AGEING POPULATIONS AND AGEING IN FAMILIAR ENVIRONMENT

It is well-known that we are facing the ageing of populations in many countries, including in Western European countries. Thanks to increasing welfare levels and the knowledge and innovations gained from scientific work, people can now live longer than ever before. This provides not only opportunities but also challenges, as these extra life years are not always spent in full health. Dementia and late-life depression are some of the most common health challenges older people face. There is also a large group of informal caregivers, people who provide care for a loved one, for example someone with dementia or late-life depression. Informal caregivers are themselves highly vulnerable for becoming isolated and getting a depression. Therefore, when thinking about how to support the ageing populations, these three target groups should specifically be taken into consideration.

There is an increasing demand for people to be able to age in their familiar environment, in their communities. Many people wish to do so, preferably in their own area or in their homes, instead of feeling obliged to move to a care home. At the same time, national governments are decentralising their policy and expect local communities, such as municipalities, to take over responsibilities in supporting older people to age in their communities. Municipalities are from this perspective considered to have the best opportunities to develop and support age-friendly policy. Municipalities who have relatively recently gained such responsibilities are still working to adapt their policies and best practices in this regard. It can be helpful to exchange information on policies and best practices with other municipalities, so as to avoid reinventing the wheel. When municipalities become more age-friendly, this will have a positive impact on older people who wish to remain living in their familiar environments.

THE SENIOR FRIENDLY COMMUNITIES PROJECT

The Senior Friendly Communities project has impacted participating municipalities’ awareness of how their policies and best practices can support people with dementia, people with late-life depression, and informal caregivers. Furthermore, it has shown the value of creating and maintaining networks across sectors and across borders to be able to make use of existing knowledge and best practices in a Euroregion. The project’s aims and goals by definition were meant to have a societal impact, as creating more ‘senior friendly communities’ will have an impact on the ability of people in such communities to experience active and healthy ageing. Within the participating municipalities in the project, impact was created by conducting the assessments and writing reports on the status quo for each municipality, as well as an EMR report on the results of the assessments in all the participating municipalities in the Meuse-Rhine Euroregion (EMR). This
resulted in more awareness of the municipalities’ own capacities and needs and the age-friendly policies in other municipalities. Furthermore, participating in the project and implementing the SFC activities had an impact on the awareness of the participating municipalities by offering an insight into the best practices that already exist in the EMR to support the ageing population. Beyond the municipalities, the project has also had an impact on the formal project partners. The project partners have successfully collaborated to design and implement the SFC project, and by doing so, have become more acquainted with each other, strengthening their network, and increasing their awareness of what health-related challenges are important to the municipalities. This has led to the creation of a follow-up project to Senior Friendly Communities: the euPrevent PROFILE project (euPrevent, 2022) which aims at the prevention of loneliness among older people in the EMR, in which several partner organisations from the SFC project take part.

The impact of SFC is not limited to the participants and project partners only, as its lessons were disseminated through several outlets. Firstly, local media in the participating municipalities devoted attention to the project. Secondly, the EMR assessment report has been published on the project’s website so it can be accessed not only by participating municipalities but by anyone interested (Schichel et al., 2017), as well as an overall report on SFC (Veenstra & Van der Zanden, 2020). Thirdly, the SFC project was nominated for the Healthy Living Prize Europe, a prize by the state of Lower Austria that shined a spotlight on creative ideas and significant contributions to promoting healthy living among a population at large. The nomination for such a prize increased dissemination in Europe beyond the EMR and may have impacted the publicity of the SFC approach. Fourthly, an art book, “The art of growing older” was published, showcasing pieces of art created within the context of one of the activities of the SFC activity buffet, aiming to break the taboo surrounding age-related depression (euPrevent, 2019). Finally, the WHO has endorsed the SFC in a Good Practice Brief (World Health Organisation et al., 2018). WHO Good practice Briefs highlight and disseminate work that strengthens the health system response to noncommunicable diseases. This Good Practice Brief summarises the SFC approach and is published by the WHO, a globally well-known and trusted source of information on public health. Thus, the SFC approach has become more accessible to audiences from all over the world, potentially increasing the scope of its impact.

AWARENESS AND INVOLVING PARTNER ORGANISATIONS: IMPACT ON MUNICIPALITIES

We conducted interviews with policymakers from the participating municipalities and asked them to invite relevant partners to the table, for example representatives from care organisations or older people’s groups. After these interviews, we wrote reports on the results for the municipalities, from which they stated they gained awareness on the status quo regarding their age-friendly policies. One of the results was that, whereas most
municipalities considered people with dementia and informal caregivers more obvious target groups to support, they were not very familiar with late-life depression and how to support people with depression, if at all. At the same time, several municipalities were strongly working to fight isolation. When people become isolated and feel lonely, they are more at risk of getting depressed, and even have increased risk to develop dementia (Livingston et al., 2020). Implicitly, by fighting loneliness, municipalities were (implicitly) already dealing with the prevention of depression. The project helped them to gain awareness of that and of the risk factors for depression and dementia. Furthermore, conducting the assessments and asking the policymakers to invite relevant partners to the table turned out to act as a kind of intervention. In several cases, the interviewees mentioned this had increased their awareness on the target groups already. In some cases, this was the first time the relevant actors in the field came together and exchanged information on their jobs. This has impacted the recognition of stakeholders and awareness of overlap and possibilities for collaboration between the municipalities and other stakeholders. This increased awareness, the stimulation of information exchange with relevant stakeholders and an expanded network will have an impact on the involved policymakers’ way of working in the long term. It can also serve as an example to other municipalities of how to involve the relevant partner organisations and the target groups more.

IMPLEMENTING ACTIVITIES OR INTERVENTIONS: IMPACT ON OUR TARGET GROUPS

During the implementation phase of the project, the municipalities were offered several activities or interventions that they could implement, for example a theatre play depicting the life of people with dementia or depression, to create awareness, or a web application to support informal caregivers. The municipalities did not have to pay for this, but were offered a virtual budget to spend on these activities. However, they had to organise the conditions to implement the activities, for instance cover the time and (possibly) money, reserve a room, advertise for the activity, and potentially offer some catering facilities. In almost all municipalities, such activities were implemented, and had an impact on the general public participating in it: mostly our target groups but in some cases also policymakers who took part in activities that enhance awareness on the themes. We learned from municipalities that there were some obstacles to making a more sustainable change to their policies and to regularly implementing such activities or interventions in the future, such as limited time and money. It is therefore not certain what the long term impact of the project will be on the people with dementia and late-life depression or informal caregivers in the municipalities that participated, but we consider SFC as the start of an ongoing process towards becoming an age-friendly community. We believe that the municipalities’ networks were expanded by our SFC project, and that they know about the interventions and activities that have been offered, and thus we expect SFC
to have an impact on the options municipalities have to take their responsibilities in the field. Furthermore, municipalities have gained more insight in barriers and facilitators to devote more attention to the target groups.

**CROSS-BORDER EXCHANGE OF INFORMATION AND BEST PRACTICES ON AGE-FRIENDLY POLICIES: IMPACT ON THE NETWORK AND POINTS OF REFERENCE FOR PARTICIPATING MUNICIPALITIES**

The project offered interventions that had been developed in different areas in the EMR and made them ready to use in all EMR regions by hiring translators for every activity to be translated into Dutch, French or German, as applicable. This made it possible for municipalities to participate in interventions that they would otherwise not be able to, and learn from best practices across the border. This has given new insights into what possibilities there are, and what similarities and differences there are between the municipalities on various sides of the border, as they have reported. These insights will help policymakers identify relevant interventions and offered opportunities to strengthen their network. In addition, some of the municipalities also collaborated with other participating municipalities in their own region to co-implement the SFC activities. These experiences will open up possibilities for a change of working culture in the municipalities, where they may be more inclined to contact neighbouring municipalities in their region or across the border. If a cross-border exchange takes place, it will also impact the range of policies and activities and therefore the range of support people living in these municipalities can get.

**AUDIENCES REACHED BY THIS PROJECT**

The direct impact on society in general will be limited mainly to people living in the EMR, and particularly those living in the participating municipalities. Firstly, people who participated in the activities could have gained more awareness of the themes, support for their situations as caregivers, or experience less stigma if they were part of the target groups, even if just short termed. In the long run, the increased awareness for age-friendly policies may result in less stigma, more inclusion of older people and more possibilities for people to age in their homes and communities if they wish to do so, while being supported with facilities tailored to people with dementia, with depression, and supportive of informal caregivers.

The main audience reached by the Senior Friendly Communities project are the policymakers of the municipalities. The main impact the project will have on them is an increased insight into the needs of ageing people, and people with dementia, people with late-life depression and informal caregivers in particular, as well as more insight in what their municipality is already doing to support these people and in what areas it can do more. This will impact their way of working on age-friendly policies. In addition, the results from this research will help policymakers from other municipalities gain
an insights into the challenges and advantages to be gained from taking part in such a project. The same is true for researchers: there are several lessons for researchers in the field of public health regarding where municipalities stand with regard to becoming age-friendly. Furthermore, for researchers of cross-border policies this thesis presents an interesting case study of supporting the cross-border exchange of public health policies in the EMR. The results of this project have been presented in the municipalities, at academic conferences both physically and virtually, and among colleagues of the universities and project partners involved. Finally, as mentioned above, the dissemination of the SFC approach in both scientific studies (as presented in this thesis) as well as several publicly accessible media outlets, the nomination for the European Healthy Living Prize and the endorsement by the WHO as a good practice will broaden the audiences reached by the SFC approach. Other cross-border regions beyond the EMR can learn from the experiences gained by the researchers, municipalities, and project partners in SFC. This can contribute to the creation of more senior friendly communities and impact the way researchers and policymakers consider the perks and pitfalls of using cross-border exchange as a vehicle to achieving this goal.

**IMPACT SUMMARY**

In sum, this thesis shows how research and practice can be perfectly combined to have an impact on citizens, policymakers and researchers. The results presented in this thesis will help create more awareness of how municipalities can become more age-friendly, which in turn will lead to a more comfortable way of ageing for citizens. In addition, the lessons learned from implementing the SFC project will impact how researchers approach cross-border projects on age-friendly communities.
REFERENCES


Veenstra, M., & Van der Zanden, B. (2020). *Building and sustaining a seniorfriendly community movement*