Social Innovation on active and healthy ageing

for sustainable economic growth

Deliverable 4.2

Analysis report on ways to design R&D policies on Active and Healthy Ageing

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Grant Agreement No.	321482
Project title	SIforAGE - Social Innovation on active and healthy ageing for sustainable economic growth

Deliverable Number	4.2
Title of deliverable	Analysis report on ways to design R&D policies on Active and Healthy Ageing
Nature of deliverable	R
Dissemination level	PU
Contractual date of delivery	10
Actual date of delivery	18
Version	2nd
Contributing WP	WP4
WP / Task responsible	GMK
Working partners	GMK, UPPA, CARINNA, EURAG, ISCTE, COMMTORINO
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Document History

Version	Date	Description	Authors
V0	18/02/14	Table of content/plan of the analysis	J. Majdecka, P. Świątek
V1	14/03/14	Contribution of each 4.1 partners to the plan of the analysis	N. Calatayud, D. Jarré, E. Urdaneta, X. Allirot. S.Marques, M. Lorenzatto, M. Lamanna, A. Gatti, B. Stree,
V2	01/04/14	First draft of the analysis	P. Świątek, D. Jarré
V3	07/04/14	Partners' remarks and comments - the second version of the document	N. Calatayud, D. Jarré, E. Urdaneta, X. Allirot. S. Marques, M. Lorenzatto, M. Lamanna, A. Gatti, B. Stree, P. Świątek, J. Majdecka
V4	09/04/14	CARRINA's remarks and comments	B. Stree
V5	11/04/14	Finalization of the document	P. Świątek, J. Majdecka

Document Review

Version	Date	Reviewers	Comments
V1	14/03/14	Contribution of each 4.1 partners to the plan of the analysis	N. Calatayud, D. Jarré, E. Urdaneta, X. Allirot. S.Marques, M. Lorenzatto, M. Lamanna, A. Gatti, B. Stree,
V3	07/04/14	Partners' remarks and comments to the draft of the analysis	D. Jarré, E. Urdaneta, X. Allirot. S. Marques, M. Lorenzatto, M. Lamanna, A. Gatti, B. Stree, P. Świątek, J. Majdecka

V4	09/04/14	CARRINA's remarks and comments	B. Stree

Acronyms & abbreviations

Item	Description
CARINNA	Carinna Agence pour la recherche et l'innovation en Champagne-Ardenne (Champagne-Ardenne Research and INNovation Agency)
COMMTORINO	Citta di Torino
EURAG	Eurag Bund Fur Die Altere Generation Europas
GMK	Gmina Miejska Kraków
ISCTE	Instituto Universitario De Lisboa
UPPA	Université de Pau et des pays de l'Adour
WP	Work Package

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1. Executive summary

This analysis is a part of the SIforAGE project (Social innovation on active and healthy ageing for sustainable economic growth), the Work Package 4: "Evidence Based Public Policy Making". The objective of this Working Package was to improve the inclusion of innovation aspects in public policy making procedures on active and healthy ageing, and the identification of the basis for evidence-based policy making.

The aim of this report is to sum up actions taken within task 4.1 "Addressing R&D policies in the domain of active and healthy ageing". Measures taken within the framework of task 4.1 focused on fundamental familiarisation of various types (widely understood) programmes/projects/initiatives[1], implemented by the public administration institutions connected with the issue of active and healthy ageing. Its aim was to invent a scheme of the operations of various types of public administration authorities, operating at various levels, as well as their comparison.

Programmes, focused on one of three topics: health, jobs and transport, were analysed. The actions of the administration on each level - local, regional, national, were analysed.

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[1] For the purpose of the present analysis, these terms will be used interchangeably.

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1. Introduction

Measures taken within the framework of task 4.1 focused on fundamental familiarisation of various types (widely understood) programmes/projects/initiatives[2], implemented by the public administration institutions connected with the issue of active and healthy ageing. Its aim was to invent a scheme of the operations of various types of public administration authorities, operating at various levels, as well as their comparison.

Programmes were focused on one of three topics: health, jobs and transport were analysed. The actions of the administration on each level - from local, through regional to national, were analysed.

2. Methodology

The basis for the analysis presented below is made up of expert interviews with public administration employees responsible for the implementation of selected programmes connected with active and healthy ageing.

Selection of projects for the study

The task of each SIforAGE partners involved in the Task 4.1 was the selection of programmes for the study. This programme were implemented by public administration institutions in three fields: labour, health and transport. Projects, the beneficiaries of which were solely the elderly. Due to the differences in the understanding of the term old age, resulting from, e.g. a different national culture, no age limit was imposed on the beneficiaries. Although it was suggested for the projects to address women and/or men aged of 55 or more years Programmes which addressed older people in an indirect manner - either the entire population (and in consequence also all older people), or part of it, distinction based on a specific trait, e.g. persons who are chronically ill or with disability (and in consequence also partially to older people), were also admissible for analysis. The selection of programmes diversified in terms of range and the level of public administration responsible for its implementation (local, regional and national) was preferred.

Each of the partners was allocated a specific number of projects to be analysed:

- COMMTORINO: 12 programmes (12 were analysed)
- UPPA: 2 programmes (2 were analysed)
- ISCTE: 12 programmes (11 were analysed)
- GMK: 12 programmes (10 were analysed)
- CARINNA: 7 programmes (5 were analysed)
- EURAG: 6 programmes (the partner, at his own initiative, decided to expand the scope of the study to 10 programmes)

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[2] For the purpose of the present analysis, these terms will be used interchangeably.

Before the preparation of the present report, the partners were asked to respond to several questions connected with the process of selecting the projects for analysis:

- Why and how did you choose those particular projects?

- Were they the most important/interesting projects in the issue of labour, health and transport?

- Have they been selected because there were no other?

- Have all the projects, that had been chosen, been interviewed or for some reason (such as refusal to be interviewed) some projects were excluded from your initial sample?

- Personal reflections you experienced when making the interview

From the gathered responses it follows that, in general, the partners tried to select the most representative projects for each of the fields of interest (health, labour, transport), while at the same time maintaining the division into the three levels of their implementation (local, regional and national). In addition UPPA analysed two projects connected with social domain.

At the same time, several observations connected with the process of selecting projects for analysis were made:

- In the case of GMK, EURAG and ISCTE, some of the interesting programmes implemented by public administration authorities had to be excluded from the analysis, as they did not receive approval to conduct an interview with the person responsible for the implementation of the project/providing information about the project.
  Regardless of this, the partners indicate different reactions when sending the request to participate in the SIforAGE study - a part of the respondents provided information gladly, however, in some cases, difficulties occurred in the form of unwillingness to dedicate some time to the study or in designating a person responsible for providing information on the programme.
- In the case of EURAG, the "most typical" programmes for Austria were selected for the sample. However, programmes implemented only in a large city (such as Vienna) were not included. The partner deemed showing an image of this type of project, which is implemented most often, as the most interesting.

Interviews with experts

Upon the selection of projects for the study, interviews were conducted with the public administration employees, who were deemed as the most appropriate person to provide information on the programme being implemented in the given institution. The personal conducting of the interviews, which were recorded and then transcribed, was encouraged.

The interviews were conducted with the use of an interview scenario. This scenario included a list of questions to be answered by the expert interviewed regarding the given programme and activities of

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the public administration institution that is implementing it. This list is presented at the end of the present report as annex. Three questions regarding the issue of legal regulations preventing discrimination due to age were included in the interview scenario at the request of the leader of Task 4.2.

50 interviews were conducted and 50 projects were selected for analysis.

Naturally, the number of interviews is too low to be able to formulate general conclusions at European and national level on their basis. All of the conclusions which will be indicated in the present report regard solely the projects studied.

The interviews were conducted in the native language of each of the partners. Later, each of them prepared an extract in English for the task leader, including a summary of the most important information collected in the course of the interview along with possible quotations. These extracts constitute the basis for the present analysis.

Next, the interviews were analysed based on the criteria presented in the table below.

Origin of the project	What was the reason for his initiation? Who was the initiator? How did the idea come up? any patterns – used or not? What effect did an inventor want to achieve with the project?
Project's duration	What actions were taken during the project? Were there any modifications during the project? Were there any surprises / obstacles in its implementation?
Project's evaluation	What results have been achieved? Any continuation planned?
Role of the target group during the whole project – examined at each stage of the project	

3. List of projects

The table below presents the basic information on the projects implemented by the authorities included in public administration, analysed by each of the partners.

Partner	Project title	D	L	Website of the project
	50+ driver	T	N	http://www.its.waw.pl/doc_media/pdf/Kierowca_50_-_oferta.pdf
	The 50+: mature, needed, competent	L	R	http://www.wiosna.org.pl/main/pl/sec/265.htm

GMK	Active 50+: The instruments supporting occupational/vocational activity of the employees	L	N	http://firma.um.warszawa.pl/realizowane-projekty/activ-50
	AENEAS - Attaining Energy-Efficient Mobility in an Ageing Society	T	L	http://www.aeneas-project.eu/?page=krakow
	Strategic programme: „Public health care"	H	R	http://www.malopolskie.pl/Pliki/2013/PS_%20ochrona%20zdrowia_po_ZWM.pdf
	Strategic Programme: "Intellectual capital and the labour market"	L	R	http://www.malopolskie.pl/Pliki/2013/Program%20Strategiczny%20KIiRP_11.03.2013.pdf
	Government Programme for Senior Citizens' Social Activity (ASOS)	All	N	www.mpips.gov.pl
	Man 45+	H	N	http://www.mezczyzna45plus.pl/
	Senior Citizens Safe on the Road	T	R	http://malopolska.policja.gov.pl/pl/aktualnosci/bezpieczny-senior-na-drodze-3
	Strategic programme „Social inclusion"	H	R	http://www.malopolskie.pl/Pliki/2013/PS_W%C5%82%C4%85czenie_Spo%C5%82eczne_po%20ZWM.pdf
EURAG	Supporting barrier-free renovation adapted to the needs of older persons	H, T	R	http://www.wohnbau.steiermark.at
	Evaluating project proposals	H	R	www.sanitaetsdirektion.steiermark.at
	Vita activa – Bridging generations through learning	L, H	R	http://vitaactiva.uni-graz.at
	Day Centre	H, T	L	www.ggz.graz.at/
	*a)*Ambulatory Services, b) Day Centres for persons with dementia	H, T	L	www.graz.at/cms/ziel/374927/DE
	Senior Citizens' Office	H, T	L	www.graz.at/cms/beitrag/10022350/374944
	"Sommerprogramm" (summer programme)	H, T	L	www.graz.at/cms/beitrag/10022350/374944
	"IP Neu" ("IP New") – Reform of the invalidity pension"	L, H	N	https://www.bmask.gv.at/cms/site/attachments/5/0/0/CH2081/CMS1343980223792/uebersicht_invaliditaetspension_neu.pdf

	"Fit2Work" (fit to work) "Reaching the goal together with united forces"	L, H	N	http://www.wgkk.at/portal27/portal/wgkkportal/channel_content/cmsWindow?action=2&p_menuid=73089&p_tabid=3
	Framework "Health Targets for Austria"	H	N	http://www.gesundheitsziele-oesterreich.at/die-10-ziele/
COMMTOR INO	Central European Knowledge Platform for Ageing Society (CE – Ageing Platform)	L	N	http://www.ce-ageing.eu/
	CoesioneSociale.stat	L	N	http://dati.coesione-sociale.it/
	Gaining Health	H	N	http://www.guadagnaresalute.it/
	Health Profiles and Plans	H	L	http://www.comune.torino.it/pass/salute/category/programmare-la-salute/profili-e-piani-di-salute/
	Heath Emergency	H	L	N/a
	Caniteri lavoro / Jobs in progress	L	L	http://www.comune.torino.it/lfs/pag/p7.html
	Programme "Mutual solidarity and accessory work"	L	L	http://www.compagniadisanpaolo.it/eng/How-we-work/The-Sectors/Welfare-Policy/Projects/Reciprocal-solidarity-and-accessory-work
	Punto Pass	T	L	http://www.comune.torino.it/pass/motore/pass.htm
	Elderly Help Service	H	L	http://www.comune.torino.it/aiutoanziani/finalita.htm
	Silver Thread	T	N	http://www1.auser.it/IT/Page/t01/view_html?idp=56
	Geriatric Evaluation Unit (GEU)	H	R	http://www.regione.piemonte.it/sanita/cms/component/content/article/219-per-richiedere-gli-accertamenti-dellunita-valutativa-geriatrica.html
	System Action Welfare to work	L	R	http://www.regione.piemonte.it/lavoro/politiche/piano_strao.htm
	Occupational Program of Health and	H, L	N	-

	Social Integration			
	Senior Health and Thermalism	H	N	http://www.inatel.pt/content.aspx?menuid=961
	Card 65+	H	R	http://www.cm-oeiras.pt/amunicipal/AcaoSocial/ApoioPessoasIdosas/Documents/PEMPI_final.pdf
ISCTE	Social Urban Vegetable Gardens	L	R	http://www.cm-lagos.pt/portal_autarquico/lagos/v_pt-PT/pagina_inicial/noticias/hortas_sociais_urbanas_aprovado.htm
	Health in Motion	H	R	http://saudeemmovimento.webnode.com.pt/o-projecto/
	National Program for the Health of the Older People	H	N	http://www.portaldasaude.pt/NR/rdonlyres/1C6DFF0E-9E74-4DED-94A9-F7EA0B3760AA/0/i006346.pdf
	Drive Safely – "Caution when driving = Guarantee safety"	T	N	http://www.app.com.pt/1-de-outubro-dia-internacional-das-pessoas-idosas-divulgacao-do-folheto-sobre-a-prevencao-rodoviaria-das-pessoas-idosas
	Municipal Card for the Elderly	H	R	http://www.cm-oaz.pt/acao_social.352/senior.562/cartao_municipal_do_idoso.a920.html
	Living Better	H	R	http://www.cm-oaz.pt/acao_social.352/senior.562/programa_desportivo_%25c2%25abviver_melhor%25c2%25bb.a1098.html
	Lisbon's Gerontology Plan	H, L	R	http://www.cm-lisboa.pt/fileadmin/VIVER/Urbanismo/urbanismo/planeamento/pdm/vigor2/plano_gerontologico_FINAL.pdf
	Active Retirement	H	L	http://www.jf-portela.pt/index.php?option=com_c

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				ontent&view=article&id=559&Itemid=190
CARINNA	Bien vieillir, vivre ensemble	T	L	http://www.social-sante.gouv.fr/espaces,770/personnes-agees-autonomie,776/dossiers,758/bien-vieillir-vivre-ensemble,763/pour-conclure-ce-dispositif,16106.html
	Local information and coordination centre on gerontology	H	L/R	http://www.marne.fr/index.php/public/Vivre/Personnes-agees/Centres-Locaux-d-Information-et-de-Coordination
	"Intergeneration meetings" scheme	L	L	n/a
	Haute Marne and Vitryat provinces Interhospital Geriatrics Medical Federation	H	L	n/a
	Coordination of the Domomédecine initiative	H	R	http://www.carinna.fr/Carinna/Domaines-d-intervention/Sante/Actions-en-cours2/Liste-des-actions
UPPA	Community Life council department	S	R	
	Requisite administrative formalities for older person at home	S	R	

Meaning of symbols

D – domain (H – health, L – labour, T – transport, S – social)

L – level (L – local, R – regional, N – national)

4. Projects connected with the topic of health - a short description

The area of health topics appears in the case of each of the partners, this is the dominating issue in a majority of the cases. The number of interviews for the individual partners is as follows:

- GMK: 3 programmes (2 at the regional level, 1 at the national level)
- EURAG: 7 programmes (4 at the local level, 2 at the regional level, 1 at the national level)
- COMMTORINO: 5 programmes (3 at the local level, 1 at the regional level, 1 at the national level)
- ISCTE: 9 programmes (1 at the local level, 5 at the regional level, 3 at the national level)
- CARINNA: 3 programmes (2 at the local level, 1 at the regional level)

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Projects connected with health, on the topic of which the interviews were conducted, were characterised by varied issues as well as target groups.

Projects implemented in Poland:

- *Strategic programme: "Public health care"* project is a programme of a regional nature. Its main aim is the indication of paths for widely understood health [care] policies for the entire region. One of the priorities is addressed directly to older people. Its aim is the creation of a medical centre providing holistic medical services to patients of an elderly age.

- The *Man 45+* project is a programme of a national nature. Its beneficiaries are men above the age of 45 (hence this regards also older people in an indirect manner) and its aim is the prevention of urinary system cancers through educational and preventative measures.

- The *Strategic programme "Social inclusion"* project is a regional strategy of combating social exclusion, one of the priorities of which is the taking of actions aimed at improving senior citizens' quality of life, among others through increasing the quality of services provided to them in the region.

Projects implemented in Austria:

- The *Supporting barrier-free renovation adapted to the needs of older persons* project is addressed to all of the citizens of the region (hence, also indirectly to older persons), its aim is to encourage citizens to conduct renovations/reconstructions of their places of residence so as to adjust them to the needs of older persons and those with limited mobility, and also to provide financial and information support in its course.

- The *Evaluating project proposals* project is a regional project, the aim of which is the evaluation of smaller projects connected with widely understood health care policies. Its beneficiaries are all residents of the region, without a division into age categories.

- The *Day Centre* project is of a local nature. A centre, in which, during the day, the elderly can benefit from services, pursue various activities, and socialise, which allows them to remain healthy and active, operates within its framework.

- The *a) Ambulatory Services, b) Day Centres for persons with dementia* are projects of a local nature. The projects are addressed to persons requiring permanent nursing care at home as well as those suffering from elderly dementia (therefore not only to older people and not to all of them).

- The *Senior Citizens' Office* project is implemented at the local level. Its beneficiaries are older

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people, however the aim is to inform them on services created with them in mind, which is written into the trend of promoting active ageing and impacts the health of senior citizens in a positive manner.

- The *Sommerprogramm* project is implemented at the local level. Its aim is the promotion and organisation of activities for the older persons, i.e. sightseeing excursions aimed at promoting social and physical activities, thanks to which they can enjoy good health for a longer period of time. It is indirectly also connected with the transport issue.

- The *Framework "Health Targets for Austria"* is implemented at the national level and is addressed to all citizens, and its aim is the promotion of values connected with a healthy lifestyle, which is to result in extending the average life expectancy in health, and increasing its quality.

Projects implemented in Italy:

- The *Gaining Health* project is implemented at the national level, targeted to all citizens, the aim of which is fight the factors responsible for shortening average life expectancy and many illnesses: tobacco smoking, alcohol abuse, unhealthy diet as well as the lack of physical activity.

- The *Health Profiles and Plans* is implemented at the local level, and aimed at coordinating actions connected with health, addressed to all citizens.

- The *Heath Emergency* project is implemented at local level. Older people are its beneficiaries. It aimed at removing the threats to the health of older people, caused by heat (high temperatures).

- The *Elderly Help Service* is a project addressed to older people on a local level. A special telephone number functions within the framework of the project, from which older persons living alone can call, not only due to health problems but also those who are grappling with problems caused by their difficulties in daily life. i.e. they cannot do their shopping independently due to their health.

- The *Geriatric Evaluation Unit (GEU)* is not strictly a project but a service provided by the regional public health service. The actions taken within its framework are focused around helping those older people who are chronically ill and who require care in their homes or who are placed in a special medical facility.

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Projects implemented in Portugal:

- The *Occupational Program of Health and Social Integration* project is implemented at the national level. Its aim, on the one hand is to support older people, who due to their state of health are incapable of functioning without assistance so that they could remain in their own environment for as long as possible, and on the other hand providing content related assistance to persons caring for ill older persons.

- *The Senior Health and Thermalism* project is implemented at the national level and is addressed directly to older people. Its aim is to create the possibility of going to various types of health resorts, spas, etc. for the elderly, having a positive impact on their health.

- The *Card 65+* program implemented at the regional level, and its aim is to create a card for senior citizens, guaranteeing them (based on the monitoring of their state of health) discounts for medical services and medications and also (in a smaller extent) to various types of services having a positive impact on the quality of their life.

- The *Health in Motion* project is implemented at the regional level and is addressed to persons aged 40+ (although older persons are most often indicated as the beneficiaries). Its aim is to support psychical activity, both for improving one's state of health and for social activeness.

- The *National Program for the Health of the Older People* is implemented at the national level. Its aim is the comprehensive change of the social perception of old age as a period of dependency and decline in health. It is implemented through the promotion of the idea of active ageing and the creation of conditions for older people for their independent functioning for as long as possible, and also the preparation of representatives of the younger generations to take on the role of care givers to older persons.

- The *Municipal Card for the Elderly* project is implemented at the regional level, its aim is similar to the *Card 65+* project.

- The *Living Better* project is implemented at the regional level. It is aimed at promoting physical activeness among older people, as representatives of this social category most often lead an unhealthy, inactive (sitting) lifestyle.

- The *Lisbon's Gerontology Plan* project is implemented at the regional level. The inspiration for its launching is the fact of the increasing percentage of older persons among the residents of big cities. Its aim is the creation of a social space friendly for them (both from the architectural point of view and from the point of view of access to various services).

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- The *Active Retirement* project is implemented locally. Its aim is to physically activate older people so that they could enjoy functional autonomy for as long as possible, as well as social activation, aimed at breaking the social isolation of them.

Projects implemented in France:

- The *Local information and coordination centre on gerontology* project is implemented at the local level and aimed at being a single entry point for older people by providing general information on resources available for older people and advise, evaluate and implement action for the support of older people at home. The loss of autonomy is evaluated by practitioners and they make recommendations for specific support.
- The *Haute Marne and Vitryat provinces Interhospital Geriatrics Medical Federation* project is implemented locally. Its aim is to ensure geriatric care to sick older persons, both short-term hospitalization, and (as preferred) short and long terms care in their place of residence.
- The *Coordination of the Domomédecine initiative* implemented at the regional level and is aimed at the implementation of new medical technologies for the purposes of providing care over older people in their homes, and thus, enabling them to stay in their natural environment as long as possible.

5. Projects connected with the topic of health - conclusions

From among the three issue areas distinguished in task 4.1, projects connected with health issues were decidedly the most commonly identified and submitted by the SIforAGE partners invovled, which may attest to the fact that this is an issue often associated with the period of ageing. This is not a general rule regarding all partners, however - in the case of GMK, searching for programmes connected with the health of senior citizens (directly or indirectly) implemented by public administration authorities was rather difficult, which finds its reflection in the number of analysed programmes. This can be deemed as a serious shortcoming in Polish public policy addressed to older people (remarks on this topic will also appear in the part of this report dedicated to good and bad practices).

The next important issue which stems from the analysis of the programmes examined by all of the partners is the variety of approach implemented to answer health issues of senior citizens and

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healthy ageing. Just under half of the projects presented in this report are addressing to older population in general. They aimed at undertaking preventative actions, promoting an active lifestyle and maintaining good health as long as possible in the period of old age. The remaining part of the projects reflects a specific approach to the health of the older people. Old age seems to be identified with health problems – most projects are addressed directly only to older persons already experiencing problems (more or less serious) with their health, or to disabled persons, therefore also to certain older people). They, of course, aimed at having a positive impact on the health of older people as well as improving their quality of life. They did not, however, aim at satisfying their specific health needs. They were also often of a preventative nature, while they constituted a reaction to the currently existing health problems.

A common denominator of all of the analysed projects in the present task by each of the partners is a clear strive to enable older people to:

- enjoy healthy life for as long as possible.
- in the case of the loss or health or its deterioration, the creation of conditions enabling older people to remain independent for as long as possible as well as allowing them to remain in their place of residence for as long as possible (among others thanks to ensuring specialised health care at home).

6. Programmes related to labour issues – short description

The number of interviews for the individual partners is as follows:

- GMK: 4 programmes (3 at the regional level, 1 at the national level)
- EURAG: 3 programmes (1 at the regional level, 2 at the national level)
- COMMTORINO: 5 programmes (2 at the local level, 1 at the regional level, 2 at the national level)
- ISCTE: 1 programme (at the regional level)
- CARRINA: 1 programme (at the local level)

Projects implemented in Poland:

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- *The 50+ mature, needed, competent* project, implemented at the regional level is addressed to unemployed persons aged 50+ and is intended to stimulate their activity on the labour market by working with a trainer – volunteer aged 45+ and to support their employment by group trainings and apprenticeship programmes.

- *Active 50+ The instruments supporting occupational/vocational activity of the employees* project implemented at the national level, is addressed to persons aged 50+ who are at risk of losing employment. Its goal is to stimulate entrepreneurship in this age group by facilitating the starting up their own businesses and/or their requalification if the age does not allow for the continuation of the work performed thus far.

- The *Strategic Programme: Intellectual capital and the labour market* project implemented at the regional level is a strategic programme for the development of the regional labour market. Its tasks are addressed solely to senior citizens before reaching retirement age and are intended to create solutions enabling their activity on the labour market for as long as possible.

Projects implemented in Austria:

- The *Vita active – Bridging generations through learning* project implemented at the regional level intends to create possibility for adults (not only older) to become acquainted with the recent trends in university studies and, in consequence, the improvement of their knowledge and competence and the creation of an intergenerational exchange of experience in the university circles.

- The *IP Neu (IP New) – Reform of the invalidity pension* project implemented at the national level and addressed to disabled persons below the age of 50 (i.e. it is addressed to future senior citizens). It is intended to enable them to come back to the labour market despite health problems.

- The *Fit2Work (fit to work) Reaching the goal together with united forces* project is implemented at the national level, its goal is the employment support of persons with health problems and assistance in remaining an active participant of the labour market.

Projects implemented in Italy:

- The *Central European Knowledge Platform for Ageing Society (CE – Ageing Platform)* project is implemented at the national level and constitutes a platform of exchange

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of experience between regions in the scope of counteracting negative effects of society ageing within the labour market.

- The *CoesioneSociale.stat,* project implemented at the national level, is aimed at creating general statistics constituting a source of information and a tool for the Minister of Labour and Social Policy enabling the creation of adequate policies related to employment.

- The *Jobs in progress* project implemented at the local level, is addressed to persons who are within 3 years of reaching retirement age. It is aimed at assisting such persons in finding employment and, as a result, being active on the labour market until reaching this age.

- The *Mutual solidarity and accessory work* project implemented at the local level, is addressed to all citizens in their productive age, unemployed or at risk of losing their job. It is aimed at supporting their employment situation by employment in paid activities sponsored by non-profit organizations.

- The *System Action Welfare to work* project, implemented at the regional level is addressed to persons at risk of exclusion from the labour market due to their age or lack of qualifications. The goal is to enable such persons to complete vocational training and find another job.

Programmes implemented in Portugal:

- The *Social Urban Vegetable Gardens* project is implemented at the regional level, allowing professionally inactive older persons and unemployed persons to use their time productively and earn money thanks to vegetable cultivation on designated plots.

Programme implemented in France:

- The *Intergeneration meetings scheme* project implemented at the local level, allows for intergenerational exchange of professional experience, particularly teenagers and young adults being taught by older persons.

- Another programme submitted by CARINNA was dealing with labour and conditions of worked but have not been analysed in the frame of this deliverable (TEMPO programme).

7. Programs related to labour issues - conclusions

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The labour issue is present more rarely than health issues in the analysed programmes. These projects, most often, are not just aimed at older people, but at persons before retirement age. These are persons who, due to exceeding the age of 50 or 55, can no longer perform their current job (for instance, due to reduced dexterity) and must requalify or are at risk of exclusion from the labour market simply due to their age (this is related to the phenomenon of discrimination of older employees on the labour market). Actions taken by the public administration are aimed at supporting such persons and providing them with possible assistance in maintaining activity on the labour market until reaching retirement age.

A majority of programmes do not focus on taking advantage of the competence and earning possibilities by persons who are no longer professionally active. They are only the subject of the programmes analysed by ISCTE and CARINNA which is explained in a wider scope in the study dedicated to good practices.

8. Programmes related to transport issues – short description

The number of interviews for the individual partners is as follows:
- GMK: 3 programmes (1 at the local level, 1 at the regional level, 1 at the national level)
- COMMTORINO: 2 programmes (1 at the local level, 1 at the national level)
- ISCTE: 1 programme (at thenational level)
- CARINNA: 1 programme (at the local level)

Projects implemented in Poland:
- The *50+ driver* project is implemented at the national level. Its goal is to enable persons aged 50+ to safely drive a car for as long as possible by creating possibilities of verification of a driver's skills, as well as retraining courses.
- The *Senior Citizens Safe on the Road* project, implemented at the regional level, is addressed to older pedestrians. The goal of the project was to carry out trainings for senior citizens, raising their awareness of how they should behave as a pedestrian to minimize the risk of becoming a victim in a traffic accident and to equip them with reflective elements to increase their visibility on the road.

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- The *AENEAS - Attaining Energy-Efficient Mobility in an Ageing Society* project, implemented at the local level, facilitating older persons' effective use of public transport and use of related modern equipment.

Projects implemented in Italy:

- The *Punto pass* project implemented locally, is addressed to solitary persons and persons with motor impediments and is aimed at facilitating their mobility by assistance in travel or transport of such persons.

- The *Silver thread* project is implemented at the national level. Its goal is to initiate the system allowing older persons to use transport upon request, which will involve the local community and volunteers. The system is aimed at facilitating the spatial mobility of older people.

Projects implemented in Portugal:

- The *Drive Safely – Caution when driving = Guarantee safety* project is implemented at the national level with a general goal of reducing the number of traffic accidents. The component of the project aimed at senior citizens as well as drivers whose driving skills may deteriorate with age and generate a hazard in the road traffic.

Projects implemented in France:

- Project national label *Bien vieillir, vivre ensemble*, implemented at the local level. The label constitutes a moral engagement to better take into account the ageing in all public policies. The label requires in particular to address the following policies: City development planning, Mobility, Housing and Services to individuals (not only in assistance but also for leisure activities). It conducted to the involvement of elderly in policy design and, among others activities, in the field of transport has allowed to set up on-demand shuttle service at conurbation level but also internal shuttle for leisure activities.

9. Projects related to transport issues - conclusions

The projects related to transport issues are relatively the fewest in the analysed group of projects. However the sample included several projects indirectly related to transport (for example, it can be concluded that stimulating the participation of seniors in tourist trips has an indirect relationship

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with transport). Above all were analysed only those programs whose main objective was directly linked to the issue of transportation of older people.

All analysed projects can be considered valid and of an innovative nature. The subject of these projects covers the majority of issues related to the transport of older people. Firstly, the goal is to improve the safety of participation of older people as pedestrians in road traffic (in accordance with various statistics, pedestrians in road traffic are the most common victims of traffic accidents). Secondly, actions are taken to facilitate older persons' use of public transport and, if this is not possible (most often due to health condition), to organize alternative means of transport or to assist persons with limited mobility. Finally, the issues related to older people as drivers is being analysed; it is a complicated issue due to various legal regulations limiting or not limiting the access to driving license due to age – the implemented projects are aimed at diagnosing the driver's own capacities on an on-going basis and improving their own skills or, at a relevant moment, assistance in deciding on stopping driving a car.

All projects related to the issue of transport are intended to counteract social marginalisation of older people by creating opportunities for maintaining their mobility (and, as a consequence, their self-reliance) for as long as possible, as well as to counteract discrimination due to age. They are also in line with the idea of active and health ageing.

10. Projects related to social issue (UPPA) – short description and conclusions

Two projects analysed by UPPA address issues related to a separate domain and focused on social issues. First project *Community Life council department* was implemented at the regional level. The goal of that project was to establish a Community Life council (CVSD) at department level. It aims to encourage an active participation of older persons, family users, professionals in order to build departmental public policies for older persons who live in EHPAD (Accompagnement des Etablissements d'Hébergement pour personnes âgées dépendantes).

The goal of the second project named *Requisite administrative formalities for older person at home* is to assist older people at home who encounter difficulties for completion of all administrative formalities (for example: fill in their imposition, disputes with an administration). The aim of the project is to enable them to regain an autonomy enabling them to complete these formalities.

Especially the second program has an innovative character and contributes to the overall support of the person, his home maintenance and its autonomy. It is possible because the administrative

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support also allows to detect other problems for the older person and to mobilize all relevant professionals (social worker, doctor, etc.). At the same moment it is visible, that those projects are not dedicated to older people in general but to some groups with specific problems as a result of which they lost their independence.

11. Role of public administration and politicians

The analysis of interviews with experts indicates that the role of public administration authorities in managing projects for health and active ageing promotion may be of a dual nature. Firstly, public administration authorities may initiate and conduct such projects themselves which we observe in the majority of analysed cases, particularly in the case of programmes implemented at the local level. At the regional and national level, the second role of the public administration becomes apparent, i.e. specification of general, long-term strategies and development programmes in a given area. These are documents / programmes specifying the broadly understood demographic structure conditions and needs within a given area as well as specifying the most important priorities which should be implemented within foreseen time frames. This helps the lower rank institutions and any non-administrative interested parties to formulate projects addressing current needs and leading to the execution of a coherent policy at the regional or national level. This role is also being demonstrated by the implementation of large-scale umbrella programmes, most often at the national level (e.g. ASOS program in Poland) offering mechanisms for financing minor, non-governmental projects addressed at older people by means of a competition.

The analysis of the expert interviews also points out a relatively significant role of politicians in shaping the projects targeting older people. This role is of major importance in the case of the aforesaid coordination activities performed by public administration institutions (in which case we are dealing with their role from the initiation of a given program until its final settlement) becomes apparent also, in various forms and with various intensity, in the case of projects implemented directly by public administration.

The role of politicians is also visible when we look closely at the methods of financing of analysed projects. Within Task 4.1 were analysed only those projects which are implemented by the public administration institutions so all of them were financed at least partially from public funds. In general there were two methods of financing:

- Funds from local/regional/national budget

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- Funds from public administration institution which realize a project (sometimes with support from EU funds)

In both cases amount and allocation of resources for the project is mostly determined by political decisions. As a result politicians' impact on the implementation of projects in the domain of active and healthy ageing is therefore also visible in this area.

12. Overview of Developments in Ageing Policies (contribution by Dirk Jarré, EURAG)

Population ageing as an global issue got its first international attention by the draft of a declaration on the rights of elderly proposed by Argentine to the General Assembly of the United Nations back in 1948 but the issue of "Ageing" became a topic of concern on the United Nations permanent agenda where it stayed, with growing concern, until today due to a proposal of the government of Malta in 1969.

Several suggestions from UN member states during the 1970s resulted in the decision to hold the very first World Assembly on Ageing in Vienna/Austria in 1982. The Vienna World Assembly on Ageing brought together more than 1.000 participants from 124 member states, from international governmental bodies and from civil society organisations. It concluded by the adoption of the first ever "International Plan of Action on Ageing". This ground-braking instrument highlighted the economic and social consequences of population ageing and emphasized the specific needs of older persons themselves. The United Nations General Assembly adopted this "International Plan of Action on Ageing" later in 1982 and thus it became the leading international document and the basis for the design and development of national policies, strategies and action on ageing. It also initiated and promoted international cooperation among member states and lead to more specific international policy documents. The most important of these is certainly the "United Nations Principles for Older Persons", adopted by the General Assembly in 1991. It fully recognises the progress made in prolonging life expectancy worldwide and stands under the motto *"add life to the years that have been added to life"*. By promoting a common understanding of ageing and by defining areas most important for older persons – like dignity, independence, participation, self-fulfilment and care – the "Principles" have largely influenced legislation and programmes at national level. One year later, in 1992, the United Nations proclaimed "Global Targets on Ageing for the Year 2001: A Practical Strategy" in order to encourage and speed up the implementation of the 1982 Vienna "International Plan of Action on Ageing" during its second decade.

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Already in 1992 the United Nations had decided to observe the year 1999 as the „International Year of Older Persons" under the motto *"A Society for All Ages"*, *„in recognition of humanity's demographic coming of age and the promise it holds for maturing attitudes and capabilities in social, economic, cultural and spiritual undertakings, not least for global peace and development in the next century"* – as the text of the GA Resolution words it. Together with considerations of the World Summit on Social Development four dimensions particularly significant for society as well as for the living situation of older persons were in the focus of the International Year: population ageing, issues of social development, multigenerational relationships, and individual development throughout the life course.

Such growing awareness of the complexity of ageing and the concept of *"a society for all ages"* motivated the UN General Assembly to ask for an overall revision of the Vienna "International Plan of Action on Ageing" of 1982 by a second World Assembly on Ageing to be held in 2002 at the twentieth anniversary of the Vienna event. The task of his Second World Assembly on Ageing, that finally took place in Madrid in April 2002, was to conceive – on the grounds of the experiences and understanding gained over two decades - more sophisticated policies and actions that respond better to the demographic, social, cultural and economic conditions in the twenty-first century.

Also the European Union decided in 1999 to adopt "active ageing" as a new supranational policy design with the objective to achieve greater correspondence – and possibly even harmonisation – between public policies of the member states towards older workers at EU level. Thus the European Union defined two important objectives to be reached by common effort: the "Stockholm Target" of 2001 on the increase of the employment rate of older workers and the "Barcelona Target" of 2002 on the delay of the age at which older workers stop working.

The Madrid Second World Assembly on Ageing in April 2002 adopted a "Political Declaration" and the "Madrid International Plan of Action on Ageing" (MIPAA). This Plan of Action argues for significant changes in attitudes, policies, strategies and practices to respond positively to the important challenges created by population change during the coming decades. It comprises 130 concerns, concepts and action points addressing the changes and the needs of ageing societies and older persons and calls for action that gives more importance to older persons in societal development, that advance health and well-being into old age, and that ensure enabling and supportive environments.

With the intention to base action in the region on a more specific approach the United Nations Economic Commission for Europe (UNECE) decided to set up a "Regional Implementation Strategy"

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(RIS) for the International Action Plan on Ageing which encompasses 10 key commitments with a total of 100 specific points.

After having already dealt with various issues of the ageing European population and based on the decision of the European Committee for Social Cohesion (CDCS) in 1998 to examine the situation of the elderly in society, the Committee of Ministers of the Council of Europe created in 1998 in the framework of the CDCS a Group of Specialists on *"improving the quality of life of elderly dependent persons"*. In September 2002 it presented to the CDCS a catalogue of 10 recommendations mainly on care issues but also with the strong statement that *"the prevention of loss of autonomy and of dependency for elderly people should be a central tenet of health, social care and environmental policy throughout life"*.

The Parliamentary Assembly of the Council of Europe then passed an important Recommendation in 2003 on "Challenges of Social Policy in Europe's Ageing Society" that updated and completed earlier recommendations like the one on "The Future of Senior Citizens: Protection, Participation and Promotion" of 1999 and on "Medical and Welfare Rights of the Elderly: Ethics and Policies" of 1994. In this Recommendation the Council of Europe subscribed the outcome of the Madrid Second World Assembly on Ageing and the commitments of the Berlin Regional Implementation Strategy. It also acknowledges in this context all the positive efforts, the guidance and the coordination of the International Labour Organisation, the World Health Organisation, the Organisation for Economic Co-operation and Development, the United Nations Economic Commission for Europe and the European Union.

During the following years and until 2007 the UNECE "Regional Implementation Strategy" was supported by a Task Force on Ageing composed by experts on ageing matters from government administrations, from science and research, as well as from non-governmental organisations. In 2008 this Task Force was replaced by a Working Group on Ageing the secretariat of which is located in the Population Activities Unit of the United Nations Economic Commission for Europe, UNECE. It is composed by delegates from the 56 member states of the UNECE – normally coming from the national Focal Point on Ageing – a representative of the UN affiliated European Centre for Social Welfare Policy and Research as well as a representative of civil society organisations in consultative status with the United Nations Economic and Social Council.

The Vienna based European Centre for Social Welfare Policy and Research supports the UNECE "Regional Implementation Strategy" by research and documentation activities. It started with

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building up a special unit named "Mainstreaming Ageing: Indicators to Monitor Implementation" (MA:IMI). Today it manages the "Active Ageing Index" (AAI), a tool to measure the untapped potential of older people for active and healthy ageing across countries.

In 2008 the Secretary-General of the United Nations submitted to the UN Commission for Social Development the "First Review and Appraisal of the Madrid International Plan of Action on Ageing" as a preliminary assessment of what had been achieved so far. The report was based on contributions from member states as well as on documentation and analysis provided by the different UN regions. Such review and appraisal reports are considered as important elements of the implementation of the Madrid Plan of Action and have to be presented, according to a resolution of the Economic and Social Council in 2003, every five years.

In February 2007 the Council of the European Union had adopted a Resolution on "The Opportunities and Challenges of Demographic Change in Europe: The Contribution of Older People to Economic and Social Development". This was followed by the Council's Conclusions in June 2009 on "Equal Opportunities for Women and Men: Active and Dignified Ageing" and the Conclusions of November 2009 on "Health and Dignified Ageing".

The European Commission emphasised in its Communication of March 2010 on "Europe 2020 – A Strategy for Smart, Sustainable and Inclusive Growth" the importance of promoting a healthy and actively ageing population in the interest of social cohesion and higher productivity. The Council, on its side, adopted in June 2010 Conclusions on "Active Ageing" encouraging the Commission to pursue the initiative for a "European Year for Active Ageing" in 2012 with the aim of emphasizing the advantages of active ageing and its contribution to solidarity between the generations and to publicise good practices of active ageing at all levels. This was then complemented by a Resolution of the European Parliament of November 2010 on "Demographic Challenge and Solidarity Between the Generations" that suggested to member states to make active ageing a priority for the coming years.

In July 2009 the Committee of Ministers of the Council of Europe passed a Recommendation on "Ageing and Persons with Disabilities" to member states, with its recommendations aiming at promoting autonomy and an independent life of ageing people with disabilities, through better living arrangements, the application of the concept of life-long learning, the improvement of the quality of services through the involvement of the users in the process of designing, implementing and evaluating services and, also importantly, guaranteeing equal access to those services.

In September 2012 the third Ministerial Conference on Ageing of the United Nations Commission for Europe (UNECE) dealing with the regional implementation of the "Madrid International Plan

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of Action on Ageing" of 2002 was held in Vienna/Austria under the title *"Ensuring a society for all ages: promoting quality of life and active ageing"*. The UNECE Ministerial Conference on Ageing in Vienna ended with the adoption of a "Ministerial Political Declaration" containing, in particular, a catalogue of measures the member states commit themselves to implement which address the following core areas identified for enhanced action:

- ➢ Longer working life and ability to work
- ➢ Participation, non-discrimination and social inclusion of older persons
- ➢ Dignity, health and independence in older age
- ➢ Intergenerational solidarity

In December 2012 the Council of the European Union adopted its Declaration on the outcome of "The European Year for Active Ageing and Solidarity Between the Generations: The Way Forward" in which it stated that the European Year 2012 had contributed to creating political momentum leading to a stage where all stakeholders *"are ready to join forces and take a step forward in tackling the challenges and seizing the various opportunities of ageing populations"*. Together with its agreement on seven key political messages the Council also supported the "Guiding Principles for Active Ageing and Solidarity Between Generations" as adopted jointly by the Employment Committee and the Social Protection Committee. This was well in line with the European Commission's now prevailing position that active and healthy ageing constitutes a major societal challenge common to all European countries and that it presents a considerable opportunity for Europe to lead the world in providing innovative responses to this challenge.

13. General conclusions

General conclusions from project analysis

In all analysed areas (health, labour, transport), examples of good and bad practices can be indicated which may constitute an inspiration for all project partners.

These examples are clearest in the case of projects related to health issues which are most numerous in this study. At the same time, it should be noted that the practices are considered good and bad in the context of the goal, namely the promotion of the idea of active and healthy ageing - it is the major project idea and the term of good practice is understood as practice implementing such ideas, while a bad practice is understood as not contributing do promotion of this idea (this means that such a project is detrimental).

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The practices not contributing to the promotion of the idea of active and healthy ageing in the area of projects related to health issues can be summarised as addressing the projects:

- only at older people with serious medical conditions
- treating older persons and disabled persons as identical categories.

The projects discussed in this study are thus positively impacting the quality of life of persons with health issues. The idea of active and healthy ageing should is implemented by the projects whose beneficiaries include all older people, particularly the programmes which include preventive activities. The majority of projects analysed by ISCTE – these are programmes which best implement the idea of active and healthy ageing which include comprehensive, multilateral and long-term activities, are of great interest. They may constitute an example and inspiration for other countries. An example of bad practice is also the low level of Polish public administration bodies' interest of issues concerning the health of senior citizens which is supported by a relatively low rate of projects being implemented.

An example of good practices related to activities for active and healthy ageing are all the programmes related to the issues of broadly understood transport and mobility of older people. Such projects are being implemented relatively rarely, yet they hugely affect counteracting social exclusion of older people and have a beneficial impact on all areas of their life. The examples of activities of public administration related to this area may be considered innovative, worth spreading and continuing.

The projects related to the activity of senior citizens on the labour market may be divided into two groups. It is clear that the dominant approach is addressing the activities related to the labour market only to persons still in productive age. Examples of good practices include programmes such as *Active 50+* or *50+ mature, needed, competent*, within the scope of which comprehensive activities are taken to support the professional activity of persons nearing retirement age. It is worth noting that there are almost no programmes taking advantage of the competence and resources of persons who have already obtained the right to receive a pension. An example of good practice allowing older persons to productively use their free time (and, at the same time, to stimulate own social and physical activity) is the project named *Social Urban Vegetable Gardens* within the scope of which older people obtain a possibility to perform simple gardening activities benefiting their physical and mental health. Thanks to the productive use of free time, they also obtain the possibility of earning, thus promoting (by increasing own budget) the active spending of free time in other areas.

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The strength of most projects analysed in this report is the fact that the target group most often took an active part in the design process of the projects. Sometimes the active participation of the target group was skipped due to organizational reasons, but always its actual needs were taken into account - mostly thanks to the fact that they were diagnosed in projects realized earlier and activities previously undertaken by public administration.

Summary of Developments in Ageing Policies (contribution by Dirk Jarré, EURAG)

Considering that the international community has only dealt with the phenomenon of dramatic population change and its consequences since about three decades, considerable progress has been made on the issue at all levels, particularly in the European region. With the growing awareness that older persons beyond retirement age have also to be considered as full-fledged citizens with human dignity and the right to self-fulfilment, independence, participation in society and care according to needs, public policies and many of the ensuing services in most areas of societal life have increasingly changed in favour of this growing part of the population.

However the declared concept of *"a society for all ages"* is an objective still far ahead and seemingly not easy to reach. The main obstacles to be overcome and the most serious barriers to be removed are the still negative images of ageing and of the elderly, the prejudice that older persons are costly to society and cannot much contribute to its quality and advancement, together with the fact that older persons themselves are not or not fully confident about their own value, real capacities as well as needs, and mainly ignore their fundamental rights or are shy to claim them.

Thus the political challenge is to create a public climate through which the recognition grows that the older population is not a burden but a tremendous asset for society, and that its experience and balanced judgement constitute an important element in shaping the presence and the future of society as much as are scientific and technological progress. Equally important is it to create a truly enabling environment that encourages and facilitates participation of older persons in all segments of society – and this predominantly through dialogue and cooperation between generations. In this sense *"a society for all ages"* means solid rights, clear responsibilities and active ageing at any age.

As progress towards such a *"society for all ages"* differs significantly even inside the European region and learning from each other's successes and failures constitutes the most rational concept, it becomes more and more important to cooperate trans-nationally, to compare concepts as well as ways and means to reach the identified objectives, and to agree on common basic principles that

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stimulate mutual support but can, at the same time, be implemented in differentiated manners according to conditions and capacities at national level.

Annex 1

Guidelines for expert interview

PART 1 – GENERAL OVERVIEW

Details about institution on which an interview is conducted

1. Name of the public administration institution/ department *(original one and its translation into English)*

2. Level on which the institution operates: local, regional, national *(plus a brief explanation what it means in the concrete context, e.g. local level for Kraków means the city of Kraków)*

3. Details about institution/department[3] (*e.g. main tasks in short 2-4 sentences, since when it has existed, how is the organization being financed, institutional context, target group*)[4];

4. What is the role of the institution/department for elderly people*? (if there is any specific role; sometimes one department in the whole institution deals with senior issues only)*

5. Role of the respondent in the institution

6. Name of the respondent (if possible with his/her e-mail address)

Details about policy/programme/scheme[5]

1. Name of the policy/programme/scheme

2. Duration *(from…till)*

3. Domain investigated:*(labor, health, transport, R&D in social issues[6])*

4. General characteristics of the area where the policy/programme/scheme was being carried out, mainly:

   - Geography

   - Population and density

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[3] In the case of a department, it is best to describe briefly the entire institution first, and then focus on the department itself.

[4] At the national/regional/local level this information may be brief, at the European level it should be expanded in order to address the international context in sufficient detail.

[5] Ideally, task 4.1. should address the concluded programmes only. Should those be hard to identify, however, I think we can tackle the on-going ones. We may encounter some problems with the results then, but we will just have to deal with that one way or another. It is always better to have a programme in place, than not have one.

[6] R&D in the social issues pertains to CARINNA only

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- Economic and industry (especially those characteristics which may affect elderly people, *e.g. the region is characterized by a high rate of emigration of young people*)

INFORMATION ABOUT POLICY/PROGRAME/SCHEME

Obligatory issues to be asked:

1. What was the goal of the project?
2. What was the method of financing?
3. What was the target group? What actions were taken in the project?
4. Was the goal of the project achieved? Were some specific purposes not achieved? (Why?)
5. Will the project be continued? If yes, in what shape?
6. Who decided to launch the project? What were the reasons for that?
7. Did the target group have any influence on the shape of the project and its implementation? (if), at what stage? (if not) Why not (both at the shape of the project and its implementation)?
8. Do you think it was important/useful to implement this specific project? Why?/In each ways?
9. What are in your opinion innovative elements in this project? Why are they innovative?
10. Do you know if other institutions are also doing similar programmes?
11. Was/is the project a basis for creating any policy (at least partly)?
12. What was the role (if any) of the politicians in the project?
13. Were politicians/mayors etc. informed about the project's results?
14. Do you think that projects in this domain (e.g., labour, health, transport) respect these anti-age discriminatory laws?
15. What do you think about anti-age discrimination laws in general? Why?
16. Do you think that this specific project is compliance with anti-age discriminatory laws? Why?
17. Was any evaluation research conducted after the end of the project?
18. Who made the evaluation?
19. Was the target group involved in the evaluation process?
20. Did something unexpected happen during the project? What was it?

Examples of optional questions (though very desirable):

21. What particular results were expected to be reached?

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22. What was the genesis of the project? (Who was the inventor? Was there any external inspiration?)

23. What do you think should be changed (if anything)? Why?

24. What are/were in your opinion the disadvantages (if any)?

25. Did the institution/department implement any other projects dedicated to seniors in the past? (What? – short description)

26. Who realized the project on behalf of institution?

27. Was the project modified after its beginning?

28. Which barriers were (if any) met during the project's implementation?

29. What factors were decisive when it came to the choice of the project's implementation?

30. What do your colleagues in other institutions think about these type of programmes?