakeholder involvement

User involvement has been one of the main pillars of building the age-friendly city policy in Oslo. This requires close collaboration and longer processes than otherwise would have incurred due to the different methods that were put in motion. The action plan for an age-friendly Oslo is based on contributions from older citizens and tied to six of the WHO's policy objectives. The Department of Older People, Health and Employment has been the main coordinator but has managed to engage other departments and services in Oslo municipality to consider age-friendly aspects in their policy making. This is a truly bottom-up approach to policy making.

## **Effectiveness and impact**

### **Impact**

The impacts of the user involvement are immediately visible with new benches at shorter intervals, as well as discussions surrounding the availability of public toilets and better lighting being considered by the departments at Oslo municipality. The feedback from older people in the city districts has also been highly positive. Being seen and heard is pertinent to the feeling of being a resource to society. The outcome of user involvement is the gradually changed practices of some departments that are seeing the city with new 'age-friendly' eyes; this will help create a more inclusive city in the long run, where the stigma of older people will disappear.

### **Monitoring of results**

No indicators have been developed for user involvement, aside from qualitative feedback given to the project managers in the districts during meetings. However, the changing narrative is becoming more apparent as age-friendly policies are considered as part of the overarching framework conditions for policy development across departments in the municipality. It is important to define what type of user involvement will suffice for the various projects, and whether or not a new project warrants user-involvement. Different projects require different user-involvement practices, ranging from interviews, to focus groups, public hearings/meetings and mapping-rounds. For future monitoring of the programme, the following indicators are suggested:

- Number of older participants in city district meetings and consultations;
- Number of new projects as a result of user involvement.

## **Innovativeness**

Extensive user involvement is an innovative, dynamic and democratic approach to policy development. It is innovative in its method and organisational structure as it places greater emphasis on user needs rather than the perceived needs of a population. It helps to challenge the perception of what age-friendly cities are and will be in the future and forces a new approach to be thinking about collaboration between municipal services and agencies.

## **Transferability and sustainability**

### **Replication and conditions**

User-involvement is an innovative planning method, and other municipalities in Norway and abroad interested in age friendly policy initiatives interested should consider approaching the topic from a bottom-up perspective. The user-involvement perspective is important as it contributes towards the long-term sustainability of age-friendly policies. It is anchored in the public and ensures that municipal agencies and services consider age-friendly practices in their policy formulation. The user-involvement aspect is a powerful tool as it appeals both to the political and administrative levels of municipal governments. It requires good communication, excellent management of expectations connected to user-involvement influence and clear participatory structure to ensure that all voices are being heard.

### **Lessons learned**

After the first public meeting it was concluded that older people are generally less interested in healthcare services than the municipality initially assumed. Aspects such as being able to continue to live and thrive and have meaningful lives were considered more important. Small adjustments on e.g. the distance between benches and their design, distance to tram and bus stops, access to green areas and better lighting help facilitate the use of the city and would be enough to entice a greater number of older people to be more active in their local area.

## 7. Communication and information

Centres locaux d'information et de coordination – CLIC (Local information and coordination centres)	
City	Nantes
Geographical focus	Metropolitan level
Launched in; current status	2004; ongoing
Further information	<a href="#">Les centres locaux d'information et de coordination</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

The CLIC provides older people with a clear and accessible overview of the services and opportunities that the city offers to them. This overview remains a challenge. The issue that the city has faced is not just to map and clearly present the various services, initiatives and tools which can be offered, but to concretely reach out to a vast and often inaccessible community of users, who have limited digitalisation skills and who live in isolation. For fifteen years, the City of Nantes has set up a single point of contact for people aged over 60 and their families. This desk has the role to inform, listen and support to find solutions tailored to the needs of everyone: home helpers, institutional accommodation, meal delivery, remote assistance, etc. There is an array of leaflets, catalogues and paper/digital outlets which is developed and different contact points which can provide tailored support and information.

#### Target group

This service is open to the public and is specifically designed to people aged over 60 as well as their families and all the professionals working in this domain. Each district has an office and there are mobile kiosks, which also reach out communities at the neighbourhood level, targeting events and other types of gathering to proactively engage potential beneficiaries.



*Courtesy of Protecvie*

#### Coordination and stakeholder involvement

The CLIC is managed by the Centre Communal d'Action Sociale (CCAS). It has a central coordination office and neighbourhood contact points. They also use local partners such as associations to proactively reach out at the neighbourhood level and to bring their information offer to less engaged communities and households.

### Effectiveness and impact

#### Impact

Nantes has a vast portfolio of initiatives and support services to offer, which are well presented and accessible to the public through different outlets. The City also uses the *rencontres de quartier* (neighbourhood meetings), and the several encounters at the district and neighbourhood level to disseminate as much as possible information on new opportunities and services. Communication efforts are therefore well in place although there is no specific data to prove the extent to which the local old population is up to date on the offer. They also provide a welcoming, safe space to discuss concerns, fears, explore together pathways and

raise awareness . One interesting effect has been that young seniors come to gather information for their parents, and in this way already acquire information and start thinking about their future.

### **Monitoring of results**

There have been some informal monitoring efforts, but no specific studies have been carried out. The city is aware of what are the areas of the city or the subgroups which still remain out of their reach in terms of engagement and awareness raising. A mapping exercise could help though direct efforts toward those groups which are still out of reach.

### **Innovativeness**

CLIC allows to have a centralised focal point for information which gathers not only city related services and initiatives but also the offer by local associations and civil society organisations. It has been very beneficial not just in terms of simplifying and making more efficient the communication strategy and efforts, but also to ensure coordination and creation of links across the several initiatives and organisations operating in this domain.

### **Transferability and sustainability**

#### **Replication and conditions**

The CLIC only operates in the Nantes metropolitan area, as such it has not been replicated. Essential features for replicability include the willingness and commitment by the city to invest in communication efforts and in continuously adapting those to the different local dynamics (in terms of outreach, methods, content). This requires time and financial means. It is also important to have in place a dense network and coordination among all actors working in this domain, which allows to gather the offer of services relatively easily.

#### **Lessons learned**

A challenge remains the inability to reach out to those groups which are less active and involved in the activities that the city and other association propose. The service has realised that not only more capacity is needed to engage proactively those individuals and communities which are difficult to reach; but that beyond and before information, what is needed is a real awareness raising campaign, to inform people about what they can expect and what path they can take before they become old and encounter certain challenges. What is also important is to promote a cultural change for which seniors should be active, open to receive help and support, join leisure activities and receive attention and care; last but not least, think about their future. This has often been seen as one of the major obstacles to engagement, where some do not feel “this is for them” or that “they need it or even deserve it”.

Collaborative research by Higher Education Institutions	
City	Greater Manchester
Geographical focus	City-wide
Launched in; current status	MICRA was founded in 2010 (collaborative actions have existed before); the activities are ongoing
Further information	<a href="#">MICRA</a> (online)

## Objectives, content and organisation

### Design and delivery of services

The Greater Manchester Area is characterised by strong linkages between research and practice in the field of ageing. Particular worth mentioning is MICRA: the Manchester Institute for Collaborative Research on Ageing – which is part of the Greater Manchester Ageing Hub.

The research areas include architecture, economics, engineering, history, life sciences, medicine and sociology and are covered in three thematic focus areas: Ageing and Health (how to provide effective and efficient health and care for ageing populations?), Ageing and Society (how can societies better accommodate ageing populations?), and the Biology of Ageing (how and why do people age?).

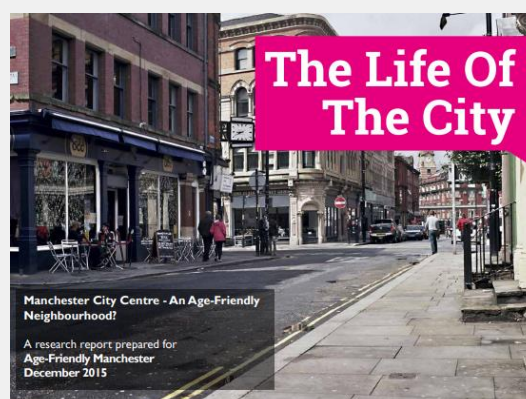
Examples of ongoing research projects include: Ambition for Ageing (on combating social isolation), fRailI (on causal processes relating to frailty and wellbeing at older ages), Green infrastructure, OPUS (on older people's sexuality) and PrevenIT (on use of IT to assist ageing).

Besides pure research output, MICRA's activities also focus on:

- Hosting events where the affiliated academics present their latest research efforts and attract audiences of up to 100 including researchers, care providers, older people, local government, National Health Services (NHS) and the private sector. The programme usually consists of a networking lunch at 1pm and runs from 2 - 4 pm. There are 3 to 4 presentations, a coffee break, and a Q&A session;
- Collaborations with various stakeholders on developing ageing strategy, policy and practice.



Left: research presentation organised by MICRA. Photo courtesy of MICRA.



Right: example of research publication. Courtesy of Centre for Spatial Inclusion Design-Research

### Target group

The research network aims to increase knowledge about ageing, for various interested parties:

- Policy makers, including civil servants and project officers from NGOs;
- Other ageing researchers;
- In the end, older people themselves.

The network is not only meant for the target groups in the Greater Manchester Area, but strives for a geographical reach as big as possible – up to research for e.g. Bolivia.

### **Coordination and stakeholder involvement**

Local universities (e.g. University of Manchester, Manchester Metropolitan University, Manchester School of Architecture; University of Salford) work with Greater Manchester Combined Authority, the ten Greater Manchester local authorities and NGOs on research related to ageing and age-friendly. Coordination by the Greater Manchester Ageing Hub.

### **Effectiveness and impact**

#### **Impact**

MICRA's network currently consists of over 300 academics and 2.000 members, with over 60 research projects. Since 2016, 31 events have been organized. The University of Manchester, Manchester Metropolitan University, University of Salford have also signed a Memorandum of Understanding to work together on dementia research, perpetuating the joining of forces. Furthermore, the Higher Education Institutions have taken part in multiple external conferences and research exchanges (e.g. collectively hosting the British Society of Gerontology conference).

#### **Monitoring of results**

Though MICRA's output is known, the collaborative research activities on ageing in the Greater Manchester Area encompass more than that. On this level, there is no formal monitoring or evaluation, so it is hard to report on aspects such as the translation for research to practice.

### **Innovativeness**

Far closer cooperation between research and practice than can be seen in other cities – thereby answering the need for the latest evidence based insights on ageing expressed by practitioners.

### **Transferability and sustainability**

#### **Replication and conditions**

Collaborative research requires the presence of a local university or similar research institution that can offer academics specialised in topics that are linked to ageing. Furthermore, funding and experience with and capacity for networking and dissemination activities is necessary.

#### **Lessons learned**

The collaboration has transcended professional boundaries and competition for the greater good of Greater Manchester.

## 8. Community support and health services



GoldenSports	
City	Amsterdam
Geographical focus	All city districts except North and Southeast
Launched in; current status	2014; ongoing
Further information	<a href="#">GoldenSports</a> (online)

### Objectives, content and organisation

#### Design and delivery of services

GoldenSports was founded by human movement scientist Leonie Everts in Amsterdam. She wanted to increase the possibilities of sporting for older people in the neighbourhood and to give them the chance to meet other older people in the area. The motivation for this desire is that she observed many younger people sporting in public spaces, but hardly any older people.

GoldenSports is a platform that offers physical exercise for older people. The activities take place outside. After warming-up, the programme consists of 15 minutes of training balance and coordination, 15 minutes of training for muscle power and 15 minutes of sports and play.

The sessions are led by professional physiotherapists as instructors. Therefore, participants need to pay a small fee to cover the costs. This ranges from €3 to €5 per session. There is no subscription, making it accessible to attend whenever it suits the senior.



Since 2016, the platform has adapted its services to older female migrants as well. For older women with a migrant background, the activities are tailored to their culture and preferences. This means that the activities are inside instead of outside, with only women (both participants and instructor), and the activities are temporarily paused around Ramadan and summer holidays.

#### Target group

GoldenSports is meant for older people (65 years and over) who still live at home. People aged 55 and over who have retired and have physical complaints are also welcome to join.

#### Coordination and stakeholder involvement

GoldenSports is dependent on volunteers for the coordination and execution of the programme. They take care of the continuity by collection of the fees, calling participants to stay informed about them and making sure nobody is excluded in any way. Lastly, funds are an important stakeholder to make sure the activities can be financed (e.g. startup costs such as marketing).

## **Effectiveness and impact**

### **Impact**

In 2017, the number of participants was around 350, aged 70 years on average. Two years later, the amount of participants has doubled. They rate the activities with an 8.3. GoldenSports has both a physical and social effect. According to the participants, it creates a more active lifestyle (reported by 80% of the respondents), gives a better physical condition (75%) and better coordination (64%). Moreover, it enables them to meet new people in the neighbourhood (81%) and to sport more often by doing it together (84%).

### **Monitoring of results**

GoldenSports commissioned an independent research institute to perform a quantitative impact assessment for the whole programme in 2017. In 2018, a qualitative evaluation of the adapted programme for female older migrants was performed.

### **Innovativeness**

Focus on novel needs: active ageing by stimulating exercise, prevention of loneliness and social inclusion of older migrants and respect for their culture by the culturally sensitive version.

## **Transferability and sustainability**

### **Replication and conditions**

GoldenSports has been successfully replicated in nine other Dutch cities, including Rotterdam and Utrecht. There are a couple of points of attention for the transferability of the concept: It requires an urban environment, to make sure enough older people are interested and enough instructors are available for financial sustainability. Low prices with discounts for the poorest are necessary for attendance. In the beginning, a lot of effort should be put into marketing and recruitment. This should be done with a personal touch. Flyers/posters are not sufficient: also word-to-mouth advertising is necessary for reaching the target group.

### **Lessons learned**

The formula is effective because it offers sporting with attractive games and exercises under supervision of a professional instructor who knows how to help older people. Also, the recruitment is effective, by spreading a positive message, creating the feeling of a positive club that is attractive to be part of, yet non-binding.



<b>Salud en Red en Los Barrios (Health networks in the neighbourhoods)</b>	
City	Zaragoza
Geographical focus	All city districts
Launched in; current status	2018; ongoing
Further information	<a href="#">Gobierno de Aragon</a> (online)

## **Objectives, content and organisation**

### **Design and delivery of services**

The city of Zaragoza has begun to develop a community health project through the collaboration between the Government of Aragon (Department of Health) and the City Council of Zaragoza (Department of Social Policies). Salud en Red en Los Barrios (Health Network in the Neighbourhood) is an initiative that is part of Plan de Salud de Aragón 2030. The Municipal Centers of Social Services in the different neighbourhoods of Zaragoza are the center of the implementation of la Estrategia de Promoción de la Salud (the Health Promotion Strategy). This initiative is developed at the neighbourhood level, as an environment of coexistence closer to the people, and through the development of networks between the institutions that work in different sectors within each community.

Salud en Red en Los Barrios' ultimate goal is to improve health, welfare and equality in the different neighbourhoods and districts of the city of Zaragoza. Therefore, the initiative has three clear objectives, being:

- Identify the determinants of health in the different stages of the life cycle;
- Encourage networking based on the realities and needs of the community;
- Promote the use of health assets through community participation.

### **Target group**

Salud en Red en Los Barrios is an initiative that aims to include the whole local community.

### **Coordination and stakeholder involvement**

The initiative created a roadmap to set up a strong Health Network within a neighbourhood by involving different stakeholders. The coordination is done by the Department of Health and the City Council of Zaragoza. The creation of the Health Network in the Neighbourhoods consists of:

- Creating a promoter team, consisting of representatives of the basic public services (social services, health and education) in each neighbourhood;
- Establishing a core group, which includes the promoter team as well as professionals from different sectors present in the community. The core group in each zone identifies the existing healthcare needs and assets in the community;
- Mobilising community assets in the area. This involves giving them visibility within each neighbourhood, making them known amongst all the actors and organizations that work within the community and recommending them. The idea is that from the primary care centres, doctors, nurses or social workers formally refer patients to the health assets, which they can use to promote their health, and formally recorded this in the patient's medical history.

## **Effectiveness and impact**

### **Impact**

The initiative aims to improve the overall health within the neighbourhood. It intends to do so by intensifying the network within the community. This should for example result in more exchange of knowledge between various entities, create better understanding of the current situation and needs within the neighbourhood and increasing participation of the inhabitants.

### **Monitoring of results**

Monitoring the results of the initiative is complicated since the goals are not easily quantifiable. Future monitoring could be focused on:

- The number of partners involved in the network, the number of teams formed and the number of professionals in the teams;
- Number of network activities per neighbourhood and type of activities employed;
- Older people's satisfaction with the network approach.

### **Innovativeness**

Mobilising community assets in the area involves giving them visibility within each neighbourhood, making them known amongst all the actors, entities and organizations that work within the community and recommending them. The idea is that from the primary care centres, doctors, nurses or social workers formally refer patients to the health assets, which they can use to promote their health, and formally record this in the patient's medical history.

## **Transferability and sustainability**

### **Replication and conditions**

Although it is being developed as a pilot programme in three neighbourhoods of Zaragoza, to date the protocol for recommending assets is already present in more than a third of the health centres in Zaragoza. The city of Zaragoza plans to implement this initiative in all of Zaragoza's neighbourhoods (25 in total) by 2021. This initiative is also carried out in other cities in Spain, including Barcelona, and a database of health assets for all these cities is being developed.

### **Lessons learned**

Salud en Red en Los Barrios shows the impact good cooperation between the Department of Health and the local city council can have within a neighbourhood. Effective coordination by these institutes can mobilise a community.

Radars	
City	Barcelona
Geographical focus	55 city neighbourhoods
Launched in; current status	2008; ongoing
Further information	<a href="#">The RADARS project - Universitat de Barcelona</a> (online)

## Objectives, content and organisation

### Design and delivery of services

Radars is a project of community action to detect and prevent risk situations for older people and lessen the negative effects of unwanted loneliness and isolation. It is a prevention and care network in which volunteers, organisations, commercial establishments and public authorities take part. The aim is to help senior citizens who live alone or with other older people to remain in their own homes and feel accompanied, with the help of people around them.

Neighbours and people working in proximity shops and pharmacies are the main actors checking on older people (e.g. their health, appearance, or behaviour). In case of anomaly or incident, they inform the relevant social services. Some volunteers periodically call older citizens to establish a relationship of trust and decrease the feeling of loneliness.

### Target group

Radars has been designed for people aged 65 or over, especially those who live alone or with another older person and want to enrich their social life. The indirect target groups include neighbours, shopkeepers, volunteers, and private and public professional services.



*Courtesy: Ajuntament de Barcelona*

### Coordination and stakeholder involvement

Radars is coordinated by the Barcelona City Council (Department for Social Services) in cooperation with civil society associations of each neighbourhoods. The NGO Amics de la Gent Gran, specialised in combating unwanted loneliness, has deployed a team of volunteers to accompany older people at home or social activities outdoors. In addition, health centres, civic centres and NGOs contribute by encouraging senior citizens to participate in Radars.

## Effectiveness and impact

### Impact

After more than a decade in operation, Radars is currently present in all districts in Barcelona. The social networks articulated by this initiative are now taking care of more than 170.000 older people. As most senior citizens living alone are women (who also face a higher risk of social exclusion), this initiative is having a positive impact on this group of the population. Radars has also had an impact on the territory and the local organisation, as it has facilitated synergies between individuals, entities and services which did not interact previously. It has established new relationships and strengthened community life.

## **Monitoring of results**

All the actors involved in the implementation of Radars regularly participate in roundtables to exchange experiences, decide on their strategy and plan next steps. These roundtables monitor the results of this initiative and assess the progress made.

## **Innovativeness**

The innovativeness of this project stems from its bottom-up, participatory approach where the members of the local community care for each other and strengthen social bonds. In fact, Radars was not initially sponsored by the City Council, as it emerged from a group of neighbours who decided to look after each other. The idea was so successful that in 2012 local authorities took ownership and extended Radars to all districts. Also innovative is Radars' multilevel methodology, whereby different levels of social actors (i.e. volunteers, shopkeepers, professionals from NGOs, local authorities) work in a coordinated, complementary manner.

## **Transferability and sustainability**

### **Replication and conditions**

Radars has not been replicated elsewhere yet. Transferability seems challenging, since Radars succeeds due to the particular social culture of some neighbourhoods and the local public administration in Barcelona. These peculiar conditions could hinder replication in other cities. Its sustainability may be attributed to the permanent commitment and cooperation of all actors involved, and its ability to adapt to the characteristics and needs of each neighbourhood.

## **Lessons learned**

This initiative indicates the importance of engaging different levels of social actors to improve the quality of life of senior citizens. Nonetheless, implementation has not always been easy. Some older people identified by the Radars community are reluctant to trust volunteers who knock on their doors or phone them. This aspect shows the need to have a strong institutional backing to support the work of volunteers.

Strength and balance pathway	
City	Greater Manchester
Geographical focus	Wigan – one of Greater Manchester’s ten local authorities
Launched in; current status	2018; ongoing
Further information	<a href="#">Strength and Balance - Active Later Life (online)</a>

## Objectives, content and organisation

### Design and delivery of services

Falls take up time and resources and local health and social care services and, on a personal level, falls can have a significant impact on older people’s mobility and confidence, with them often requiring more hospital and social care after a fall.

Falls are often seen as a consequence of getting older, but there is an increasing drive from the health and voluntary sectors to work on preventative approaches. Poor muscle strength and balance are two of the most commonly identified risk factors for falls.

In Wigan (one of Greater Manchester’s ten local authorities), there is a pathway that has been developed by the Public Health team within the local authority in association with their sport and leisure services. The pathway includes a six-week supported home exercise programme, followed by ten-week group-based ‘skilling up’ sessions, a 15-week evidence-based strength and balance exercise programme and long-term maintenance sessions, all of which are supported by a home exercise booklet to encourage participants to practice techniques that they have learned throughout the programme in their own time.

### Target group

Any older adult living in the local authority. For the purposes of the programme, older adults are typically aged 65 and above. However, though there is no strict age limit, and any adult that could benefit from programme can take part.



*Photo courtesy of Centre for Ageing Better*

### Coordination and stakeholder involvement

Older people can be referred to the pathway from a local health or social care provider, community worker, GP or practice nurse, or make a self-referral. In addition, the pathway can be delivered by freelance instructor or staff trained in-house in residential or sheltered accommodation or by a community group or charity. This can be a more sustainable approach, as older people often prefer delivery in a setting they are used to and comfortable with.

Older adults can move through the pathway in the typical order of the pathway, or they can access groups directly along the pathway, depending on their assessed level of need.

## **Effectiveness and impact**

### **Impact**

It is too early to assess the full impact of the pathway, and cost savings from the approach may take a number of years to realise. However, falls cause over 200,000 hospital admissions nationally of people aged 65 and older, which in total costs the National Health Service around £1 billion a year. By improving strength, balance and mobility, there is clear potential for the programme to reduce the incidence of falls and save money for local health and social care services. This could potentially allow resources used up by local services on dealing with falls to be allocated elsewhere.

### **Monitoring of results**

It was considered important to allocate funding for monitoring and for this to be considered at the outset of any programme. Developing a monitoring framework that is designed specifically for a programme was thought to be particularly beneficial. This allows local areas to clearly embed monitoring into all aspects of their programme, making it relevant to their programme's aims and objectives. Examples include the PhiSiCAL study toolkit and an Outcomes and Monitoring Framework.

### **Innovativeness**

The programme is innovative in the sense of merging a number of different activities associated with improving strength and balance, into a pathway. These include: ten week 'skilling up' groups with speakers and exercises; six week home exercise programme with home visits and phone support in between; and an evidence based 15-week exercise programme delivered in a number of community venues across the ward. Ring and Ride transport is available.

## **Transferability and sustainability**

### **Replication and conditions**

The pathway is structured into a common approach, so is easily replicable in other local authority areas.

### **Lessons learned**

Peer champions form a central part of provision and are trained to support instructors during class, and accompany instructors on home visits to encourage community-based class attendance. This has been particularly effective in engaging older men. Outcomes are supported if the participant attends other programme sessions, e.g. stroke rehabilitation, health walks. There is also a traffic light system to indicate whether community-based exercise programmes include strength and balance components, to inform onward referral from the pathway. Continuing the exercises at home also helps to sustain positive outcomes.

Zicht in evenwicht - voor oudere migranten (A Matter of Balance – for older migrants)	
City	Amsterdam
Geographical focus	City-wide
Launched in; current status	2016; finished
Further information	<a href="#">Evaluation report of the pilot phase (online)</a>

## Objectives, content and organisation

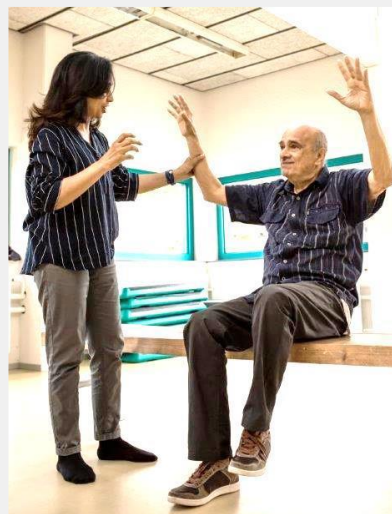
### Design and delivery of services

Fall prevention is one of the four pillars of Amsterdam's Age-friendly City plan. Falling is specially problematic among older migrants. Surinamese, Turkish and Moroccan older people are respectively 4,7; 5,3 and 5,5 times more likely to fall than their Dutch counterparts. The cognitive behavioural group intervention 'A matter of balance' (Dutch: Zicht in evenwicht) has proven effective for Dutch seniors, but hard to reach older migrants with. Therefore, a culturally sensitive version was developed in Amsterdam: 'A matter of balance for older migrants'.

A matter of balance focuses on the development of cognitive skills to stimulate feelings of competence and control. Participants learn to interpret their fear of falling and problematic situations in a realistic manner and to cope with it during everyday activities. The original intervention consists of eight group sessions that teach four strategies:

- learning to convert destructive thoughts about falling in constructive thoughts;
- learning to set and pursue realistic goals;
- receiving informations and tips for lowering risks;
- doing physical exercises, using physiotherapeutic materials and workbook assignments.

In the culturally sensitive version, the workbook has been removed and all other texts have been made as simple as possible and bilingual (with translations to Turkish and Arabic). Sometimes, texts have been replaced with images. Furthermore, cases have been matched more closely to the older migrant's cultural backgrounds, with recognisable character names and lifestyles corresponding to the values and beliefs of the older migrants. Also the course instructors have the same cultural background as the older migrants. Lastly, the adapted version pays more attention to the use of tools for fall prevention.



*Courtesy: GGD Amsterdam*

### Target group

The project focuses on Turkish, Moroccan and Surinamese older migrants. Of these people 29% received only primary education. Also command of the Dutch language is limited.

### Coordination and stakeholder involvement

The Municipal Health Service (GGD) is the initiator, coordinator and (partly) funder of the project. The project is co-financed by three funds: FNO, RCOAK and the research & development fund of the GGD. The GGD provides the service. The AMB-NL intervention is developed by Maastricht University. The Trimbos Instituut has the intellectual ownership of the Dutch version of AMB (AMB-NL) and delivers the Train-the-trainer courses.

## **Effectiveness and impact**

### **Impact**

In 2018, around 100 older migrants participated in the project. The most important outcomes are the increase of self-confidence and the decrease of loneliness reported by the participants:

- 79 % of the participants thinks he/she moves more safely now;
- 75 % claims to have gained more self-confidence;
- 67 % is better able to convert destructive thoughts about falling in positive thoughts;
- 65 % indicates to have gained muscle power from the physical exercises;
- 48 % benefited from the social aspect and claims to have become less lonely.

### **Monitoring of results**

In 2019, an ex-post evaluation by the Municipal Health Agency was finished. The study included a process evaluation based on in-depth interviews with participants and instructors, together with a survey with questions about the satisfaction and effects according to the participants.

### **Innovativeness**

Focus on novel needs: evidence based fall prevention for older migrants. Before, no attention was paid to migrants becoming older in the host countries and to prevention activities tailored to these groups. For this reason, novel methods were used: the cultural adaptation of existing proven interventions with close involvement of the target group in the intervention tailoring process.

## **Transferability and sustainability**

### **Replication and conditions**

Strength and Balance Pathway is a similar initiative. For transferability, an education institution that can train potential course instructors according to the official methodology is necessary. These professionals should originate from the same cultural background as the participants. Second, a location nearby to the participants, such as a social centre is required. Lastly, financial resources are necessary, because to safeguard attendance, no financial contribution can be asked from the participants who in general have trouble making ends meet.

### **Lessons learned**

Special recruitment and a relationship of trust are paramount for success. Recruitment can be done via key figures in existing social groups, but also through channels like general practices, home care professionals and local social centres. The approach should be personal. Also, it is crucial to ensure that the participants know each other and the instructor to large degree, because lack of trust will prevent full participation and can lead to early drop-out.



# Ideas I should write down before I forget them

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