



**Social Innovation on active and healthy  
ageing for sustainable economic growth**



## **Project presentation and policies for active aging in a European dimension**

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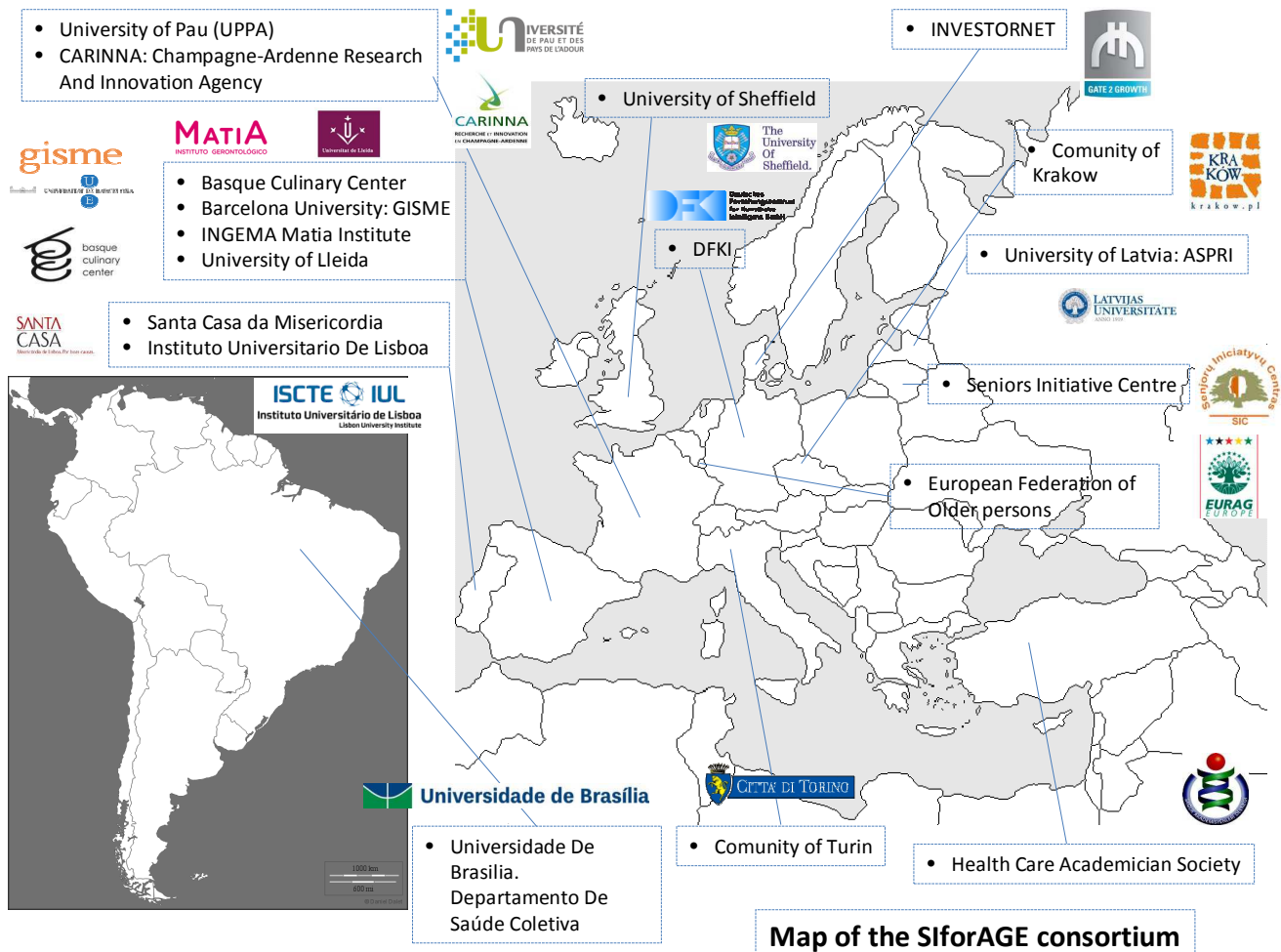


### **General overview**

**Social Innovation for Active and Healthy  
Ageing  
SiforAGE**

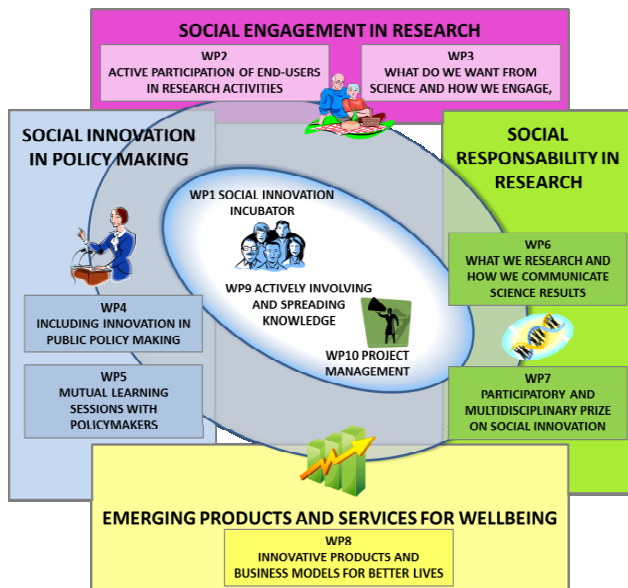
# **SOCIETY FOR ALL AGES**





SiforAGE

## Context in SiforAGE project / Objectives



### Objective of SiforAGE

IDENTIFY and PROMOTE alternative, new and effective ways and means that potentially can encourage and support older persons to stay as much as possible in good health and to go on being active in society as long as they can and want to be.

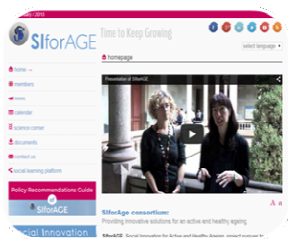
Also a REFLECTION about the scientific communication within the society and the researchers will be provided. Partners of the project diagnose prevailing obstacles and barriers against active and healthy ageing.

Recommendations to policy maker based on EVIDENCE

# MAIN RESULTS (I/II)



**Work Reports**



**SiforAGE Online**



**FP7 Model**



**Dissemination Events**

# MAIN RESULTS(II/II)



**Policy Recommendation Guide**



**SiforAGE Prize**



**Social Awareness**



**SiforAGE Final Conference**

# Evidence-based policy making

## What is it?

**EVIDENCE-BASED POLICY MAKING** refers to the use of sound and rigorous scientific evidence to inform policy makers and policy implementers on what policies **work** (they are effective), are **safe** (they produce no adverse or harmful effects), are **cost-effective** (appropriate allocation and use of resource) and are **replicated if contextualised**.

**EVIDENCE-BASED POLICY MAKING** helps decision making not only on what policies to develop, but also on **what to stop doing**.

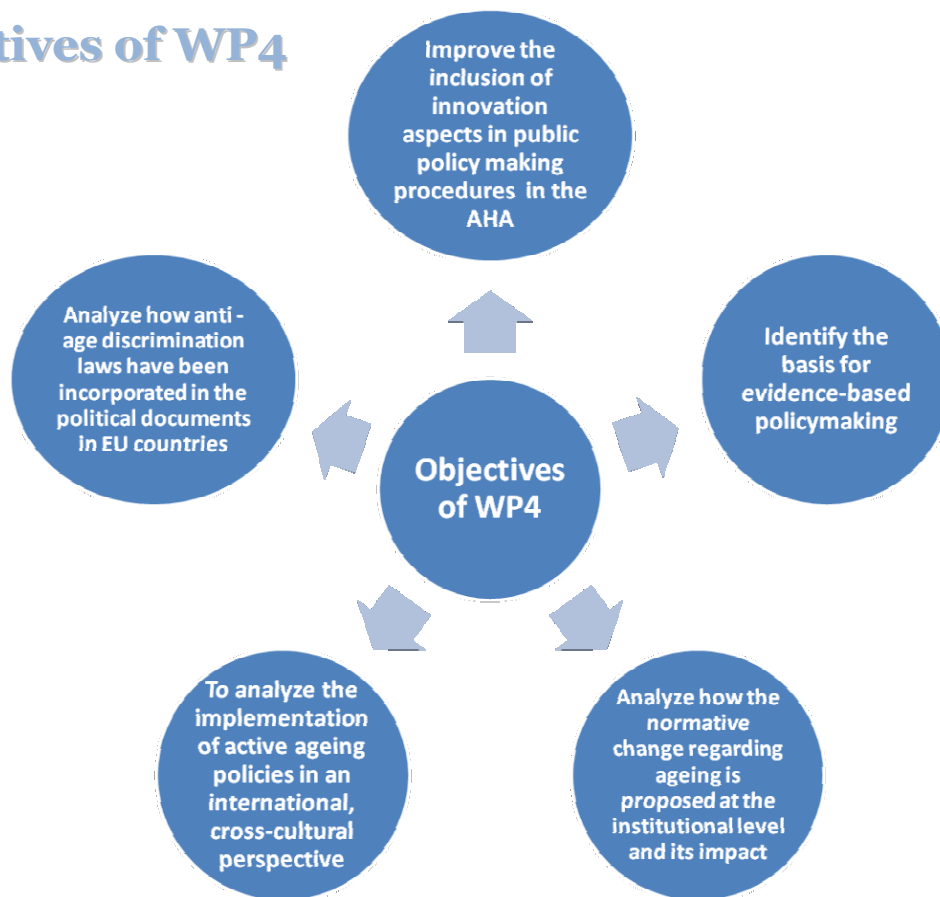
**EVIDENCE-BASED POLICY MAKING** is a **complex** process just as any policy process, so it needs to be based on a **theory** and have a clear **policy objective**. EPM implies the use of **methods**.



**WP4**

**Evidence based public policy making**

## Objectives of WP4



# Evidence-based policy making

## Some basics of EBP

### Based on a theory

A theory of the causal mechanisms that explain the situation the intended policy will change.

### Policy objective

What is clearly the policy outcome we want to achieve in terms of population group, time, location, etc.

### What works

Studies, pilots or interventions provide the evidence on what work and what doesn't with respect to achieving the outcome.

### What is safe

Studies show the intended policy does not produce unintended, harmful effects (e.g., social unrest, inequities, other policy issues...)

### Allocation of resources

EBP requires that studies, pilots or interventions clearly identify every cost possible to ground decisions on what to fund and not fund are based.

### Replication/Contextualisation

EBP is not the same as evidence-base medicine, therefore replicability is limited. EBP always needs to be contextualised.

# Evidence-based policy making

## Methods

### Assessing the evidence

Not all types of evidence are the same. Good quality evidence is the result of good methods & analyses.

### Disregard and Rank

Rank the evidence according to their quality. Disregard "bad" evidence.

### Good quality evidence

Evidence coming from trials, evaluations or implementation research is better than opinions or disperse, unrelated 'evidence'.

### Engaged stakeholders

EBP needs to engage stakeholders at some point during the process, especially those groups most affected by the policy.

### Sustainability

EBP is a long process, affecting different policy arenas and goals. It is not a one-time effort, but one for the long run.

### Monitoring and follow-up

EBP requires collecting data on a regular basis at every stage of the cycle: before policy development, during implementation and after.

# EBP and SIforAGE

### Based on a theory

What is active and healthy ageing as a policy? What is it aiming to achieve?

### Policy objective

Promoting social innovation? Active ageing? Social participation? Mobilization? Learning?

### What works

What studies, pilots or interventions provide the evidence that SIforAGE's objective are to be achieved.

### What is safe

Studies show the goal SIforAGE is promoting will not produce unintended, harmful.

### Allocation of resources

Is SIforAGE assessing cost and suggesting policy makers on what to do with this respect. What is the best policy to promote healthy and active ageing?

### Replication/Contextualisation

SIforAGE is a very large and complex project with many countries involved. Is suggested replicability contextualised?

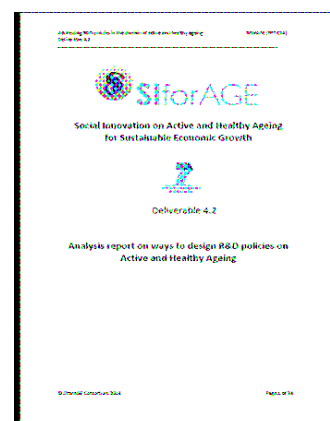


# Main outcomes (I/II)

- ❑ projects are positively impacting the quality of life of persons with health issues
- ❑ transport and mobility programmes for older people are relatively rare
- ❑ dominant approach is addressing the activities related to the labour market only to persons still in productive age
- ❑ target group most often took an active part in the design process of the projects
- ❑ international community has only dealt with the phenomenon of dramatic population change and its consequences since about three decades

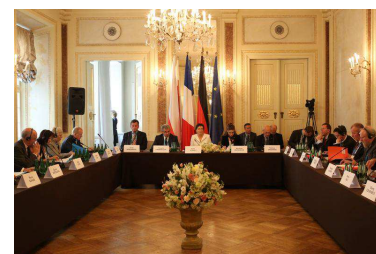


- ❑ declared concept of “a society for all ages” is an objective still far ahead
- ❑ the political challenge is to create a pro-seniors public climate through trans- national cooperation



# Main outcomes (II/II)

- ❑ no ministry /department has sole responsibility for ageing or older people
- ❑ policymaking originate at the national level, implementation delegated
- ❑the range of innovations identified in the three areas was broad, but the local level is the most innovative
- ❑issues affecting older people are sometimes addressed through more general initiatives
- ❑innovation in the policymaking process includes collaboration and partnership, particularly successful between the private and public sectors
- ❑inclusion of older people in shaping policy = positive impact on successful innovation
- ❑communication is central to the success of policy implementation
- ❑collaboration between various governmental departments and organisations crucial for innovation
- ❑there is scope for learning and collaboration between countries/ regions most obviously in the transport field but knowledge exchange across and within countries in the remaining fields is necessary too



# Final report - recommendations and suggestions

- ❑ there is an urgent need to overcome the prejudices and stereotypes connected to older people
- ❑ ageing should not be perceived as a problem, but as a great achievement
- ❑ “life after retirement” is not just one homogeneous phase
- ❑ research should be carried out to determine what “quality of life” really means for older persons
- ❑ “nothing about us without us!”
- ❑ successful scaling up of pilot projects is a must
- ❑ cooperation between sectors, departments etc. is crucial
- ❑ co-ordination at each levels is strongly recommended
- ❑ be careful with services offered exclusively to older persons
- ❑ continuous impact assessment at any stage of any services is needed
- ❑ no different treatment of equals – and no equal treatment of different needs
- ❑ make society conscious of each person’s responsibility to care and protect in a life-course approach!



## INTRODUCTION



# Thank you for your attention



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