GINKGO
The social link factory

Co-funded by
the European Union

A Practical Guide

Engaging, including, and caring: tools and ideas for those working with older adults in the community

Tools, Dynamics, and Actions

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Introduction

Against the backdrop of a rapidly aging population, preventing social isolation among older adults is a priority for social cohesion and public health. Older adults who are most removed from community life are particularly vulnerable to this form of silent exclusion, which undermines their well-being, their independence, and their access to citizenship.

The GINKGO project, "Building Social Connections," led by a consortium of eight academic and professional partners across Europe, aims to address this shared challenge through an innovative, inclusive approach and cross-cutting.

GINKGO aims to engage older adults in pathways of civic, intergenerational, and cultural socialization, by developing practical tools for those who support them: professionals, family caregivers, volunteers, as well as students and future professionals in the social, health, cultural, and recreational sectors. The project is based on a collaborative methodology centered on older adults themselves and promotes the transnational exchange of best practices and skills.

In this context, this practical guide is one of the project's major deliverables. Its goal is to provide professionals and support staff with a set of resources that can be used in the field to combat social isolation. It combines analytical tools, lessons learned from three partner countries, and operational action sheets.

The guide is structured as follows:

1. A user guide to help you better understand the action sheets;

2. Intergenerational projects, to foster encounters between generations and create dynamics of solidarity and knowledge transfer;

3. Leverages for medical-social and territorial coordination, to strengthen cooperation among stakeholders and optimize responses at the local level;

4. Cultural life and the arts, as levers for expression, participation, and social reintegration;

5. Active and healthy aging, to encourage physical, cognitive, and social activity, and to promote the capabilities of older adults;

6. Housing issues, with a view to designing and establishing living spaces as vehicles for social connection;

7. The quality of life and well-being of caregivers, by recognizing the needs and resources of those who support older adults on a daily basis;

8. Two tools for connecting with isolated older adults, enabling us to initiate contact, better understand their expectations, and lay the groundwork for a relationship of trust;

Each of these sections offers **concrete action sheets,** inspired by or tested in the various partner countries. These sheets are designed both as sources of inspiration and as detailed methodological guides, allowing professionals and volunteers to adapt them to their specific context.

This guide was developed, tested, and refined as part of the GINKGO project in order to ensuring its relevance and feasibility in the field. It is poised to become **a key tool for strengthening practices to preventing social isolation through inclusive,** collective approaches rooted in local dynamics.

At the same time, as part of an effort to expand the project's scope, **the GINKGO project has also launched a training program for students, future professionals, and practicing professionals,** to raise awareness among stakeholders in the social, health, cultural, and community engagement sectors about preventing the isolation of older adults.

All project results are available on the project website:

https://ginkgo-project.eu/fr/

Using the practical guide

Here we provide an overview of how the practical guides are structured. This user guide is intended to help you navigate the site more easily and understand the information presented in each of the practical guides.

1. The Structure of the Practical Guide

The action sheets are organized into six themes. For each theme, some background information is provided before you read the sheets.

Then, within each theme, you'll find between 5 and 6 action sheets that can inspire your future practices.

At the end of the practical guide, you will find tools available to help you:

- Raise awareness of the risk of isolation among older adults at home using the Isola'repère
- Help you enrich your interactions with a person you are supporting, going beyond technical or medical needs with the Tool to Enrich Your Interactions.

2. Some pictograms to guide you:

On each action sheet, you will find information presented in the form of pictograms.

This information is provided for reference to help you navigate the guide more easily:

- the project's country of origin (France, Italy, or Spain)

- The level of complexity involved implementation of the action (1-2)

- A physical activity icon: when the initiative includes a component that involves movement

- A digital icon: when the initiative offers digital tools or uses apps, for example

- An environment icon: when the activity involves a connection with nature or the outdoors

A series of hashtags is also on each action sheet.

3. Creating action sheets

Section 1: Links to training modules
This section outlines the training modules from the GINKGO project that address the issues raised by this action/practice.

Section 2: Number of participants
This section provides an estimate of the number of people who could benefit of the initiative.

Section 3: People Involved
This section presents the people and organizations involved in carrying out the initiative. The stakeholders may vary from one region to another. The important thing is to identify key stakeholders (for example: public partners) and all potential partners.

Section 4: Highlights
This section, in connection with the objectives, aims to highlight the strengths of the initiative that should guide your potential decision to implement it.

Section 5: Key considerations
This section highlights points of caution to consider when implementing the initiative. It offers a critical perspective on the conditions for implementation or on the implementation process itself. These are precautions for use.

Section 6 : Description of the initiative
This section outlines the sequence of the action in a given context. You can use it as a guide while adapting it to your specific context.

Section 7: Objectives
This section presents the objectives of the initiative that are sought during its implementation. This section presents the core of the initiative.

Section 8: Implementation Steps
This section outlines the steps required to implement the initiative as described. Depending on how you adapt make, the steps may vary slightly. Nevertheless, this allows you to identify the key steps necessary for completion.

Section 9: Implementation Requirements
This section outlines the material and human resources required for Implementation of the initiative. While certain conditions may vary depending on the scope of the initiative you have in mind, they nevertheless highlight the inherent requirements of the initiative.

Section 10: Further Information
This section provides links to resources to help you better understand the initiative and the topic covered. Please note: the websites may be in different languages.

Section 11: Testimonial
This section aims to bring the initiative to life by giving a voice to someone who participated in and/or led the initiative.

Intergenerational

Context

Intergenerationality refers to the reciprocal interactions and relationships between individuals belonging to different age groups, within family, community, or societal contexts. Rooted in ecological systems theory, it involves the transmission of resources, knowledge, values, and support across generations (Bengtson & Allen, 1993; Bronfenbrenner, 1979).

This dynamic process highlights the interconnectedness of past, present, and future generations, contributing to the continuity of family legacies and societal well-being (Bengtson et al., 2009). Intergenerationality embodies values of respect, reciprocity, and solidarity, fostering a culture of collaboration among all age groups (Godet, 2023).

Intergenerational benefits for all

Intergenerational initiatives, increasingly present in urban and community projects, promote inclusion, social cohesion, and cooperation between generations in education, work, volunteering, and culture. They help reduce ageism, promote mutual understanding, and combat isolation. Interactions between generations allow younger people to learn from the wisdom and experience of their elders, thereby strengthening community ties and shared values.

Combating loneliness and isolation

Intergenerational engagement is particularly effective in combating social isolation (an objective lack or scarcity of social contact) and loneliness (a negative emotional state distinct from isolation, which can be temporary or chronic), issues that disproportionately affect older adults. As people age, opportunities for social interaction often decrease, leading to feelings of exclusion and declines in physical and mental health. Active participation in family life, such as spending time with grandchildren or taking part in community activities, helps older adults maintain social connections, feel valued, and remain physically active. These interactions not only provide learning opportunities and help older adults stay connected to modern technologies, but they also help slow cognitive decline, thereby promoting healthier aging. Intergenerational engagement promotes active aging

Community and Intergenerational Relationships

A strong community plays an essential role in intergenerational practices. Communities, defined by a sense of belonging and social interactions within specific geographic areas, provide a supportive environment for intergenerational activities. These initiatives combat ageism and foster a sense of inclusion and belonging, reducing the negative impact of loneliness. Without collective strategies to encourage intergenerational engagement, the harmful effects of ageism can marginalize older adults, limiting their participation in social life and diminishing their value within society.

Intergenerational Practices

Intergenerational engagement is a powerful tool for addressing social isolation, loneliness, and ageism, while promoting active aging and community well-being. The initiatives we have gathered, validated by those involved, demonstrate the tangible benefits of these practices and emphasize the importance of fostering mutual respect and understanding between generations in order to build healthier and more cohesive communities.

1. The community garden

LINKS TO THE WP2 TRAINING MODULES

Module 5:
Intergenerationality.

HASHTAGS

#Seniors
#Communitygarden
#Intergenerational
#Socialcohesion

NUMBER OF PARTICIPANTS

In 2024, approximately 300 participants in addition to residents across all activities.

NETWORK OR PEOPLE INVOLVED

The partners involved in the initiatives are:

- The town's senior citizens' club.
- The town's daycare center.
- The region's mobile early childhood center.
- The region's Permanent Center for Environmental Initiatives.
- The municipal school.
- The local high school.
- The facility caring for dependent elderly individuals.
- All staff members at the facility for dependent elderly individuals: dance therapist, social worker/aesthetician, music therapist…
- Employees of the facility caring for dependent elderly individuals.
- Cultural and artistic associations (artistic creation).
- The music school.
- The festival committee.
- The parish committee.
- Local town halls.
- Physical therapists practicing in the area.

HIGHLIGHTS

- Intergenerational encounters.
- Opening the facility housing dependent elderly residents to the outside community and integrating the facility's residents into village life.
- A variety of entertainment options to bring this place to life.
- Changing the way the public's perception of the residents living in the facility for dependent elderly people.

KEY CONSIDERATIONS

- Difficulties coordinating activities and partners.
- Lack of time to conduct evaluations and assess the impact for partners.

DESCRIPTION OF THE INITIATIVE

The project aims to provide a space designed for walking, rest, and enjoy various activities offered to local residents. The idea is to make this space available to partners and various artists to bring the area to life (contemporary dancers, artistic creation associations, the village festival committee, senior citizens' clubs, etc.) alongside villagers, the daycare center, the recreation center, and others. As the project progresses, the focus will shift toward promoting this space as an educational venue by connecting all participants (students, residents, families, etc.).

OBJECTIVES

- To foster social connections for everyone, across all generations.
- To foster a shift in perspective regarding dependency and aging.
- Providing access to culture for people with limited mobility, as well as for rural communities located far from cultural centers.
- Transmitting and sharing knowledge about the environment.
- Foster creativity.

IMPLEMENTATION STEPS

1. Setting up a suggestion box at the entrance of the facility housing dependent elderly residents, where all residents, staff, families, and partners were invited to describe their ideal garden.
2. Creation of models and plans designed by high school students, which will be presented to residents and families for an initial sharing session.
3. Selection of the layout based on defined criteria (maintenance, budget, associated risks), and definition of several spaces: a welcoming area under a 40m² pergola where meals could be held, a pétanque court shaded by plane trees and surrounded by benches, an elevated vegetable garden accessible to people in wheelchairs, and a children's play area.
4. Fundraising and mobilization of local stakeholders to support with funding (neighboring town halls, the fire department, and high school students who organized initiatives).
5. Engaging, consulting, and mobilizing partners to envision how to bring this space to life, so that both residents and villagers can benefit from it.

Examples of proposals:

- A contemporary dance workshop can be offered to the children at the recreation center in the facility's garden.
- An environmental initiative can be organized in the form of a vegetable garden workshop with the facility's residents and high school students. In addition, children from the village daycare center come to water the plants grown by the residents and high school students, as well as to play in a designated area.

- Organize additional activities: a village picnic, a bocce tournament for the senior citizens' club in which residents could participate, environmental conferences open to the public, performances, or dance workshops. The garden at the facility for dependent seniors will then become a village square, and the residents of the facility for dependent seniors will be at the heart of village life. The connection created will foster a new perspective on our elders.
- Proposal for physical therapy sessions at this location (with external physical therapists).

IMPLEMENTATION REQUIREMENTS

Mobilization to secure funding:
- Engagement of citizens, mayors of surrounding villages, and associations to assist with funding.

Various improvements such as:
- Landscaping a plot of land into a garden, creating a pétanque court, installing benches and raised planters, setting up a psychomotor skills course, and creating a space children's play equipment, a pergola, a built-in kitchen, and outdoor tables and chairs.
- Purchase of board games.
- Proposals from partners to bring the space to life.
- Opening of the garden at the facility housing dependent elderly residents and creation of a third place.

TESTIMONIALS

Resident of a facility for dependent elderly people: *"Thanks to this garden, we get to enjoy many activities such as dance and percussion workshops. All these workshops allow us to meet young people and interact with them."*

Resident of a facility for dependent elderly people: *"It seems to me that since we've had all these shared activities, people are more willing to approach us."*

Local artist:
"Without these workshops, I wouldn't have gone to the retirement home, and there I realized I could totally share something with them. The proof is that we made this pop-up book together."

Villager:
"These workshops allowed me to come and spend time with the residents at the retirement home."

2. Hair in the Wind

LINKS TO WP2 TRAINING MODULES

Module 5:
Intergenerationality.

Sub-Module 4.2:
Physical activity, sports, etc.

HASHTAGS

#Seniors #Nature #Bike #SustainableDevelopment #SocialParticipation

NUMBER OF PARTICIPANTS

200 volunteers and beneficiaries.

NETWORK OR PEOPLE INVOLVED

- The municipality where the association is based,
- Elderly people and adult volunteers,
- Volunteers of the association,
- Bicycle maintenance association.

HIGHLIGHTS

- Discover the region's most beautiful sites.
- Rediscover the joy of experiencing your city and its natural surroundings.
- Building bridges between generations.
- Fostering encounters, solidarity, and mutual support.

KEY CONSIDERATIONS

- The weather and the type of terrain in the area can limit implementation.
- Relies on the commitment of volunteers.

DESCRIPTION OF THE INITIATIVE

The organization *À vélo sans âge* offers seniors rides on a cargo tricycle (a type of tricycle with a seat in the front). The trips are led by a network of retired volunteer drivers. Volunteer cyclists donate their time and cycling skills to accompany older adults. The idea is to ride at a leisurely pace, enjoy the scenery, and share stories. "*Giving seniors back the joy of feeling the wind in their hair*"—that's the motto of the *À Vélo Sans Âge* association!

OBJECTIVES

- To build intergenerational connections between residents of senior care facilities and volunteer tricycle riders.
- To give older adults back the right and the joy of experiencing the city and nature.
- Promote an environmentally friendly mode of transportation.
- To enhance the quality of life within the community.
- Enable seniors being transported to actively participate in community life.

IMPLEMENTATION STEPS

Since the project's objective is to organize bike rides for older adults (including the very elderly) accompanied by retired volunteer cyclists, the following implementation phases have been developed:

1. Find suitable bicycles (either by partnering with an existing organization or by establishing a new one to fund the purchase of the bicycles)
2. Build a team and a network of volunteers
3. Organize outings at the request of beneficiaries or establish an agreement with a care and support facility
4. Prepare residents so they are in good physical condition and ready to go on outings, and carry out the outings
5. Assess the impact on volunteers and seniors

Outings are free. An annual membership fee of €15 per person is required for individuals and €25 for couples. However, for organizations, the annual membership fee ranges from €150 to €500 for unlimited outings. Membership fees are paid to the National Vélo sans âge Network.

IMPLEMENTATION REQUIREMENTS

- The project relies on a network of available volunteers.
- High-quality, suitable bicycles are required.
- The cost of a cargo bike is €12,000.
- Funded by donations and a participatory budget grant from the municipality: €12,000
- Annual budget: approximately €1,000 (bike maintenance and accessories), funded by donations and membership fees.
- The City Hall has provided a bicycle storage space.

FURTHER INFORMATION

International network: Cycling for All Ages
Website in France: *www.avelosansage.fr*

Initiative in the Basque Country: Les cheveux gris dans le vent.
Contact:bayonne@avelosansage.fr / Martine KEYHUEL (president of the association)

TESTIMONIALS

During an outing with our organization, Michèle, 86, opened up as soon as she settled into the seat, talking in particular about the loss of her son. It must be said that our tricycle often becomes a place where people feel comfortable sharing their stories: passengers spontaneously share their stories, their joys, and their sorrows. Upon arrival, Michèle told Fabienne, our driver: "*It's been a long time since I've been this happy!*"

Marie, who is in the early stages of Alzheimer's, had accepted our invitation for a tricycle ride. That day, the rain started pouring down partway through the trip, and she returned soaked… but with a smile on her face. On the way back, she told Laurence: "*I don't remember exactly what we did, but it was really great—I feel so good! Oh, I'm so happy!*"

3. Reconnected: Technology knows no age

LINKS TO WP2 TRAINING MODULES

Module 5:
Intergenerationality.

HASHTAGS

#Seniors #Digital #DigitalLiteracy #SocialCohesion

NUMBER OF PARTICIPANTS

Over 40,000 people over 2 years (in addition to family members and professionals who also use the educational resources).

NETWORK OR PEOPLE INVOLVED

- Promoting Entity (Fundación Telefónica)
- Partner organizations:
  - Reconectados Rural receives funding from the European Next Generation EU funds, as part of the National for Recovery, Transformation, and Resilience.
- Team of volunteers.

HIGHLIGHTS

- Comprehensive and intergenerational approach.
- Promotes digital independence among older adults.
- Facilitates social inclusion and participation.
- Extends its reach to rural areas with Reconectados Rural.

KEY CONSIDERATIONS

- Continue in-person workshops to foster relationships and direct support.
- Ensure that the intergenerational approach does not reinforce paternalistic roles.

DESCRIPTION OF THE INITIATIVE

This initiative was launched against the backdrop of rapid digital transformation, which has left a segment of the population behind—particularly older adults, who, in many cases, have lacked the resources or support needed to adapt to new technologies. Recognizing this reality, Fundación Telefónica is launching this initiative to bridge the digital divide and promote the active participation of older adults in the digital society by leveraging technological knowledge to support their independence and well-being.

The program combines in-person workshops, online training, and resources for families and healthcare professionals. During the workshops, participants learn how to use everyday digital tools (smartphones, messaging apps, online banking, administrative procedures, and social media) and discover new technologies such as artificial intelligence and the Metaverse. In addition, the program takes place in a culturally vibrant environment, featuring guided tours of exhibitions and participation in events at the Espacio Fundación Telefónica, reinforcing the social and relational aspects of learning.

This is an intergenerational initiative in which older adults share their life experiences, while volunteers and professionals contribute their digital expertise, creating spaces for interaction that strengthen the bond between generations and break down stereotypes related to age and technology.

In 2024, the program was expanded with the Reconectados Rural initiative, which brings digital literacy to small towns and rural areas, promoting equal access to technology and the digital inclusion of older adults throughout the country.

OBJECTIVES

- To promote digital skills among older adults and their immediate families;
- To reduce the digital divide and promote active participation in the digital society;
- Encourage personal autonomy and social connection through the use of technology;
- Work toward an inclusive digital society.

IMPLEMENTATION STEPS

1. Identify partner organizations and accessible spaces;
2. Seek funding for project development and the purchase of necessary materials and equipment;
3. Create and train a team of volunteers to develop and facilitate the workshops;
4. Implement a network-based communication strategy to recruit participants;
5. Evaluate the results to improve and expand the program.

IMPLEMENTATION REQUIREMENTS

- Have access to appropriate spaces and technological equipment.
- Coordinate the participation of partner organizations and volunteers.
- Ensure that training is free and accessible.

FURTHER INFORMATION

https://www.fundaciontelefonica.com/voluntarios/reconectados/

TESTIMONIALS

"Technology is the future, and we're at the forefront." «We're lagging behind, which is why we need to look to the future and strive to learn, because age doesn't matter.

"In my daily practice, I noticed that many older adults came to the Foundation with significant difficulties using their cell phones in their daily lives. That's why I decided to get training so I could help them overcome overcome their fear of using the phone."

4. Feathers of Wisdom

LINKS TO THE WP2 TRAINING MODULES

Module 5 :
Intergenerationality.

HASHTAGS

#IntergenerationalConnection
#PenPal #LifeStories
#Sharedwisdom

NUMBER OF PARTICIPANTS

The project involved a considerable number of older participants and students, as well as many residents of the retirement home.

NETWORK OR PEOPLE INVOLVED

- Residents of a retirement home, adaptable to a day center, senior club, etc.
- Students and teachers from a local high school, acting as facilitators for writing and exchanging letters.

HIGHLIGHTS

- Fosters meaningful intergenerational relationships and social connections.
- Encourages reflection, patience, and a deeper appreciation of life experiences.
- Gives older participants a sense of purpose by allowing them to share their memories and wisdom.
- Provides a space for personal expression, free from judgment, for both older adults and young people, through writing.
- Helps prevent social isolation by establishing regular channels of communication.

KEY CONSIDERATIONS

- Ensure that participants remain engaged and that both generations are motivated to continue participating regularly.
- Manage the emotional aspects of reminiscence for older participants to ensure the experience remains positive.
- Continue to foster engagement and ensure the project's long-term sustainability in the long term.

DESCRIPTION OF THE INITIATIVE

The "Feathers of Wisdom" project is an intergenerational initiative aimed at building a bridge between young people and older adults who wish to share their stories, ideas, and passions. The goal is to create authentic and meaningful relationships where both generations can write about their experiences and perspectives. The project challenges the common misconception that older adults are passive figures and demonstrates that young people, often perceived as disconnected from reality, also have much to share. Through letter-writing, the project fosters communication between generations and fosters a mutual understanding of life experiences. The topics covered include the differences between the past and the present, education, work, love, traditions, and personal reflections on happiness.

OBJECTIVES

- Foster intergenerational exchange and build meaningful relationships between older adults and young people.
- Promote letter writing—a slower form of communication than email or text messages—to encourage reflection, patience, and an appreciation for the little things.
- Provide older adults with a familiar means of communication, while offering young people an opportunity for deeper reflection.
- Encourage the building and maintenance of pen-pal relationships, fostering socialization, dialogue, and preventing social isolation.
- To provide a non-judgmental personal space for both generations so they can express themselves through writing.
- Stimulate reminiscence in older adults by encouraging the sharing of memories related to their past through social interaction.

IMPLEMENTATION STEPS

1. Engage the older participants and students in an initial phase of relationship-building through correspondence.
2. Provide topics for reflection to guide letter-writing, fostering communication and connection between generations.
3. Encourage ongoing engagement through letter-writing over an extended period.
4. Foster collaboration between the older participants, the students, and their teachers, who act as facilitators in the relationship-building process.

IMPLEMENTATION REQUIREMENTS

- The project requires a team of volunteers and educators to facilitate the correspondence process. Writing materials, such as paper and pens for the letters. Support from the staff at the nursing home and the school is needed.

FURTHER INFORMATION

https://www.villaggioamico.it/penne-di-saggezza-progetto-intergenerazionale-di-villaggio-amico/

TESTIMONIALS

Examples of implementation and testimonials:

The Start of the Project

During a class, the teacher suggests that the students write letters to older adults. At first, many are skeptical, some laugh, but the idea intrigues them:
"*What do we write?*" asks a boy.

The first letters

In just a few lines, a bond is formed.

Chiara, 17, writes to an elderly woman: "*I'd like to know what school was like for you. I get bored sometimes, but maybe it was different back then.*"

Anna, 84, replies:
"*My school was small. There were no computers, but plenty of stories to tell. I, too, dreamed of writing.*"

Strengthening the bond

Lorenzo reads and rereads these words. They reassure him.

Lorenzo writes that he feels confused about his future. He loves electronics, but is afraid of making mistakes.

Franco, a former carpenter, writes to her:
"*I, too, when I was young, I was afraid. But I learned to trust my hands. Trust your ideas.*"

The Value of Waiting

Federica écrit calmement. She thinks, corrects, rewrites.
"*It's not like sending a text message. I take my time. It's special.*"

Silvia, in a eagerly awaits the letter:
"*When it arrives, it's like receiving a gift.*"

Memories that are returning

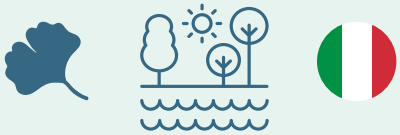
Mattia receives a letter from Giovanni, 90 years old. He tells him about his first love during the war and the letters written amid the bombings.
"*The letters kept us alive.*"

Mattia replies: "*Today, love moves too fast. I hope one day to write letters like yours.*"

The Final Meeting

At the end of the year, the students and the elderly meet in person. Chiara hugs Anna and says, "I felt like I already knew you." Anna smiles: "You made me feel young."

5. TOY (Together Old and Young) - Together: Older Adults and Youth



LINKS TO WP2 TRAINING MODULES

Module 5:
Intergenerationality.

NUMBER OF PARTICIPANTS

A total of 589 children participated in the program, including 16 aged 0 to 3 (9 girls and 7 boys) and 573 aged 4 to 8 (339 girls and 234 boys). The support team consisted of 101 people, including 76 assistants aged 25 to 63 and 25 senior volunteers aged 50 to 80. In addition, the program involved 163 older adults, including 74 women and 14 men aged 55 to 74 and 58 women and 17 men aged 75 or older.

KEY POINTS

- Promoting interaction and socialization between different generations.
- Contributing to the well-being and mental health of older adults.
- Promote mutual learning between children and older adults.
- Strengthen social cohesion within the community.

HASHTAGS

#Intergénérational
#Learning #Socialization
#SensoryActivities
#Education #Community

NETWORK OR PEOPLE INVOLVED

- Networks: local communities, educational institutions, retirement homes, social organizations.
- People: educators, senior volunteers, children, parents, families, coordinators, psychologists, educators.

KEY CONSIDERATIONS

- Ensure that activities are well planned to meet the expectations and needs of different generations.
- Ensure the safety of children during activities.
- Monitor the effectiveness of activities in promoting genuine interaction between generations.

DESCRIPTION OF THE INITIATIVE

What is TOY?

TOY (Together Old and Young) is a project designed **to bring young children (ages 0–8) and older adults together through simple, meaningful activities** such as reading, playing, telling stories, or gardening together.

Why is this important?

In today's society, young people and older adults often live separate lives. TOY aims to strengthen **the bonds between generations,** which benefits everyone:

- More confident, curious, and open-minded children.
- Older adults who are more active, listened to, and engaged.
- More united and supportive communities.

Where does this take place?

In everyday settings: **libraries, schools, senior centers, parks, and gardens.** No need for large facilities: all you need is a shared space and people willing to collaborate.

Who participates?

Educators, grandparents, volunteers, families, social workers, local officials: **anyone who wants to help build bridges between generations.**

What has TOY achieved?

Emerging from a European research project (2012–2014), TOY has become a practical model used in several countries. **It has demonstrated that interactions between young people and older adults improve everyone's quality of life.**

OBJECTIVES

- Promote intergenerational learning between children and older adults.
- Foster social interaction between different generations.
- To stimulate the discovery and re-engagement of the senses in children and older adults.
- Create opportunities for interaction between children and older adults in a playful environment.

IMPLEMENTATION STEPS

The following actions were implemented to carry out the program:

1. Scientific research: The project began with a research phase that analyzed intergenerational relationships in contemporary Europe. This research explored the social, economic, cultural, and demographic changes that have altered family structures and habits over the past few decades, leading to a growing divide between generations. Through a review of the literature, the study highlighted the benefits of intergenerational contact, including outside the family context, such as opportunities for mutual learning, the transmission of cultural heritage, the strengthening the role of "grandparents," and the promotion of intergenerational solidarity and social cohesion.

2. Action research: The second phase of the project focused on identifying successful intergenerational initiatives in Europe using a positive deviance approach. The research analyzed several examples in which children and older adults participated together in activities in community spaces such as libraries, urban gardens, schools, daycare centers, and recreation centers.
3. Capacity building: Following the research phase, workshops were organized in Italy, the Netherlands, Spain, Poland, and Portugal to provide training, information, and opportunities for engagement to local stakeholders. Psychologists, educators, social workers, volunteers, and older adults participated in these workshops.
4. Pilot actions: Starting in the spring of 2014, the project supported several experimental intergenerational initiatives.

To ensure transferability to other contexts, drawing on the results and the program developed, the following actions can be implemented:

1. Planning activities with the participation of children and older adults.
2. Preparing the physical space to facilitate interaction.
3. Conducting joint activities (painting, gardening, music, games).
4. The event will conclude with a closing celebration and an exhibition.

IMPLEMENTATION REQUIREMENTS

- Materials: Supplies for art activities (gouache paints, playdough, balloons), gardening tools, equipment for recreational activities.
- People: Educators, social workers, volunteers, older adults.
- Policies: Support from local authorities and educational institutions, raising awareness of the importance of intergenerational practices.

FURTHER INFORMATION

http://retesalute.net/index.php?option=com_content&view=article&id=154&Itemid=227

https://www.lunaria.org/toy-alla-scoperta-del-tesoro-intergenerazionale/

https://www.zeroseiup.eu/together-old-young-bambini-e-anziani-insieme-per-costruire-comunita-solidali/

TESTIMONIAL

Franca, a 74-year-old retired widow from Calabria, has always lived a quiet life in her village. After her daughter moved to Rome, Franca felt isolated from her only granddaughter, Giulia, whom she could only see during the holidays. Despite her efforts to stay in touch with her through gifts and video calls, Franca felt like an outsider in Giulia's life. When Giulia invited her to join a school field trip, Franca hesitated, feeling unprepared and overwhelmed. However, after learning that Giulia was upset, Franca overcame her fears and agreed to go. The experience turned out to be a turning point. Franca was finally able to connect with her granddaughter within her real community and made new friends among the other grandparents. She felt useful, enjoyed organizing activities for the children, and gained greater self-confidence. Thanks to Giulia, Franca discovered that she could still have fun and now looks forward to more visits and new adventures.

Medical-social and regional coordination in the care and support of older adults

Context

In a European context marked by a progressively aging population and evolving care models, it is necessary to review care systems to make them more sustainable and better adapted to people's needs and lifestyles. International institutions and organizations promote an approach that prioritizes keeping people in their everyday environments by ensuring access to adequate community resources. This approach aims to integrate health, social, and community sectors to provide more effective, personalized, and continuous care, enabling people to continue living their lives even when they need support and care.

Integrated Health and Social Services

Coordination between the health and social services sectors is based on the recognition the fact that health and well-being do not depend exclusively on the healthcare system, but also on access to social services and support from other local resources. To ensure a comprehensive approach, a biopsychosocial perspective is adopted, which takes into account not only biological factors but also the psychological and social aspects that influence quality of life. This model enables the development of personalized plans that integrate prevention, chronic disease management, emotional well-being, and social inclusion, thereby avoiding fragmented interventions.

With this in mind, medical-social coordination promotes continuity of care and support, ensuring that individuals receive appropriate care to their individual needs and social context, without losing sight of the importance of the community environment for their well-being. In this regard, the integration of health and social services systems requires strengthening communication between professionals in both fields and developing common assessment and monitoring tools. This translates into multidisciplinary teams working in a coordinated manner to address not only health needs, but also living conditions at home, the support network, and people's autonomy.

The Local Community in Local Support and Care Systems

The local community plays a fundamental role in support and care systems. Through community engagement and networking, efforts are made to strengthen local initiatives that facilitate access to essential services and promote active and healthy aging within people's own living environments. A key strategy focused on home care involves building partnerships around home care, integrating various stakeholders such as social, cultural, and sports organizations, as well as neighborhood associations, pharmacies, volunteer networks, and other local stakeholders.

These partnerships strengthen collective cooperation, enabling a more effective response to the challenges of home care. As a result, they help activate support networks, encourage social participation, and improve the quality of life for people who require assistance or care.

Networking with local communities therefore helps keep people in their homes and daily environments, which helps delay their institutionalization. But to achieve this, it is essential to encourage joint initiatives among professionals, such as awareness-raising and training in community and network-based intervention strategies.

Volunteering as a source of social well-being and personal satisfaction

Volunteering is beneficial not only for those who receive assistance, but also for those who participate. Volunteers experience a great sense of personal fulfillment, strengthen their sense of belonging to a group, and see the positive impact their charitable work has on society. In addition, they avoid isolation and form new relationships, thereby promoting participation and integration into the community and strengthening social bonds.

This work also holds deep significance in terms of personal development, as many people find in volunteering a part of their IKIGAI, a Japanese concept that refers to what gives meaning to life, the reason that drives us to get up every day with enthusiasm. IKIGAI is a combination of what we love to do, what the world needs, what we know how to do, and what brings us value. In this sense, volunteering becomes a vital source of motivation for many people, as they feel their work has a clear purpose: to help those who need it most, to feel useful in society, and to have a positive impact on their environment.

Thus, volunteering not only contributes to social well-being but is also a rewarding experience that improves the quality of life for those who do it. It is an opportunity to grow, to share, and to find personal balance, helping others while strengthening one's own sense of purpose.

To translate these lessons into concrete examples and facilitate their practical application, four significant initiatives developed in different contexts are presented below: community-based collaborative efforts through volunteerism, coordination mechanisms between the health and social services sectors aimed at providing comprehensive care, and the development of a regional resource center that links and makes visible the services available in the region. These initiatives not only highlight the benefits for older adults receiving care and support but also have a positive impact on caregivers and professional teams, by improving their responsiveness and reducing work overload.

6. Community work in Bortziriak

LINKS TO THE WP2 TRAINING MODULES

Module 4: Socio-educational strategies.

Module 5: Intergenerationality.

Module 8: Network Building and Community Engagement.

HASHTAGS

#Intergénérational

#Network #Support

#Community

NUMBER OF PARTICIPANTS

A total of 56 volunteers, 1 social worker, 18 healthcare professionals, and shelter managers.

HIGHLIGHTS

- Addressing gaps of the social welfare system.
- Foster a sense of belonging and intergenerational cohesion.
- Improve the quality of life for seniors and volunteers.
- Promote social inclusion and awareness.
- Strengthen the support network by creating a stimulating environment.

NETWORK OR PEOPLE INVOLVED

- Town Hall: promoting entity and strategic coordinator.
- Social Services: responsible for assessing situations and planning interventions.
- Health Center: identifies potential beneficiaries of community initiatives and participates in new social and health-related activities.
- Volunteer Association: implementation of initiatives and support for the community.
- Media and local community: dissemination and raising awareness about the initiative.

KEY CONSIDERATIONS

- Need to increase volunteer participation and staff stability, paying particular attention to the emotional toll of volunteering.
- Uneven distribution of resources and services among the different towns in the mancomunidad, which can lead to inequalities in the care and support available.
- Insufficient funding may limit the ability to adequately develop activities and programs.
- Logistical challenges related to transportation and travel in rural areas, which can make it difficult to access services and activities, thereby limiting user participation.
- Effective communication among the various stakeholders is essential for proper coordination.

DESCRIPTION OF THE INITIATIVE

The Bortziriak Social Services Community promotes community initiatives aimed at supporting and socially including the population, particularly the elderly. The initiative combines technical and volunteer efforts in an integrated and community-based approach, coordinating collaboration between Social Services, the Health Center, the volunteer association, and the local community.

The strategy is based on a common framework and shared leadership, with partnerships among local stakeholders involved in social and health services. The assess situations and plan interventions, the Health Center identifies potential beneficiaries and collaborates on referrals and social and health care, while the volunteer association implements the actions and provides community support. As part of this initiative, volunteers visit seniors in residential care facilities and in their homes, offering them companionship, emotional support, and assistance with daily activities. They also accompany them to medical appointments, thereby facilitating their access to care. In addition, the initiative promotes adult literacy classes, a transportation service for people at risk of isolation to improve their access to resources and services, as well as cultural and recreational activities that foster social interaction and intergenerational exchange.

The model is based on ongoing training and support for volunteers, inter-institutional coordination through periodic technical meetings, and ongoing evaluation to ensure the quality and sustainability of the strategy. Furthermore, awareness campaigns are conducted on the value of volunteering and the importance of supporting older adults, with the aim of encouraging new volunteers to participate.

OBJECTIVES

- To promote solidarity and cohesion between generations.
- Improve the quality of life for older adults through engaging activities.
- Promote the social inclusion of vulnerable groups.
- Provide training and development opportunities for volunteers.
- Reduce unwanted loneliness and encourage social interaction.
- Bring basic services (health, literacy) closer to those who need them most.
- Assess the project's social impact with a view to continuous improvement.

IMPLEMENTATION STEPS

1. Establishment of the volunteer association.
2. Assessment of community needs conducted by public institutions.
3. Strategic planning of community action by Social Services, City Hall, and the volunteer association.
4. Awareness-raising and volunteer recruitment: campaigns to publicize the strategy and attract new volunteers.
5. Inter-institutional coordination: monthly meetings, technical coordination, and the establishment of basic procedures among community stakeholders.

6. Partnerships with other community stakeholders: collaboration with the Health Center and an agreement with the volunteer association to improve outreach, case referral, and cross-border coordination. Creation of a "social prescription" at the Health Center to prescribe volunteer work and strengthen the link between social and health services.
7. Operational implementation of the strategy:
- Assessment by Social Services of cases suitable for community intervention.
- Planning of interventions with the participation of volunteers and/or coordination with other community systems or stakeholders.
8. Training and support for volunteers.
9. Ongoing evaluation of the strategy.

IMPLEMENTATION REQUIREMENTS

- Common organizational framework among participating entities, shared leadership, and networking.
- Comprehensive and Community-Based Care Approach.
- Continuing education and support for volunteers.
- Material, logistical, and financial resources.
- Evaluation to ensure sustainability.

FURTHER INFORMATION

https://bortziriakgz.eus (available in Spanish only)

TESTIMONIAL

Mayte, volunteer:
"This community work not only transforms the lives of the people we support, but it also enriches our own. My relationship with Marié was very special and taught me the value of meaningful support and presence."

7. Medical-social coordination: A program for professionals health and social services

LINKS TO WP2 TRAINING MODULES

Module 6:
Biopsychosocial Perspective.

Module 8:
Network Building and Community Engagement.

HASHTAGS

#Coordination

#Medical-Social

#ActiveAging

NUMBER OF PARTICIPANTS

In total, approximately 25 people, including 10 to 15 healthcare staff members from the health center, 1 social worker from the health center, 1 person from social services, 1 person from the social center for the elderly, 7 family workers, and 4 volunteers.

NETWORK OR PEOPLE INVOLVED

- Health center professionals responsible for identifying needs and referring individuals to social services.
- Social worker at the health center, actively involved in social-health coordination and the identification of social needs.
- Social worker in social services responsible for coordinating social resources and communicating with healthcare professionals for case referral and management.
- Social resource professionals such as home care workers, professionals at socialization and active aging centers (Jubiloteca), or volunteers.

HIGHLIGHTS

- Comprehensive care: coordination between health and social services addresses the medical and social needs of older adults, ensuring a more holistic approach.
- Improved emotional well-being: resources such as volunteers from Jubiloteca or Elkarrizan promote social participation and reduce isolation, thereby improving emotional health.
- Access to appropriate resources: collaboration facilitates older adults to services tailored to their situation, thereby improving their quality of life.
- Networking: communication between health and social service professionals ensures more effective and consistent care.

KEY CONSIDERATIONS

- Frequent staff turnover makes it difficult to track cases and build trusting relationships with clients.
- Not all healthcare professionals are familiar with available social resources, which limits their ability to refer patients to appropriate services.
- There may be communication difficulties between healthcare and social services, which affects the proper implementation of interventions.
- The availability of social resources and services may not be sufficient to meet the growing demand from older adults.
- Users are often unaware of available resources, making it difficult for them to access and use them.

DESCRIPTION OF THE INITIATIVE

Social and health care coordination in the Bortziriak community is based on collaboration between social services and the health care system to provide comprehensive care for older adults. Health care and social service professionals work together to identify needs and facilitate access to resources such as the Jubiloteca—a space for socializing and active aging—the volunteer organization (Elkarrizan), the home care service, and assistive devices. In operational terms, the healthcare team in one of the municipalities that make up the association (Lesaka) organizes weekly training sessions, including a key annual meeting with social services to update knowledge on available resources. This annual update allows healthcare professionals health professionals to be aware of these resources, so they can integrate social options into their interventions as alternatives or complements to medical treatment.
This networking ensures the effective use of resources, promoting the integration of older adults into their environment and preventing dependency.

OBJECTIVES

- Identify needs through health services.
- Promote active and healthy aging through participation in activities.
- Facilitate access to social services and resources by providing information.
- Improve the quality and continuity of care through effective coordination of social services and healthcare.
- Prevent dependency through early intervention in the event of health or social problems.
- Promote personal autonomy by supporting independence and community integration.
- Optimize resources through effective coordination.
- Create a community support network by strengthening collaboration between the healthcare system, social services, and the community.

IMPLEMENTATION STEPS

1. Annual informational meeting between health and social services professionals to provide information on the catalog of services and social resources, both at the regional and local levels.
2. Meetings between healthcare and social services professionals to address various cases:
    1. Initial assessment of older adults' needs, taking into account the clinical and social factors affecting their well-being and independence.
    2. Development of a joint intervention plan.
    3. Referral to appropriate social resources.
    4. Execution and implementation of the care plan.
    5. Review and monitoring through regular meetings during which the plan's effectiveness is assessed.
    6. Evaluating the outcomes of cases, as well as the coordination system, in order to make the necessary adjustments for future interventions.

IMPLEMENTATION REQUIREMENTS

- A suitable space for meetings and training.
- Material or technological resources with information on available services.
- Human resources: social and health care professionals committed to this coordination and trained volunteers.
- Support from local governments to coordinate social and health services.

FURTHER INFORMATION

https://bortziriakgz.eus (available in Spanish only)

TESTIMONIAL

"The Jubiloteca and the Elkarrizan group were recommended to me. I felt active and supported again. I regained my enthusiasm. Thanks to this support network, I connected with the health center and social services."

8. Medical-social coordination at home: The regional resource center

A similar experience in Italy referenced in the "Further Reading" section.

LINKS TO WP2 TRAINING MODULES

Module 8:
Network Building
and Community Engagement.

HASHTAGS

#SocialNetwork #SocialConnection #HomeAdaptation #QualityofLife

NUMBER OF PARTICIPANTS

The number of participants varies depending on the size of the area and the number of beneficiaries involved.

- On average, 25 home-bound patients.

NETWORK OR THE PEOPLE INVOLVED

- Associations of families and/or caregivers.
- Network of home care services, Network of residential care facilities for the elderly, etc. / Network of cultural associations, neighborhood communities, neighborhood associations.
- Residential facilities for dependent seniors.
- Home care services.
- Municipal social services.
- Support groups for caregivers.
- Senior activity centers.
- Geriatric care teams.
- Hospitals and clinics.
- Day care centers.
- Private practitioners, private nurses.
- Home-based health and fitness services.

HIGHLIGHTS

- Anticipating the increasing trend of an aging population.
- Enhanced monitoring of individuals with progressively declining independence living at home.
- Home care under improved conditions.
- Sharing of knowledge and cross-pollination of expertise from a diverse range of professionals and vital experiences from caregivers and care recipients.
- A sense of belonging to a community of professionals, particularly for aides who work alone in people's homes.

KEY CONSIDERATIONS

- A staffing challenge similar to that faced by the entire geriatric sector.
- A strong partnership that must stand the test of time and share decisions.

DESCRIPTION OF THE INITIATIVE

This is a service staffed by a multidisciplinary home-based team whose goal is to support home-based care and improve the quality of life for older adults and their caregivers. Social, medical-social, and healthcare professionals coordinate their efforts and provide in-home services to individuals with reduced independence.

OBJECTIVES

General objectives:

- To promote home-based care for older adults
- Prevent loneliness and social isolation
- Facilitate the pooling of resources among the stakeholders involved
- Provide support and respite services for caregivers
- Promote quality of life at work.

Specific objectives for working with individuals:

- Making the home safe and adapting the living space
- Ensuring coordination that strengthens continuity between community and hospital care
- Promote continuity in the individual's life plan to enhance their social life
- Supporting the caregiver.

Specific objectives for prevention:

- Improving professional practices and sharing best practices
- Promoting access to healthcare and preventive care for older adults
- Combating isolation among older adults and their caregivers.

IMPLEMENTATION STEPS

1. Prerequisites for operational implementation:
   - Assessment of the population's needs conducted by public institutions
   - Strategic project planning and selection of potential partners
   - Awareness-raising and recruitment of the multidisciplinary team
   - Technical coordination: periodic meetings
   - Operational implementation of the strategy
   - Evaluation and adjustment
2. Operational implementation of the prevention component:
   - Improving professional practices and sharing best practices
     - Analysis of professional practices
     - Sharing of training among professionals working in gerontology.
   - Access to preventive care for older adults through better coordination of resources and the sharing of professional expertise.
   - Easier access to transportation
     - Description of support and care services in the region.

- Combating isolation among older adults and their caregivers
  - Maintaining social connections
  - Intergenerational connections
  - Respite care solutions for family caregivers.

3. Operational implementation of in-home services
   - Home safety and housing adaptation: tips for home modifications
   - Implementation of telecare systems, assistive technologies for the elderly, etc.
- Crisis management
  - Provision of an emergency shelter solution
  - Establishment of a night-time on-call service.
- Access to enhanced coordination
  - Enhanced coordination among various home care providers: in collaboration with the caregiver: home health and care services, primary care physicians and specialists, etc.
  - Continuity of care between community and institutional settings.
- Continuity of the life plan
  - Activities promoting the beneficiary's social life: adapted physical activities, social gatherings, recreational activities, support groups… in collaboration with partners.
- Support for the caregiver
  - Support and respite solutions in collaboration with local stakeholders: by offering and/or referring individuals to activities that promote social interaction and emotional well-being.

IMPLEMENTATION REQUIREMENTS

- A space for meetings and training sessions with professionals.
- A space for meetings with caregivers.

FURTHER INFORMATION

- This initiative exists in other regions, notably in Italy under the name "La Cura è di casa" - *https://www.lacuraedicasa.org/la-cura-e-di-casa/*
  It is implemented through a network of 23 public and private partners; the project aims to support both older adults and their families by intervening early to prevent physical and mental decline through light services such as assistance with daily activities, companionship, nursing care, and psychological support.
- The Territorial Resource Center: A New Approach to the Challenges of aging - *https://www.anap.fr/s/article/centre-ressources-territorial-crt-ambition-nouvelle*
- Regional Resource Centers to help older adults live at home for as long as possible - *https://www.iledefrance.ars.sante.fr/centres-de-ressources-territoriaux*
- Strengthening home care for older adults - *https://www.cneh.fr/blog-jurisante/publications/organisation-sanitaire-et-medico-sociale/fiche-de-synthese-renforcement-de-laccompagnement-a-domicile-des-personnes-agees-centre-de-ressources-territorial-conventionnement-obligatoire-et-temps-minimaux-des-medecins-coordonnateur/*

- Living Better in Old Age: Paulette Guinchard-Kunstler, Marie-Thérèse Renaud
- Éditions de l'Atelier | February 2006
- Toward a New Approach to Home Care: The Regional Resource Center: *https://blog.wello.fr/crt-centre-de-ressources-territorial*

9. Integrated regional assistance service in Community Health Centers

LINKS TO THE WP2 TRAINING MODULES

Module 8:
Network Building and Community Engagement.

HASHTAGS

#CommunityHealth
#CommunityCare
#HealthPrevention
#CommunityNurse
#ContinuityofCare

NUMBER OF PARTICIPANTS

- Each Community Health Center may involve dozens of healthcare professionals.
- The population served can range from 40,000 to over 50,000 residents depending on the size of the facility.
- Thousands of consultations, follow-ups, and care pathways can be managed each year.

NETWORK OR PEOPLE INVOLVED

- Healthcare professionals: general practitioners, pediatricians of choice, family and community nurses, social workers, psychologists, specialist physicians in private practice, midwives.
- Public health managers and staff.
- Local and municipal governments.
- Citizens and community organizations.

HIGHLIGHTS

- Improved access to healthcare services for citizens.
- Integrated care and continuity of care.
- Reduced pressure on hospitals, particularly emergency departments.
- Strengthening of prevention and health education.
- Central role of nurses and teamwork.

KEY CONSIDERATIONS

- Regional disparities in the implementation and organization of services.
- Shortage of healthcare professionals, particularly doctors and nurses.
- Need for better operational integration between general practitioners and other professionals.
- Delays in infrastructure development and recruitment processes.
- Risk of failing to guarantee a minimum level of services, particularly in rural or remote areas.

DESCRIPTION OF THE INITIATIVE

Community Centers—the evolution of the former Health Centers—are not merely physical facilities, but true spaces for connection, listening, and shared care. They represent a new organizational model for local healthcare, in which healthcare professionals and citizens actively collaborate to promote. Open seven days a week, for at least twelve hours a day (and in some cases even 24 hours a day), these centers house an integrated network of health, social-health, and support services. General practitioners, family and community nurses, outpatient specialists, midwives, psychologists, social workers, and social-health care providers work in synergy through a multidisciplinary, person-centered approach. But the heart of the project lies not only in the services offered: it is the community itself. The Community Center is, in fact, also a hub for social engagement, where citizens, caregivers, experts by experience, and organizations participate in defining needs, care pathways, and initiatives for prevention and health promotion.

Integrated care thus becomes a co-constructed process that leverages local resources and strengthens a sense of belonging. Citizens are no longer merely recipients of care but active participants in the system: informed, involved, and jointly responsible.

The coordination of care pathways is often entrusted to the community nurse, who acts as a point of reference and facilitator between the various professionals, services, and the person receiving care. Continuity of care, prevention of chronic diseases, and reduction of inappropriate emergency room visits are just a few of the objectives of this model, designed to respond in a sustainable and equitable manner to the needs of an increasingly complex and diverse population.

OBJECTIVES

- To provide a single, continuous point of access to local health and social services.
- Ensure continuity of care between the hospital and the community, particularly for people with chronic conditions and those in vulnerable situations.
- Reduce unnecessary visits to hospital emergency departments.
- Promote prevention and health education among the local population.
- Strengthen the role of family and community nurses as well as the multidisciplinary team.

IMPLEMENTATION STEPS

- Identification and development of infrastructure across the region.
- Equipping the premises and providing basic technologies.
- Formation and deployment of the multidisciplinary team.
- Launching essential services: primary care, community nursing, home care, and continuity of care.
- Integration of specialized services: consultations, basic diagnostics, family counseling centers, one-stop service center.
- Launch of services with easy access for citizens.

IMPLEMENTATION REQUIREMENTS

- Material conditions: functional and accessible buildings equipped with basic diagnostic equipment (e.g., electrocardiograph, ultrasound machine, spirometer).
- Human conditions: stable presence of multidisciplinary teams, professional collaboration, continuing education.
- Organizational and policy conditions: support from local health authorities and regional/local administrations, implementation of the territorial healthcare reform provided for in the National Recovery and Resilience Plan and Ministerial Decree No. 77 of 2022.
- Technological requirements: integrated IT systems, electronic health records, telemedicine tools.

FURTHER INFORMATION

https://www.dimensioneinfermiere.it/casa-della-salute-cosa-sono-ruolo-infermiere/
https://salute.regione.emilia-romagna.it/cure-primarie/casa-della-comunita/

Cultural life and the arts: A lever for social connection and health

Context

Access to culture is **a fundamental right,** recognized by several international documents, notably the **Universal Declaration of Human Rights (Article 27),** which states that "*everyone has the right to freely participate in the cultural life of the community.*" In the field of social and medical-social services, **cultural rights** reaffirm that every individual must be able to express their identity, participate in artistic and cultural life, and have access to works, knowledge, and practices that nurture our connection to the world and to others. Therefore, every person must be recognized as a bearer of culture, a cultural resource for themselves and for others.

The World Health Organization (WHO), in its definition of health, emphasizes that it is not merely the absence of disease, but **a state of complete physical, mental, and social well-being.** As such, participation in cultural and artistic activities plays a central role in supporting quality of life, particularly among older adults. **The WHO's 2019 global report** on "*The Impact of Arts and Culture on Health and Well-being*" scientifically demonstrates the positive effects of cultural engagement on the prevention of age-related disorders, cognitive stimulation, emotional support, social connection, and a sense of purpose.

From this perspective, culture is much more than just a "nice-to-have" in senior care: it becomes **a vehicle for inclusion, recognition, and the prevention of isolation.** For professionals and volunteers, integrating culture into care practices opens up a sensitive and adaptable field of action, aligned with people's desires, memories, and lived environments.

This section of the guide proposes **five concrete actions,** drawn from initiatives carried out in partner regions, that illustrate the diversity of ways to integrate the arts and culture into senior care:

- **Time for a Waltz:** a home-based artistic intervention project led by professional artists working closely with isolated older adults to create a sensitive, intimate, and aesthetically pleasing space for connection.

- **Culture du Cœur:** an organization that facilitates access to cultural events for individuals supported by medical-social services, through a network of culturally engaged partners.
- **Sharing moments around readings or films:** a low-barrier cultural activity based on discussion, memory, shared emotion, and interpersonal connection.
- **Summer at the Palace:** a participatory heritage project offering tours, workshops, and festive events in an iconic cultural venue, designed to promote accessibility and a welcoming atmosphere.
- **Le Guide della Storia:** a participatory initiative that tells life stories through local heritage and history, involving older adults in a collective cultural project.

These initiatives demonstrate that culture can be **a powerful tool for strengthening bonds, celebrating life stories, and empowering older adults to remain active participants in their own lives.** They offer flexible, replicable formats that can be adapted to various settings, with or without a formal cultural partnership.

By placing the individual at the heart of the cultural experience, these initiatives show that it is never too late to dance, tell stories, create, listen, watch… and share.

10. The Time of a Waltz

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.1:
Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Art #Seniors #Home #Co-creation #Individual #Dance

NUMBER OF PARTICIPANTS

people present in the homes; a total of 62 people were involved in our project and participated either through home visits or group workshops. Filming took place in 17 households. Seven of these visits now make up the film.

NETWORK OR PEOPLE INVOLVED

- **A home care or support service:** to co-lead the project and connect the artist with isolated individuals.
- **An arts company:** to present the project and facilitate meaningful encounters through dance.
- **An audiovisual team:** to document the experience and produce the documentary.
- **Local governments:** to co-fund and support the project.

HIGHLIGHTS

The time of the visit becomes a moment suspended in time, an unusual interlude that takes the participant out of their daily routine and transforms their living space. The unique experience of dancing in their own home invites the participant to express their feelings and, in turn, their emotions. Thus, the connection and exchange with the artist happens very easily, creating a sense of connection. The participant, moved by this experience, is more willing to open up about their life story.

KEY CONSIDERATIONS

Maintain the element of surprise in the encounter, with no preparation other than the connection between the healthcare professional and the beneficiary, and the healthcare professional and the artist (no prior connection between the artist and the beneficiary). The beneficiary must be a volunteer, as they are opening their door and inviting us into their private space. Filming must be done with a very small crew and light equipment. Take the time to get to know each other. Pay particular attention to the beneficiary's feelings and allow them to express any negative emotions they may have. Adjust the duration of the encounter based on the interest shown by leads to a meeting with the artist.

DESCRIPTION OF THE INITIATIVE

Choreographer Sophie Lenfant loves nature, walking, dancing, and meeting people. For *The Time of a Waltz*, she walks the roads of Deux-Sèvres to visit isolated elderly people. She dances for them. She dances with them and makes time stand still. A small spark of life or a great emotion is never far away… A choreographic and human adventure filmed in parallel by director Romain Saudubois.

OBJECTIVES

- To reach out to isolated elderly people.
- To foster human connection through dance.
- Connecting with people in a different way.
- Drawing on the body's memory.
- Open hearts and encourage open communication.
- Raise awareness among professional caregivers about the practice of dance and the sensitive relationship to the body and movement.

IMPLEMENTATION STEPS

1. Meeting between an arts company and a home care service.
2. Joint project design and search for public and private funding.
3. Meetings and workshops with professionals.
4. Launch of the traveling project and meetings with older adults.
5. Production of the film.

IMPLEMENTATION REQUIREMENTS

- Secure financial support from public or private partners to cover costs.
- Allowing time for a meeting between the home care service and the artistic company.

FURTHER INFORMATION

For more information about the project (in French):
https://aleacitta.weebly.com/le-temps-dune-valse.html

To watch the movie trailer:
https://vimeo.com/323456868

Interview with Sophie Lenfant about the project:
https://www.youtube.com/watch?v=MK6dS_i49Ds

TESTIMONIALS

Jessica Delahay, Coordinator of the Comm'GénérationS service (Recreational program for seniors at home) – Thouars (79):

"I remember meeting Andrée, an 85-year-old woman who volunteered to host Sophieand her team. When they arrived, there was a brief moment of apprehension, but then everything fell into place effortlessly. Sophie danced for Andrée; her natural self returned, along with the music and the dance steps they performed together. She shared her happy memories of dancing and her daily life. A smile never left her face during this visit. It was a welcome break in Andrée's daily routine, and she spoke of it long afterward."

Yolande (70 years old at the time of filming) - Chatillon-sur-Thouet (79):

"My participation in the film gave me the opportunity to meet wonderful people who put us at ease, and some of them have become friends. It restored my self-confidence, and that wonderful day still helps me in moments when the discouragement of the illness tends to make me despair, I think of the good times. Hearing people laugh while watching the film at the theater is very rewarding. I'm ready to do this kind of thing again — it's very positive."

11. Culture of the Heart

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.1:
Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Art #Seniors #Culture #PerformingArts

NUMBER OF PARTICIPANTS

1,100 participants: beneficiaries of social and medical-social services in 2024 in the Gironde department (invitations + cultural events + Lier Festival).

NETWORK OR PEOPLE INVOLVED

Cultural operators in the area (performance venues, theaters, museums, galleries, stadiums, gardens, movie theaters, heritage sites, festivals...).
Social and medical organizations (Community Social Action Centers, Social Welfare Children's Homes, Asylum Seeker Reception Centers, Housing and Social Reintegration Centers, Mutual Aid Groups, Committees for the Study and Information on Drugs and Addictions, Departmental Centers for Solidarity and Integration, Daycare Centers, Hospitals, Local Missions, programs for Unaccompanied Minors, Youth Housing...).

HIGHLIGHTS

The project aims to promote the democratization of culture, as well as on the ability to strengthen inclusivity and to combat inequalities. It also promotes social and intergenerational diversity.

KEY CONSIDERATIONS

This project requires social workers who are sometimes difficult to identify or do not exist.

DESCRIPTION OF THE INITIATIVE

Cultures du Cœur is a nationwide association with branches in several regions across France. The association offers a variety of initiatives:

Cultural, sports, and recreational organizations provide Cultures du Cœur with invitations in the form of outings to events on their schedules, and also offer specific outreach projects.

Cultures du Cœur Gironde organizes **Cultural Gatherings,** which are guided group events featuring educational activities (guided exhibition tours, performances with pre-show discussions and post-show talks, hands-on visual arts workshops, nature workshops, and meetings with athletes).

Weekly catalogs are written, published, and sent to social workers, providing them with a digital and printable resource to support the people they assist. These catalogs feature the schedule of Cultural Gatherings as well as suggestions for free outings in the Gironde region.

The Drop-In Sessions are opportunities for members of Cultures du Coeur to meet with the clients of social and medical-social service centers. This is a time when the team comes to present and kick off the initiative.

The **LIER Festival** is a solidarity-based festival that breaks the mold of the arts world. This innovative festival allows artists and musicians to visit social and medical-social facilities to perform a concert. Following the concert, a community outreach session is organized.

OBJECTIVES

- Promote access to culture for as many people as possible,
- Support social workers in cultural mediation within the social and medical-social sectors,
- Promote a more diverse audience at cultural venues,
- Combat inequality,
- To build a network of social and cultural actors in the region.

IMPLEMENTATION STEPS

1. Social and medical-social organizations contact Cultures du Cœur by email or phone (contact information on the website) to take advantage of the various programs. A meeting is scheduled to facilitate mutual understanding between the organizations and to explore a partnership.
2. To access all of Cultures du Cœur's programs, they must complete an application, sign a charter and an agreement, and join the association.
3. The membership fee varies depending on the budget of the social or medical-social organization. Internally, the designated representatives of the social organizations communicate directly with the association.
4. Cultures du Cœur reaches out via email to cultural operators in the Gironde region to build cultural partnerships. An agreement is signed between the organizations, including commitments to invite them to performances and possibly outreach activities (cultural events).

Cultures du Coeur communicates through its social media channels (Facebook, Instagram, LinkedIn, blog).

IMPLEMENTATION REQUIREMENTS

3 employees, 14 volunteers.

FURTHER INFORMATION

https://www.culturesducoeur.org/CULTURES_DU_COEUR_33
https://culturesducoeur33.wordpress.com/

TESTIMONIALS

"A wonderful show featuring two dynamic and cheerful performers who take turns playing the roles of children and parents. Kudos to the actors and musicians—adorable, full of energy, and graceful. A true delight. And the Espace Simone Signoret, where we're always warmly welcomed. Thank you so much, Cultures du Coeur."

"An astonishing guided tour of the permanent collection—The Power of Men Through the Ages. The role of women, marked by imbalances and inequalities up until the 19th century, silenced by men. The fight for gender parity and equality continues today. Thank you for the invitation, Cultures du Coeur."

12. Time for discussion on books and films

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.1:
Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Culture #Elderly #Community #Library #SocialConnection

NUMBER OF PARTICIPANTS

Not defined.

NETWORK OR PEOPLE INVOLVED

- Community Social Action Center.
- Seniors.
- Library.
- Residents of the municipality.

HIGHLIGHTS

- Interactions facilitated as exchanges between participants progress.
- Numerous cultural outings among members following these exchange sessions.

KEY CONSIDERATIONS

- Arranging the room to facilitate interaction among participants.
- Furniture for displaying books.

DESCRIPTION OF THE INITIATIVE

Following the creation of a shared library at the municipality's senior center, a discussion session on books and films is held once a quarter in the library's common area.

Participants describe the subject of their favorite book or movie and what they particularly liked about it. This way, a sheet titled "Pick of the Month" can be created by incorporating readers' comments to spark an interest in discovering the book and discussing it. The sheet can be displayed next to the library. Consequently, individuals also have the opportunity to go to the movies to watch the film featured on the sheet, accompanied by the participants' comments.

OBJECTIVES

- To promote socialization and interaction among members through reading and watching films.
- Keep the shared library active.
- Facilitate cultural outings among members.
- To strengthen cognitive functions.

IMPLEMENTATION STEPS

1. Request book donations from residents and the library.
2. Set up the books to create a shared library in the community room of the senior center, along with a logbook to record book checkouts and returns. This allows everyone to see how the books are circulating.
3. Each quarter, a discussion session on books read and films watched is offered to participants in the shared library room.

IMPLEMENTATION REQUIREMENTS

Furniture, tables, chairs, snacks, facilitator.

FURTHER INFORMATION

https://fill-livrelecture.org/

TESTIMONIAL

Participant :
"I always find it interesting to share what we've read, because we haven't lived the same lives, so we have different perspectives on the reading."

13. Summer at the Palace

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.1:
Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Culture #Museum #Socialinclusion #Mediation

NUMBER OF PARTICIPANTS

Varies, depending on the museum and the specific initiative.
Activities for groups of older adults and caregivers are also planned.

NETWORK OR PEOPLE INVOLVED

- Museum.
- Older adults.
- Families.
- Caregivers.
- Cultural and social institutions.

HIGHLIGHTS

- Inclusion and social participation: The museum has expanded its traditional role to become a place where citizenship is practiced, welcoming social groups at risk of exclusion. The goal is to develop an educational process that allows everyone, including those facing difficulties, to participate in and enrich contemporary culture through their diversity.
- Engagement and active involvement: the museum has already launched successful initiatives, such as "Estate a Palazzo" (Summer at the Palace), where a warm and personalized welcome has created a strong bond with participants, enabling them to overcome physical, psychological, and social barriers to engage with cultural and historical heritage.
- Celebrating human heritage and individual stories: the museum can also become a place of intergenerational memory by collecting the testimonies and memories of older adults who lived through significant events of the 20th century, bringing to light life stories and wisdom that enrich the community.
- Intergenerational collaboration: Involving different generations—for example, in interviews and the organization of exhibitions—fosters dialogue between young people and older adults, thereby strengthening mutual understanding and the sharing of memories.

KEY CONSIDERATIONS

- **Exclusion due to health or social conditions:** it is important to remember that a portion of the elderly population, even if not disabled, is still at risk of isolation due to health issues, mobility challenges, loneliness, or cognitive difficulties. These factors can limit their ability to participate independently in museum activities.
- **Difficulties overcoming shyness and forming new relationships:** Older adults tend to be reserved and find it difficult to join new social groups. The museum must address this cultural barrier to promote social inclusion.
- **The need to adapt museum offerings:** Museum offerings must be designed with the physical, cognitive, and social challenges faced by older adults in mind, for example through initiatives that encourage their participation even when they cannot participate directly due to physical or geographical limitations.
- **The role of "caregivers" in participation:** Caregivers, who often look after older adults and people in need, can play a key role in facilitating access to museums, but also in promoting heritage culture for the people they care for.

DESCRIPTION OF THE INITIATIVE

The project aims to transform museums into inclusive spaces for active citizenship, where older adults can actively participate in the storytelling and promotion of the region's artistic and historical heritage. Through museum activities, older adults become witnesses and narrators of their own history, thereby contributing to the preservation and transmission of historical memory.

OBJECTIVES

- Promote the social inclusion of older adults.
- Engage older adults in cultural and museum activities to improve their well-being and self-esteem.
- Promote intergenerational participation and interaction through cultural heritage.

IMPLEMENTATION STEPS

1. Development of personalized programs for older adults.
2. Actively involving older adults in contributing to exhibitionsand in collecting objects, stories, and testimonials to be displayed in the museum.
3. Development of intergenerational and inclusive tours, including for people with limited mobility.
4. Collaboration with social service professionals to facilitate the participation of older adults. Development of personalized support programs for older adults.

IMPLEMENTATION REQUIREMENTS

- Educational and informational materials (guides, photographs, apps).
- Human resources to facilitate access and interaction (museum staff, social workers).
- Logistical support for people with mobility challenges.
- Accessibility and inclusion policies.

FURTHER INFORMATION

https://www.redcarpetforall.org/wp/estate-a-palazzo/

14. Former History Guides

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.1:
Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Seniors #Cultural #Intergenerational #Tourism #Heritage #SocialInclusion

NUMBER OF PARTICIPANTS

The exact number of participants is not specified, but the visits involve both senior guides and local visitors.

NETWORK OR PEOPLE INVOLVED

- Volunteer organization for the rights of the elderly.
- Retirees' Union.
- Local historic sites and museums.

HIGHLIGHTS

- Combating social isolation among older adults.
- Improving the mental and physical well-being of older participants.
- Promoting active citizenship and intergenerational dialogue.
- Valuing older adults in the preservation and transmission of cultural heritage.
- Strengthening community ties and local tourism.

KEY CONSIDERATIONS

- Ensuring accessibility for all older participants, particularly those with mobility challenges.
- Ongoing training and support for older guides to ensure high-quality, informative tours.
- Protecting participants' well-being during tours, especially in emotionally sensitive contexts related to the past.

DESCRIPTION OF THE INITIATIVE

The project involves older adults as guides to showcase the area's historical, archaeological, and natural beauty. The initiative highlights the significant role of older adults as guardians and transmitters of cultural and historical heritage. The project can involve older adults without specific mobility issues, as well as those with limited mobility, accompanied by volunteers.

Collaboration with volunteer organizations advocating for the rights of older adults or volunteer groups composed of older adults will actively engage these individuals, motivating them to participate actively (and not merely as potential beneficiaries) in the cultural life of their community.

OBJECTIVES

- Combat the isolation of older adults and promote their physical and mental well-being.
- Highlight the role of older adults as guardians of local heritage.
- To foster intergenerational dialogue and the active participation of older adults in the community.

IMPLEMENTATION STEPS

- Engage volunteer organizations advocating for the rights of older adults to identify older adults interested in collaborating on the project's implementation.
- Plan and organize visits to key historical and archaeological sites.
- Train older participants to serve as guides for visitors at these sites.
- Establish partnerships with local organizations.
- Organize the tours.

IMPLEMENTATION REQUIREMENTS

- Materials: historical sites and cultural monuments, materials for guides (maps, brochures, information sheets).
-Human resources: support from organizations advocating for the rights of older adults and retiree unions for the organization and training of older adults who will serve as guides.
- Policy: local authorities and institutions involved in promoting and supporting the project, ensuring the preservation of cultural sites.

FURTHER INFORMATION

https://www.ansa.it/campania/notizie/2024/06/12/anziani-guide-della-storia-in-tour-parte-la-nuova-edizione_9df2204f-7f97-4fec-a062-d6e432a53863.html

TESTIMONIALS

Assunta Parisi, President of ADA Campania: *"The project has a dual objective: to combat the isolation of older adults and promote their well-being, while highlighting their role as guardians of historical and cultural heritage."*

Biagio Ciccone, Secretary General of UIL Pensionati Campania: *"The project offers an opportunity for socialization, interaction, and feeling like an integral part of the community, demonstrating that older adults are a fundamental resource for the community."*

Active Aging

Context

Aging is a unique and subjective journey. Although it is often associated with physical and cognitive decline, many older adults continue to live active lives. Active aging does not just mean living a long life, but doing so with a purpose, while staying healthy and engaged at every stage of life. It includes physical, cognitive, and social activities that promote an independent and fulfilling life, regardless of physical limitations. It is based on seeking opportunities to stay healthy and engaged safely at every stage of life, taking into account not only chronological age but also the behavioral and socioeconomic factors that influence quality of life (Bowling & Ebrahim, 2001). Active aging is based on four main components: physical activity, cognitive engagement, social participation and access to healthcare. Striking the right balance between these factors can reduce the risk of dependency, improve quality of life, and combat social isolation. It is a way to live a meaningful life by contributing to the community and finding opportunities for self-expression.

Dependence and Quality of Life

Dependency is defined as an individual's inability to fulfill their potential without the assistance of another person, whether physically, psychologically, economically, or socially (Ameline & Levannier, 2021). Quality of life, on the other hand, is an individual's perception of their place in life, influenced by physical health, psychological well-being, level of independence, social relationships, and interaction with the environment (WHO, 1993). For older adults, active aging can reduce the risk of dependency, improve quality of life, and promote the maintenance of autonomy and social engagement.

The Role of the Community in Combating Social Isolation

Strong social support from the community promotes a healthy and fulfilling life by combating loneliness and feelings of exclusion, which can result from isolation (Jacob, 2001). Local communities, through their associations and support networks, provide social settings where individuals can form meaningful connections, offer and receive help, and feel part of a support network that enhances their quality of life.

Active Aging Practices

The practices presented in this section offer inspiration, demonstrating that, despite physical challenges, there are many opportunities to maintain a good quality of life and actively contribute to society.

15. Acti Duo

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.2:
Physical activity, sports, etc.

HASHTAGS

#Sport #SportforAll #SportsActivities

NUMBER OF PARTICIPANTS

2 people per session (the professional or volunteer and the senior).

NETWORK OR PEOPLE INVOLVED

To develop this service offering, the actiduo solution was born out of field observations with home care aides and was developed in collaboration with numerous partners:

- 6 home care services involving nearly 50 home care workers participated in the development of the solution.
- 5 healthcare professionals designed tailored exercises in pairs: ReSanté-Vous: a French company developing service offerings aimed at enhancing the well-being of seniors at home or in care facilities.
- The digital company SINAPS developed the digital solution.
- An educational team designed the training curriculum and the gamification of the app. This solution was also co-funded by a pension fund, a foundation, and a local government. When the app is available in a given area, the networks and individuals involved include:
- home care agencies or other professionals/volunteers who provide in-home services to implement the program in the home.
- the beneficiaries of the program, the seniors.

HIGHLIGHTS

- Strengthen the caregiver-care recipient bond by sharing a friendly and fun moment.
- Promote the well-being, health, and independence of older adults living at home.
- The tool is simple and accessible to people who are not tech-savvy.
- Evolving the roles / the role of professional caregivers: preventing social isolation, loss of independence, and the risk of falls among seniors.

KEY CONSIDERATIONS

- Training for caregivers is essential to raise awareness of the precautions to ensure a safe session. It also helps them understand the app and how it works. Acti Duo is not just an app but a comprehensive solution that integrates training and the tool.
- The exercises cannot be customized as desired. For example, some people have specific health issues that the app cannot accommodate. They can skip exercises, but there are 200 of them. If the person skips many, the exercises will become repetitive.
- Licensing rights are fairly "restrictive" because they are tied to a group of caregivers (up to 12).
- The app is currently available only in French.

DESCRIPTION OF THE INITIATIVE

Actiduo is a solution designed to support professionals who visit seniors in their homes in leading shared preventive health activities.
It consists of training and a digital app. The app is a tool that guides the activity and the interaction. It offers 20- to 30-minute sessions for two people and provides a fun way to exercise by taking on challenges. It features over 100 activities tailored to the participant's profile.

This program is available to home care services; it allows service recipients to engage regularly in gentle physical activity supervised by their regular home care provider. Professionals also benefit from the expected advantages of regular physical activity. Strengthening the caregiver-care recipient relationship, boosting self-esteem and well-being (among other things) are thus sought through the program: the goal is to positively impact the quality of life of individuals, as well as the quality of life at work for professionals, which in turn has an overall impact on the organization.

The app is a paid service (300 euros per month, excluding tax, for access for 12 people). Training is provided to professionals to ensure the tool is used properly.

OBJECTIVES

Guide the professional in leading and facilitating a physical activity session in pairs:
- Promote participants' well-being.
- Facilitate and strengthen the caregiver-care recipient relationship.

IMPLEMENTATION STEPS

1. Contact ReSanté-Vous, a social enterprise that supports independence and provides assistance to older adults.
2. Attend a one-day training session.
3. Download the app and create an account.
4. Suggest the activity during a home visit.
5. Perform the exercises.
6. Taking Stock.

IMPLEMENTATION REQUIREMENTS

- A smartphone or tablet.
- A few simple teaching aids (ball, resistance band, etc.).
- An active Actiduo license.

FURTHER INFORMATION

Link to the app: *https://actiduo.fr/*
Link to the activity on the website of the company that developed the app: *https://www.resantevous.fr/blog/dossiers/actiduo-un-moment-de-partage-aidant-aide/*

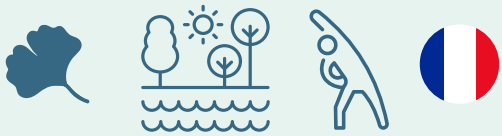
TESTIMONIALS

Home Care Aide: *"Anyway, we all say it—something has changed. We're seen in a better light, and, even more so, in our role as home care aides, as true companions."*

User: *"I didn't think I'd be able to do this. It's good for me, but also for my home care provider (smile)."*

Testimonial video
https://youtu.be/M6z7Oiq-vd0

16. Group walking



LINKS TO WP2 TRAINING MODULES

Sub-Module 4.2:
Physical activity, sports, etc.

HASHTAGS

#Seniors #Sport #SportsforAll #Walking #SportsActivities

NUMBER OF PARTICIPANTS

1 facilitator for every 5 participants.

NETWORK OR PEOPLE INVOLVED

- Municipality.
- Seniors.
- Resource - tourist office.

HIGHLIGHTS

- Exploring easy walks in the town or nearby.
- Socialization.
- Promotion of physical activity.

KEY CONSIDERATIONS

It is important that the group leaders remain vigilant throughout the walk to maintain a pace suitable for the group as a whole.

DESCRIPTION OF THE INITIATIVE

Each week, the town's activity coordinator offers a group of seniors a variety of walks of varying distances:

1. The community coordinator sets the weekly routes based on a monthly schedule so that participants can plan ahead for the various hikes. These walks take place on flat terrain in various locations throughout the area. The distance in kilometers for each route is clearly indicated in the program. The coordinator has a vehicle that can accommodate 9 people to transport participants to the starting point of the route. Carpooling among participants is also an option. To ensure safety and allow the group to proceed at its own pace, two guides accompany the group.
2. A meeting point is provided to registered participants so the group can start the walk together. A 10-minute break is scheduled halfway through the route.
3. There is always an opportunity to have coffee at the end of the walk to continue the discussions among participants.

OBJECTIVES

- Promote socialization and interaction through walking.
- Encourage physical activity.
- Explore the region's many walking routes.

IMPLEMENTATION STEPS

- Design and publication of the monthly activity program.
- Meetings and walks with participants.

IMPLEMENTATION REQUIREMENTS

1 vehicle to accompany them on the hike 1 first-aid kit.

FURTHER INFORMATION

https://www.santemagazine.fr/beaute-forme/sport/marche-velo-jogging/quels-sont-les-bienfaits-de-la-marche-active-pour-les-seniors-1088608

TESTIMONIAL

Participant:
"I go for these walks outdoors, which let me do it in a group—it's really nice for chatting; I wouldn't do it alone. In the evening I feel tired, I have things to tell to my family. I get to discover different places."

17. Beauty Break

LINKS TO THE WP2 TRAINING MODULES

Sub-Module 4.1: Participating in a Culture and Health Cooperation Project – Culture.

HASHTAGS

#Seniors #Beauty #Wellness #Aesthetics

NUMBER OF PARTICIPANTS

10 people to encourage discussion.

NETWORK OR PEOPLE INVOLVED

- Municipality.
- Seniors.
- Resource - Social Aesthetician.

HIGHLIGHTS

Workshops are regularly requested by participants, who report that they provide a sense of well-being and improved self-esteem.

KEY CONSIDERATIONS

- A room free from outside noise.
- Keep the group small to encourage meaningful discussion.
- Purchase the necessary supplies in advance: 2.

DESCRIPTION OF THE INITIATIVE

Once a month, the senior center coordinator organizes a “beauty break” workshop for members, providing an opportunity to take time for themselves in a community room. The session begins with cardiac coherence (breathing exercises designed to synchronize the heart rate with the breathing rhythm, thereby helping participants relax), followed by a hand care session or a workshop on making “homemade” cosmetics.

1. Prior to the workshop, the facilitator gathers the necessary ingredients, such as coffee and honey (depending on the recipe). Participants are asked to set their phones to silent mode to ensure a peaceful experience.
2. A welcome session for registered participants takes place in the community hall. Coffee or tea is served to help everyone feel comfortable and facilitate communication.
3. An explanation of the benefits of cardiac coherence is provided, followed by a practical session aided by a video on a computer. This support is essential for initial practice to prevent participants from struggling. It allows them to see the ball moving up and down, helping them determine when to inhale and exhale. Afterward, the group is invited to discuss their impressions about cardiac coherence.
4. Once the discussion is over, a cosmetics-making session is organized. Each participant will have the opportunity to create their own cosmetics and perform a hand scrub using coffee grounds, for example.
5. Each participant has a bowl in front of them and another container filled with coffee grounds. Everyone is invited to take some coffee grounds in their hands; the facilitator guides the discussion toward the sensations the coffee creates on their hands, its aroma, and rubbing their hands with the coffee. Then the facilitator pours lukewarm water over each participant’s hands to remove the coffee residue; a soft towel is placed near each person so they can dry their hands. The conversation focuses on the softness felt after this exfoliation.
6. Participants have the option to have their nails trimmed and painted.
7. The session ends with an opportunity to share a hot drink.

OBJECTIVES

- Promote socialization and a friendly atmosphere.
- To promote the well-being of participants.

IMPLEMENTATION STEPS

- Design and publication of the monthly activity program.
- Meetings and workshops with participants.

IMPLEMENTATION REQUIREMENTS

Tables, Chairs, Beauty Products, Snacks
Facilitator.

FURTHER INFORMATION

https://senectis.com/sante-des-seniors-connaissez-vous-la-coherence-cardiaque/
https://www.youtube.com/watch?v=dGJkzyKHKUE

TESTIMONIAL

Participant :
"I don't pay attention to myself anymore; it allows me to reconnect with my body. It's important when someone else touches me."

18. In Forma Mentis: Prevention and well-being for seniors

LINKS TO WP2 TRAINING MODULES

Sub-Module 4.2:
Physical activity, sports, etc.

NUMBER OF PARTICIPANTS

34 older adults (age 65 and older).

HIGHLIGHTS

- **Improved physical and mental health among older adults:** prevention of neurodegenerative diseases and improved quality of life.
- **Integration between health services and the social fabric:** creation of support networks among citizens, associations, and healthcare facilities.
- **Sustainability and replicability:** the project has great potential for replication in other areas, thanks its modular structure and collaboration among different stakeholders.
- **Empowerment of the elderly population:** raising awareness of healthy lifestyles and prevention.

HASHTAGS

#Seniors #Prevention #Health #Nutrition #Well-being #NeurodegenerativeDiseases #Alzheimer'sDisease #PhysicalActivity #Men'sGymnastics

NETWORK OR PEOPLE INVOLVED

- **Healthcare organization:** Geriatric Center, Sports Medicine Unit, Nutrition and Dietetics Department.
- **Retiree unions.**
- **Municipality:** Institutional and logistical support.
- **Participating experts:** Gerontologists, sports physicians, psychologists, nutritionists, exercise science specialists, educators, and trainers.

KEY CONSIDERATIONS

- **Time and resource management:** potential difficulty in involving all necessary stakeholders for large-scale replication.
- **Financial sustainability:** ensure that the project continues to be funded and supported over time.
- **Customization of the program:** adapt the courses to the specific needs of each participant, to avoid overly generic approaches that may not meet all needs.

DESCRIPTION OF THE INITIATIVE

The In Forma Mentis project aims to combat the growing incidence of neurodegenerative diseases, such as Alzheimer's disease, among older adults through an integrated approach combining physical activity, mental exercises, and health education.
The project was developed, funded, and implemented by the Local Health Authority (AUSL) of Modena in collaboration with the Municipality of Modena and several associations and unions (Spi Cgil Modena, Fnp Cisl Emilia Centrale, and Uil Pensionati Modena). It is aimed at healthy individuals over the age of 65 with no specific medical conditions, with the goal of preventing cognitive decline and fostering environments that promote well-being and socialization.

Participants benefited from mental and physical exercise classes and nutrition education. The specific objectives of this "memory training" are as follows:

- to optimize sensory abilities;
- to train natural learning abilities;
- to improve metacognition;
- improve mood;
- to meet the need for more opportunities for social interaction.

Currently, the project is in the pilot phase with a target group of older adults with Down syndrome, thanks to funding from the Ministry of Labor and Social Policies.

OBJECTIVES

- To prevent and slow the progression of degenerative diseases of the body and mind in people over the age of 65.
- Promote the mental and physical health of older adults through physical and mental exercise classes and educational activities focused on proper nutrition.
- Support collaboration between primary care providers, community organizations, and the social fabric to improve the quality of life for older adults.
- Promote best practices and activities implemented in sports and social centers to improve the well-being of the elderly population.

IMPLEMENTATION STEPS

1. Preparation and planning: identifying participants and defining the classes. Creating educational materials for physical and mental activities.
2. Course development: launching physical and mental exercise courses under the supervision of experts in geriatrics, sports, psychology, and nutrition.
3. Monitoring and evaluation: preliminary testing of participants to assess the effectiveness of the courses, gather feedback, and adapt the program to participants' needs.
4. Replication and expansion: based on the results, the project can be replicated in larger areas and with other target groups (it is currently being tested with adults and older adults with Down syndrome), while seeking additional funding sources.

IMPLEMENTATION REQUIREMENTS

Materials: physical and mental exercise programs, educational materials on healthy eating, exercise equipment.

People involved in carrying out the project's planned activities for the beneficiaries: healthcare professionals (geriatrics, sports, nutrition, psychology), experts in physical and mental health education, and social workers.

Policies: institutional support for regional health policies, collaboration between public authorities, local associations, and retiree unions.

FURTHER INFORMATION

https://www.cgilmodena.it/informa-mentis-prevenire-e-gia-curare-presentazione-del-progetto-per-la-prevenzione-del-declino-cognitivo-e-fisico-giovedi-27-ottobre/

TESTIMONIAL

Andrea Fabbo, *Director of the Cognitive Disorders and Dementia Unit, Department of Primary Care, who coordinated the project and emphasizes the importance of prevention and collaboration between doctors, associations, and citizens.*

19. University of the Third Age

LINKS TO WP2 TRAINING MODULES

Sub-Module 4:
Socio-educational strategies.

NUMBER OF PARTICIPANTS

Universities of the Third Age typically host hundreds of participants at each location.

NETWORK OR PEOPLE INVOLVED

- **Instructors:** graduates or experienced professionals in various fields (literature, history, languages, technology, etc.).
- **Participants:** seniors and adults eager to learn and actively participate in cultural life.
- **Local associations and regions:** organizations that recognize and support the universities for seniors, potentially by providing resources and funding.
- **Volunteers and administrative support:** staff who assist with logistical organization and the management of activities.

HASHTAGS

#Seniors #LifelongLearning #AdultEducation #CulturalIntegration #UniversitiesforSeniorCitizens

HIGHLIGHTS

- **Social Inclusion:** Universities of the Third Age promote the integration of adults and older adults into the social and cultural life of the community.
- **Maintaining physical and mental health:** Lifelong learning stimulates cognitive functions and improves the physical and mental well-being of older adults.
- **Comprehensive education:** Courses cover a wide range of fields (humanities, sciences, arts), offering a variety of topics to suit all interests.
- **Innovative methodologies:** The introduction of online courses and distance learning activities makes it possible to reach a wider and more diverse audience.

KEY CONSIDERATIONS

- **Financial sustainability:** Some courses may require additional resources to ensure the continuity of activities, particularly in the context of rising costs.
- **Equitable access:** Ensure that all older adults, including those with fewer resources, can participate without financial barriers.
- **Adaptation of teaching methods:** Continue to develop inclusive teaching methods accessible to all, regardless of technological skills.

DESCRIPTION OF THE INITIATIVE

Universities of the Third Age are regionally recognized educational and cultural institutions established to promote culture and foster the integration of older adults into the social and cultural life of their communities, offering educational programs to adults, generally aged 50 and older. These universities enable adults to continue their studies or begin new ones, without age restrictions.

The educational offerings are extensive and include courses on a wide range of subjects: humanities, sciences, arts, and social sciences, with an emphasis on lifelong learning and the deepening of cultural and social skills. These universities are located throughout Italy, and although they operate autonomously, they must adhere to certain common guidelines to obtain official recognition. For example, each university must offer at least six Annual courses, each lasting at least 100 hours. The curriculum is very diverse, ranging from courses in literature, philosophy, art history, and foreign languages to technology courses, organized at various levels to accommodate students' different academic backgrounds.

OBJECTIVES

- To promote lifelong learning for adults and seniors, regardless of their age.
- To promote social inclusion through cultural, artistic, and educational activities.
- To encourage adults' active participation in the social and cultural life of the community.
- Offer a diverse range of courses on humanities, science, arts, and technical subjects, with the aim of keeping the mind and body active.
- Support lifelong learning, paying particular attention to the cultural and psychophysical well-being needs of the elderly population.

IMPLEMENTATION STEPS

- Plan the educational offerings: identify courses to be offered based on the interests and needs of older adults. Each university of the third age must offer at least 6 courses per year, with a minimum of 100 class hours each.
- Faculty recruitment: Courses are taught by university graduates, industry professionals, or experts in specific fields. It is essential to select instructors with experience teaching adults and older adults.

- Course Start: Organization of classes, which may vary between classroom sessions, practical workshops, and outdoor activities (depending on the course). Each student commits to following a curriculum that concludes with a final assessment.
- Exams and Certificates: At the end of the course, students take an exam certifying the skills they have acquired. No degree is awarded, but certificates of attendance and certificates of proficiency are issued.

Non-mandatory:

- Development of innovative teaching methodologies: introduction of online and distance learning courses using information technology.
- Monitoring and evaluation: Collection of participant feedback and assessment of course effectiveness to adapt the training program.

IMPLEMENTATION REQUIREMENTS

Materials: provision of printed and digital teaching materials, as well as equipment for workshops and practical activities (e.g., musical instruments, visual arts supplies, computers for online courses).

Human resources: experienced teachers in various fields, facilitators, and administrative staff for registration and activity management.

Policies: Institutional support at the local and national levels, with the participation of municipalities, associations, and labor unions. Support from health authorities to promote the physical and mental well-being of older adults.

FURTHER INFORMATION

For more information on the senior citizens' university nearest to your area of interest, you can search online or contact local offices to obtain specific details about training programs, registration, and activities.

To learn more about the courses offered and how to enroll in senior universities in Italy, you can visit their websites.

20. Jubiloteca Bortziriak: A community resource to promote independence and prevent dependency among older adults (active aging).

HASHTAGS

#Seniors #Well-being #Daycare #PromotingIndependence #Socialization

LINKS TO WP2 TRAINING MODULES

Module 4: Socio-educational strategies.
Module 5: Intergenerationality.
Module 8: Network Building and Community Engagement.

NUMBER DE PARTICIPANTS

64 older adults are participating.

NETWORK OR PEOPLE INVOLVED

- **Social Services:** responsible for overall coordination and service evaluation.
- **Health Center:** responsible for social referrals and directing individuals to the service.
- **Volunteers:** assist with transporting people with mobility issues and contributes to recreational and enrichment activities.

HIGHLIGHTS

- Promoting active aging and preventing dependency: through physical and cognitive activities, the Jubilothèque helps maintain independence and prevent functional decline in older adults.
- Strengthening community support and promoting socialization: fosters interaction among participants, reduces and encourages community participation with the support of volunteers.
- Improved accessibility and reach: coordination with the healthcare system and paratransit services facilitates access for a larger number of people, thereby improving their well-being and quality of life.

KEY CONSIDERATIONS

- **Need for greater outreach and awareness:** although the service has grown, it is important to continue promoting the Jubiloteca so that it reaches a larger number of older adults and encourages their participation.
- **Extended hours and a wider range of activities:** adjusting the schedule and offering a greater variety of activities would better meet the interests and needs of users.
- **Strengthening the team of staff and volunteers:** To ensure the quality of service, it would be helpful to increase the number of staff and volunteers, particularly in the areas of transportation and activity coordination.

DESCRIPTION OF THE INITIATIVE

The Bortziriak Senior Center is a community service promoted by the Community of Social Services, which serves as a space for promoting personal autonomy and preventing dependency. It also functions as a place for meeting, fellowship, and socializing, where older adults can connect, share their experiences, and combat unwanted loneliness.

The program takes a comprehensive approach across three complementary dimensions: the physical dimension, through mobility and functional maintenance exercises; the cognitive dimension, through stimulation and memory workshops; and the social dimension, fostering active participation and community bonds. Activities take place in small groups, in a warm and welcoming environment, using a methodology adapted to each person's abilities. Coordination with the healthcare sector enables a more comprehensive approach, incorporating social referrals as a pathway to access.

Volunteer collaboration is essential, particularly for transportation services and leading the sessions, ensuring accessibility and close support. Today, the Jubilothèque has become a regional leader in active aging, networking and community outreach in rural areas.

OBJECTIVES

- Promote active aging among the population.
- Prevent social isolation among older adults.
- Encourage their participation in the community.
- Improve the quality of life for older adults.

IMPLEMENTATION STEPS

1. **Phase One: Launch with Low Participation**
   The Jubilothèque was initially created to promote active aging and prevent dependency among older adults. However, uptake was very low due to a lack of awareness of the service and the absence of professional referrals. Although stimulation and socialization activities were offered, the impact on the community was limited.

2. **Phase Two: Expansion through Partnership with the Healthcare Sector**
   Subsequently, coordination with the healthcare sector marked a turning point. Healthcare professionals have begun to actively prescribe and recommend the Jubilothèque as an integral part of preventive care for older adults at risk of isolation or functional decline. Thanks to this involvement, the service's reach has expanded and participation has increased significantly, establishing the Jubilothèque as a go-to resource in the community.
3. **Phase Three: Integration of Adapted Transportation and Improved Accessibility**
   Recognizing that mobility was a barrier for many people interested in participating, a transportation service was introduced, managed by the Community of Communes and supported by volunteers. This improvement facilitated access for people with mobility challenges, ensuring more equitable access to the service and enhancing its impact on users' quality of life.

IMPLEMENTATION REQUIREMENTS

Material conditions: a suitable physical space is required, as well as accessible transportation to facilitate access for people with reduced mobility, educational and stimulating materials, and technological equipment.
Human resources: Implementation requires the availability of social and health care professionals, as well as volunteers.

Political and institutional conditions:

- Commitment of the public administration to the management and funding of the service.
- Coordination with the healthcare system to ensure that users are referred by healthcare professionals.
- Support from external entities to secure additional funding through grants and partnership agreements.
- Community outreach as a strategy to establish the Jubilothèque as a key resource in promoting active aging and preventing dependency.

FURTHER INFORMATION

https://bortziriakgz.eus/es/

TESTIMONIAL

Javier Biurrarena, *a Jubiloteca user since 2008, emphasizes that this resource helps him stay active. He notes that getting out of the house is essential to avoid isolation and stiffness. Thanks to the Jubiloteca, he can get physical exercise, stimulate his mind with activities such as crossword puzzles and math, and spend time with others. For him, it's an opportunity for well-being and socialization.*

Housing

Context

These practical guides aim to present housing options **that help older adults reduce their actual or perceived isolation. Rethinking housing to meet their changing needs and ensure their quality of life.**

Definition

Housing generally encompasses the living conditions and lifestyles of the individuals and groups who occupy it. Housing is therefore a concept that links living spaces to social, economic, and environmental factors.

Taking into account the diversity of profiles

Older adults come in a wide variety of profiles. This diversity is reflected in their housing needs, which can vary depending on their health status, level of dependency, place of residence (rural or urban), gender, socioeconomic status, and level of education.

Designed to support independence and participation

Housing must be designed to promote the independence of older adults, a fundamental aspect of their well-being. Innovative housing solutions can encourage older adults' active participation in community life, thereby strengthening their sense of purpose and social identity.
Community participation and shared responsibility emphasize the active involvement of older adults in their living environment, thereby fostering their sense of belonging and purpose.

Community care

The community care approach emphasizes the importance of viewing the living environment as a key component of well-being and care, drawing on the community's shared resources. It highlights the importance of social connections and mutual support within the living environment.

Toward an intergenerational approach

Housing can serve as a vehicle for intergenerational interaction, fostering exchanges and relationships between different generations. Models of shared housing or intergenerational cohabitation can help reduce isolation among older adults while enriching the social fabric of our communities.

Housing, a vehicle for social connection

It can foster social interaction and strengthen a sense of belonging to a community. Attitudes are also changing; beyond the idea of staying in one's own home at all costs, older adults now have the opportunity to choose from a wider range of options: "Adapting one's current home or moving into a new one."

21. Foster care

LINKS TO THE WP2 TRAINING MODULES

Sub-Module 8:
Network Building and Community Engagement.

HASHTAGS

#Network #Community #Housing #Environment

NUMBER OF PARTICIPANTS

It was not possible to determine the number of participants.

NETWORK OR PEOPLE INVOLVED

- The elderly person.
- Their support network (family, social, medical, and paramedical).
- The host family.

HIGHLIGHTS

- This care is only possible if the caregiver is licensed, which ensures the safety of the care and care.
- The constant presence of a caregiver “at home” fosters social connection.
- A “family-style” living environment and care, more personalized than in a facility.
- A personalized care plan is developed.

KEY CONSIDERATIONS

- The elderly person must be independent or losing their independence.
- The elderly person cannot be to the host.

DESCRIPTION OF THE INITIATIVE

To offer an older adult an alternative solution that meets their lifestyle needs through personalized care and support provided by host families. This initiative is structured around a personalized care plan that defines the terms of stay (permanent, temporary, or sequential; full-time or part-time) and ensures safe care tailored to the individual's needs, interests, and abilities. The host's constant presence facilitates social interaction, maintains the routines and living spaces characteristic of the home, and promotes the person's integration into their family, social, and healthcare support network.

OBJECTIVES

- An alternative to institutional care for individuals who can no longer live alone at home.
- To provide older adults with a familiar environment (the familiarity and comfort of home).
- To enable the individual to benefit from personalized and stimulating support through the caregiver's presence.
- To promote the individual's independence by enabling them to meet their social needs.
- A care solution that can be offered as part of a respite program for family and/or professional caregivers.

IMPLEMENTATION STEPS

1. Obtain the list of individuals registered as family caregivers.
2. Contact and home visit.
3. Definition of the care arrangement (permanent care, temporary or sequential care, full-time or part-time).
4. Financial assessment of the project and potential application for state social assistance (Social Assistance for Housing).

IMPLEMENTATION REQUIREMENTS

As a condition for implementation, this type of care is only possible when the host family has the appropriate authorization. This authorization ensures that care and support are provided in a safe manner.
To obtain it, a formal procedure must be followed; therefore, it is essential to contact the responsible agency to initiate and complete the authorization process.

FURTHER INFORMATION

https://www.service-public.fr/particuliers/vosdroits/F15240

https://www.cettefamille.com/accueil-familial/permanent-temporaire-partiel/#:~:text=l'accueil%20familial%20peut%20s,adapter%20%C3%A0%20de%20nombreuses%20situations.

TESTIMONIAL

Testimonial from Mikèle, a foster parent:

"There was a time when taking care of one's parents was a given. Today, the pace of life has changed, and many older adults find themselves isolated. By becoming a foster family, I chose to open my home and rebuild that essential connection. Welcoming an elderly person means offering them a family, a presence, a zest for life, and a renewed sense of dignity. It's a beautiful human experience that brings meaning back to everyday life—for the person being cared for as well as for me. And to give caregivers a break, some families offer temporary care—by the day or 24-hour care, for a predefined period."

22. A personal living space within a community

LINKS TO WP2 TRAINING MODULES

Sub-Module 8:
Network Building
and Community Engagement.

HASHTAGS

#Housing #Collective #SocialBonds #CommunitySpace

NUMBER OF PARTICIPANTS

It was not possible
to determine the number
of participants.

NETWORK OR PEOPLE INVOLVED

- The elderly person.
- The person's support network (family, medical, paramedical staff, etc.).
- The social worker.
- Care facilities.
- Institutional stakeholders: Funders and authorities granting rights and statutory status.
- Municipalities.

HIGHLIGHTS

- This will allow the individual to remain in their own home.
- The space and shared services promote social and civic engagement.
- The individual remains independent.
- These living spaces are generally located near shops and transportation services.
- These projects are very often participatory, allowing residents to collaborate in the creation of this living space.

KEY CONSIDERATIONS

- Depending on the type of housing, some options can be expensive.
- This type of housing does not provide any medical care.

DESCRIPTION OF THE INITIATIVE

To provide a private living space for seniors within a communal living environment, thereby breaking down isolation through the various services made available to them. This is a true "living at home" experience that offers the advantage of being part of a community, designed in collaboration with the group during participatory workshops.

Several housing models can fit this solution:
- Independent living residences.
- Inclusive housing.
- Shared housing.

This allows older adults to enjoy independence and "à la carte" community services in a reassuring and secure living environment.

OBJECTIVES

- Enabling older adults to remain in their own homes while living independently and being part of a community.
- Fostering social connections through shared living spaces—breaking the cycle of isolation.
- Promoting community living.
- Ensuring personal safety.
- Promote the maintenance of personal autonomy.
- Provide a living environment better suited to the older adult's family situation and their ability to maintain their living space.
- Enabling "shared" access to professional services (such as recreational activities).
- Ensuring active participation in community life.
- Enabling the pooling of personal care assistance or services.

IMPLEMENTATION STEPS

- Assessment of the individual's level of independence.
- Search for organizations offering this type of care in the area OR participation in the creation of such organizations as part of a project.
- Site visit.
- Submission of an application.

IMPLEMENTATION REQUIREMENTS

- The individual must be fully, or largely, self-sufficient.
- The individual must have the financial means to afford this type of housing (there is no specific financial assistance paid directly to the individual; eligibility for housing assistance depends on income).
- An agreement with the relevant Department and the National Solidarity Fund for Autonomy (CNSA) (a public agency responsible for funding and coordinating policies related to the autonomy of older adults and people with disabilities) enabling the shared living space to receive certification.
- An operating grant paid annually to the facility (Shared Living Assistance).

FURTHER INFORMATION

https://www.pour-les-personnes-agees.gouv.fr/changer-de-logement/vivre-dans-une-residence-avec-services-pour-seniors/les-residences-autonomie

https://www.pour-les-personnes-agees.gouv.fr/changer-de-logement/autres-solutions-de-logement/habitat-inclusif-un-chez-soi-et-une-vie-sociale-partages

https://www.vivre-en-beguinage.fr/

TESTIMONIAL

Testimonials from seniors and their families regarding the "Gurekin" shared housing project:

https://youtu.be/GNVeR3WOEbk?si=miU1xo47YAf3dgpi

https://youtu.be/_I0L1fpPRYs?si=PSwCUnoHEDlQwBSv

23. Intergenerational Housing: KUVU, Cohabitation Platform

LINKS TO WP2 TRAINING MODULES

Sub-Module 8:
Network Building
and Community Engagement.

HASHTAGS

#Housing #Community #SocialConnection #CommunitySpa

NUMBER OF PARTICIPANTS

Over 200 people have used the service.

NETWORK OR PEOPLE INVOLVED

A project supported by people dedicated to improving the quality of life for others.

Behind the Kuvu project—driving, investing in, and sharing knowledge—many people are dedicated to this mission. Professionals in the fields of aging, health, law, technology, and education shape our daily work.

- Public administrations: regional governments, provincial councils, city halls.
- Universities (University of the Basque Country, University of Mondragón, University of Alicante).
- Financial institutions (banks).
- Nonprofit organizations.
- Professionals in the fields of longevity, health, law, technology, and education.

HIGHLIGHTS

- Adapted, affordable housing.
- Encourages intergenerational diversity and social connections, fostering personal fulfillment and interaction.
- For newcomers to the city, it helps them connect with local culture through trusted local hosts.

KEY CONSIDERATIONS

It is essential to establish a clear contract defining the terms of cohabitation and mutual commitments.

DESCRIPTION OF THE INITIATIVE

Kuvu is not a rental platform, but a platform for intergenerational cohabitation. Kuvu seeks to create a new model of social cohabitation that fosters the exchange of experiences, skills, shared experiences, and more.

Kuvu facilitates safe intergenerational cohabitation throughout Spain. Kuvu selects individuals and supports them throughout the cohabitation period to ensure that the person moving in is a good fit.

Kuvu helps people over 55 increase their income. Through intergenerational renting —by renting out a room in their home—people receive an average monthly income of 300 euros, which helps offset lower incomes.

Kuvu improves quality of life by reducing loneliness and social isolation.

Kuvu continuously monitors the entire living arrangement and offers mediation services in the event of problems or if the living arrangement fails. You can take advantage of a one-month trial period to ensure that you and your housemates are compatible.

Target audience: people over 55 and young students or those entering the workforce (firstprofessional experience).

OBJECTIVES

- To promote alternative forms of shared living by increasing the supply of affordable housing in cities.
- Encourage other forms of cohabitation by increasing the supply of affordable housing in cities and by working to lower average rent prices in major cities.

IMPLEMENTATION STEPS

1. Fill out a form and specify what you're looking for: renting a room or looking for one, where, and how long the arrangement might last.
2. Explain how you'd like to live together: daily routines, hobbies, preferences...
3. Kuvu selects and connects you only with people it deems compatible.
4. Meeting, and if both parties agree, Kuvu drafts the cohabitation agreement.

IMPLEMENTATION REQUIREMENTS

Partnership agreements with governments, companies, and organizations that help us promote the social enterprise, provide additional financial support to people over 55, alleviate unwanted loneliness, and give people the opportunity to access more affordable housing.

FURHTER INFORMATION

Link to access the platform: *https://dev.kuvu.eu/*

TESTIMONIALS

Madrid / 5 months of living together:
"Patricia and my mother have settled in perfectly. They have time to chat and watch TV together. When we go out with our children, we all have dinner together."

Madrid / 9 months of living together:
"I was far from home and missed my grandparents. Living with Pilar has been very pleasant for me because she treated me like her granddaughter, and I really appreciate her, as well as her whole family."

Quality of life and well-being of caregivers

Context

We cannot think about combating isolation among older adults without considering support for family caregivers or professional caregivers. [A family caregiver is someone who, as part of their personal life, supports a person who may or may not be a family member. A professional caregiver is someone who helps or supports others as part of their job. The professions involved are therefore diverse.] This is a real challenge we must all address in our respective countries, because combating social isolation means recreating spaces for interaction and connection so that every citizen feels a sense of responsibility for supporting their loved ones or neighbors. It means rethinking the social interactions and relational networks within our communities.

Moreover, being a caregiver or supporter of a loved one has a significant impact on many aspects of professional and personal life. Furthermore, studies show that in the future, more and more of us will be caregivers.

In France, according to a recent national survey conducted by the Collectif *Je T'aide* and included in the advocacy statement "Not Without the 11 Million Caregivers," 44% of caregivers report having difficulty balancing their caregiving responsibilities with their jobs, 64% believe that their loved one's illness has had an impact on their own health, 86% believe that caring for their loved one has affected the time they spend with their family, on leisure activities, and on themselves, and only 34.5% of caregivers say that they have been offered information, training, and respite care.

We can easily imagine that the situation is virtually the same in other European countries. According to Eurocarers, the European association representing caregivers, 80% of care in Europe is provided at home by family members or friends. This figure clearly highlights the overrepresentation of caregivers compared to medical and social care professionals.

In a study on corporate commitment to employee caregivers, France Stratégie noted that, among the millions of caregivers, the average age at which people begin providing care has dropped from 60 to 39 in just a few years, now affecting many working people. Thus, 50% of caregivers are employees, and it is estimated that by 2030, one in four working people will be a caregiver.

In light of our demographic challenges, particularly the aging population, the need for family caregivers and professional caregivers in both urban and rural areas continues to grow.

This is why we believe it is essential to work toward “caring for those who care,” so that they can continue to help their loved ones and so that anyone in need of assistance can find it.As the French Association of Caregivers reminds us, it is important “not to view family caregivers solely through the lens of the help they provide, but rather as individuals who have the right not to be reduced to or confined to this role of caregiver.”

That is why we wish to dedicate this space to presenting initiatives that support family caregivers and professional caregivers. These initiatives, which vary in nature and implementation, are presented to you to broaden the range of possibilities. There are assistance and support programs for caregivers led by associations, local governments, or cultural organizations; here are a few examples.

24. Well-being Fridays: Body and Health: I exercise, I eat well, I live better

LINKS TO WP2 TRAINING MODULES

Module 7:
Promoting the quality of life and the well-being of caregivers and professionals (prevention of burnout).

NUMBER OF PARTICIPANTS

The project aims to involve approximately 25 to 30 direct beneficiaries, with indirect benefits extending to families, caregivers, and the local community.

NETWORK OR PEOPLE INVOLVED

- **A volunteer association coordinating the project.**
- **A volunteer association focused on food:** to coordinate all initiatives related to nutrition.
- **The local community:** It can assist in identifying and providing a venue. It also helps with communication.
- **Other partners depending on the proposed activities.**
- **Isolated individuals in the area (primarily retirees).**

HASHTAGS

#Health #Sport #Well-being

HIGHLIGHTS

- Improved physical health: Regular exercise and physical activities help participants stay active, thereby reducing the risks associated with a sedentary lifestyle.
- Improved mental well-being: Activities such as social lunches, group exercises, and writing workshops promote emotional balance, reduce loneliness, and strengthen a sense of belonging.
- Community building: The project strengthens social ties within the neighborhood, encouraging interaction and mutual support among participants.
- Skill development: Participants gain new knowledge in nutrition, personal care, and practical skills such as sewing and DIY activities, which enhances their self-sufficiency.
- Productive well-being: Beneficiaries actively contribute to the social welfare system, fostering a sense of responsibility and ownership of their well-being.
- Cultural enrichment: Events such as book presentations and musical performances offer participants cultural exposure and intellectual stimulation.

KEY CONSIDERATIONS

- **Inclusivity:** Ensure that all participants, particularly those with limited mobility or cognitive impairments, can fully participate in the activities.
- **Sustainability:** Maintaining long-term engagement and participation, particularly with limited resources or funding.
- **Generational gap:** Bridge potential gaps between older and younger participants to ensure that all age groups reap the same benefits.
- **Safety:** Monitor physical activities to prevent injuries, particularly among older participants, and ensure that fall prevention measures are in place.
- **Nutritional diversity:** Provide meals that meet diverse dietary needs and preferences, particularly for those with specific health conditions.
- **Participant engagement:** Continuously adapt activities to maintain interest and avoid repetition, encouraging active and consistent participation.

DESCRIPTION OF THE INITIATIVE

This initiative aims to promote the well-being of families caring for dependent individuals through free meetings with experts and opportunities for families to share their experiences. The sessions, which will take place on Friday afternoons, provide a space for learning and personal growth, offering practical tools for daily life.

Through expressive movement, participants can explore new relationships with themselves (self-awareness) and with others (interpersonal), discovering ways to feel better through movement.

The nutrition workshops allow participants to acquire basic knowledge about nutrition, create a cookbook featuring affordable and eco-friendly recipe book, and to share this knowledge with their friends, loved ones, and families.

These friendly lunches, organized in partnership with a local organization, aim to foster a sense of community and sharing in a calm and trusting atmosphere, while promoting self-respect and respect for the environment.
Afternoon meetings are essential for relationship-building, dialogue, and community empowerment. Participants will feel part of a group and will contribute, through volunteering, to development of a generative social protection system based on healthy lifestyles. Topics covered may include: Staying Active / Basic First Aid / Essentials for a Home Medicine Cabinet / Fall Prevention / Protective Nutrition / Home Safety / Avoiding Scams / Safe Mobility…

In addition, personal care activities are organized with an expert esthetician, sewing workshops using corn dough, craft activities, and memory games. The experience is enriched by a writing workshop that brings together the participants' experiential contributions, guided by a qualified facilitator.

OBJECTIVES

- To promote physical, mental, and relational health through exercise, healthy eating, culture, and recreation.
- Facilitate the transfer of knowledge and tools.
- Encourage the exchange of skills.
- Strengthen a network of neighborhood relationships by expanding in terms of content, partnerships, and sustainability.
- Develop a generative social support system in which beneficiaries become the driving force behind the community center.

IMPLEMENTATION STEPS

1. Find partners for physical activity, nutrition, and other activities that will be offered.
2. Secure a venue capable of hosting these programs and accommodating all interested participants.
3. Develop a program with the older adults involved and prepare a communication plan.
4. Launch the initiatives.

IMPLEMENTATION REQUIREMENTS

- Offer activities that address issues related to motor skills, nutrition, learning, and social interaction.
- Find a suitable venue to host these various activities.
- Promote lunch as a time for socializing and nutrition education.
- Offer civic education seminars (on prevention, health education, cultural enrichment, community awareness, etc.).

FURTHER INFORMATION

To learn more about the project, here is a link to the page in Italian:
https://www.auserbologna.it/

TESTIMONIALS

Interviews with participants:
"What I find interesting is that there are various activities, both physical and, let's say, pseudo-cultural. They're educational, and there's a lot of variety, which I think is a real plus because doing the same thing all the time isn't good. Here, you can learn things you know little or nothing about."

"We did gymnastics, went for walks, listened to music—important music, symphonic music—and, as my friend said, we didn't feel left out but valued, which gave us a deep sense of self-worth. We are happier and more optimistic about the future."

25. Training Take Care: Caring for those who care

LINKS TO THE WP2 TRAINING MODULES

Module 7:
Promoting the quality of life and the well-being of caregivers and professionals (prevention of burnout).

NUMBER OF PARTICIPANTS

10 to 12 people maximum per training session.

HIGHLIGHTS

- Being able to assert one's own capabilities and limits.
- Having more drive and energy.
- Being able to identify the interpersonal and technical skills acquired in one's role as a caregiver.
- Find tips and tricks for taking care of yourself as a caregiver.
- Discover strategies and resources for embracing your emotions.
- All participants feel that they have value as individuals and that it is good to take care of oneself and meet one's own needs before caring for others.
- The vast majority of participants feel more alive when their bodies are filled with emotions.

HASHTAGS

#Training #Caregivers #Well-being

NETWORK OR PEOPLE INVOLVED

- A training organization: it delivers the training and provides support within the framework of the professional training.The training organization will be responsible for all administrative follow-up, the developed educational program, the evaluation of the training and the communication strategy for the initiative. A trainer will co-facilitate each training day alongside an artist-trainer.
- Two artist-trainers: they help develop the educational program alongside the trainer and co-facilitate the training.
- A third-place venue or other host location: Assists with promoting the initiative and is responsible for welcoming participants to the venue and ensuring the smooth running of "break times" (coffee/meals/ breaks). The venue's staff must help trainees feel at ease in a supportive environment.
- The network of local care and support organizations: They must inform professionals about the value of this training. They must serve as a liaison with the training organization.
- The network of associations and other organizations that work with family caregivers: they must inform family caregivers about the benefits of this training and help them find support solutions so they can free up four days. They must serve as the liaison with the training organization.

KEY POINTS

Since the training program is not a setting for psychotherapy, we must be highly vigilant regarding participants' potential need for psychological support which cannot be replaced by the program. It is therefore necessary to be able to refer individuals to support services.

DESCRIPTION OF THE INITIATIVE

The Take Care training program is a 4-day course offered to family caregivers and professional caregivers, with a pedagogical approach based on the arts and sensory awareness. Each day of this training is led by an artist-trainer accompanied by a trainer skilled in the analysis of professional practices. This duo of trainers will guide participants in developing their emotional and interpersonal skills so that they can subsequently find a healthy balance between their role as caregivers and the rest of their lives. Involved in this training are an artist who works with storytelling, text, and theatrical direction and an artist who focuses more on the body, movement, and the organic. This training takes place in a third place that provides the welcoming and safe environment necessary.

OBJECTIVES

- Strengthen the desire to take care of oneself.
- To better identify and embrace one's emotions.
- Discover tools and techniques for self-care.
- Feel re-energized or re-motivated.
- Feeling valued in your role as a caregiver.
- Becoming aware of your skills and strengthening your ability to take action.

IMPLEMENTATION STEPS

1. Find two artist-facilitators who meet the requirements.
2. Find a third place or another venue that offers a space large and comfortable enough for everyone.
3. Reach out to professional organizations in your area and to associations involved in caregiving.
4. Conduct the training (3 consecutive days followed by 1 day one month later).
5. Evaluate the quality and impact of the training with the trainees, trainers, and the host venue.

IMPLEMENTATION REQUIREMENTS

- Find an appropriate funding solution so that trainees do not bear the cost, whether through vocational training or other support from a local government, for example.
- Find a suitable place that is large enough, welcoming, and supportive.

FURTHER INFORMATION

For more information about the project, here is a link to the page in French: *https://culture-sante-na.com/nos-expertises/formations/take-care/*

For more information in English, you can contact the Culture & Health Hub team directly at contact@culture-sante-na.com

TESTIMONIALS

Anne, intern: "I discovered myself. I discovered something within me that I wasn't aware of. You helped it mature and come to the surface—thank you."

Carole, intern:
"I didn't think talking about my role as a caregiver would be so painful."

Reine, participant:
"A discovery about myself that I didn't know. I'm discovering myself, and it's a real gift."

Sarah, participant: "Finally, I see the beauty in things. I was able to talk about myself. It feels so good to allow myself to feel moments of happiness too! I've found some keys along this journey. I have the right to stop feeling like I'm always the one helping others."

26. Rural Day Care Center (CRAD)

LINKS TO THE WP2 TRAINING MODULES

Module 7:
Promoting the quality of life and well-being of caregivers and professionals (prevention of burnout).

NUMBER OF PARTICIPANTS

The capacity of each center is tailored to the specific characteristics of the rural area in which it is located.

NETWORK OR PEOPLE INVOLVED

- Older adults and their families.
- Municipal social services center and case manager.
- Professionals at rural daycare centers.

HASHTAGS

#MentalHealth #Well-being #Burnout #RuralEnvironment

HIGHLIGHTS

- These centers have a positive impact on older adults, improving their independence, socialization, and emotional well-being through various activities. These centers enable older adults to stay active and connected, thereby reducing isolation and promoting active aging. Furthermore, because they are compatible with other resources in the social services portfolio, they are a for keeping older adults in their home and community environments.
- Another benefit is the respite provided to family caregivers, who often face high levels of stress and burnout. These centers provide them with a space where they can rest, manage other aspects of their lives, and receive support. The quality of life of both users and caregivers is thereby improved.
- In Spain, day care for dependent individuals is guaranteed by the system for promoting autonomy and addressing dependency and constitutes a subjective right. This service involves a co-payment by users, while the remainder of the funding is provided by various government agencies.

KEY CONSIDERATIONS

- Working in rural areas can discourage the demandfrom professionals, which in turn can make it difficult to recruit specialized staff for care in the centers.
- Although the service is partially funded by public authorities, the financial contribution required of users can act as a barrier to accessing the service.
- Similarly, a reluctance to commit to daily attendance can be another barrier to accessing the service.

DESCRIPTION OF THE INITIATIVE

As part of the "Breaking Distances" program, the Rural Day Care Centers (CRAD) in Asturias are non-residential facilities that provide comprehensive daytime care for elderly people who are dependent or have disabilities, particularly in rural areas that are difficult to access and have a scattered population. Their main objective is to enable older adults to remain in their familiar surroundings by promoting their independence and providing respite for the families who care for them.

OBJECTIVES

Objectives aimed at improving the quality of life for older adults:

- To help individuals remain in their own environment.
- Promote independence and preserve autonomy.
- Provide comprehensive and personalized care.
- Encourage the development of personal skills and healthy lifestyle habits.
- Promote the social integration of isolated older adults living in rural areas.

Objectives aimed at the well-being of family caregivers:

- Prevent burnout and withdrawal among members of the informal care network.
- Provide respite and support to families.

IMPLEMENTATION STEPS

1. Interdisciplinary assessment of the user's needs and potential, as well as the informal support network, using technical tools.
2. Development and implementation of a personalized care plan, with the participation and consent of the user or their family where applicable, which will include:

- Assistance with activities of daily living.
- Functional therapies.
- Cognitive therapies.
- Psycho-emotional therapies.
- Health education activities.
- Socialization therapies.

3. Monitoring and adapting the personalized care plan to changes in the situation, in consultation with the user.
4. Support services for families: information, counseling, training, and support.
5. Meal delivery and transportation services.
6. Additional services: hair salon, pedicure, laundry, and meal delivery.

IMPLEMENTATION REQUIREMENTS

- Assessment of the needs of the population in the neighborhood or municipality.
- Secure an accessible and fully equipped facility: center, transportation, and equipment.
- Training of the center's professional staff.
- Political and financial context: regulations and funding for copayments.

FURTHER INFORMATION

https://socialasturias.asturias.es/servicio-de-centro-rural-de-apoyo-diurno

https://socialasturias.asturias.es/documents/38532/139985/rompiendo_distancias25.pdf/c2c86f7c-8e98-ccdc-fa3d-43a9475aa491?t=1631808912142

TESTIMONIALS

** Excerpts from the program "Conexión Asturias" (Asturias Public Broadcasting Corporation)

Mayor of La Reguera: *"These centers were created to address this need: to relieve families of the burden of caring for the elderly."*

Vice President of the General Assembly of the Principality of Asturias: *"This center, especially with 14 people, in a setting as rural as this one, I believe it is indispensable. In many places, they are not valued, but I think we must be given the full recognition they deserve."*

Family member: *"The person is well cared for; we know that if there's any concern, we're notified immediately. For us, that's a very positive thing."*

Elderly person: *"Alone at home, you get bored, you don't do anything, you don't keep your mind active. And it's necessary to keep your mind active. I'm very grateful and I love them like family (referring to the center's staff)."*

Elderly person: *"For me, it's important to keep interacting with people, because otherwise, my wife and I are left alone at home."*

27. OKencasa: Psychosocial support for family caregivers of dependent older adults

LINKS TO WP2 TRAINING MODULES

Module 7:
Promoting quality of life and the well-being of caregivers and professionals (prevention of burnout).

NUMBER OF PARTICIPANTS

Currently, the service supports 600 family caregivers and plans to support 5,400 per month over the next three years in the Basque Country alone, with potential for national and international expansion.

NETWORK OR PEOPLE INVOLVED

1. OKencasa (comprehensive service management and multidisciplinary team).
2. Basque Government (funding and public rollout of the service).
3. Social and healthcare professionals and universities (University of the Basque Country and London School of Economics).
4. Public administrations interested in integrating OKencasa into their service offerings.
5. Potentially, but not currently: social actors (associations, mutual aid societies, etc.) that contract the service to support their caregiver communities.

HASHTAGS

#Digital #Caregivers #Support

HIGHLIGHTS

- Reduction in care time (up to 9.5 hours/week), improved well-being, and increased self-efficacy among family caregivers.
- Validated methodology with clinical and emotional impact, with evidence showing a reduction in symptoms of stress, anxiety, and depression, while improving the emotional quality of life of family caregivers, reducing the feelings of exhaustion and isolation, promoting emotional resilience and improving their satisfaction with the care they provide.
- Strong return on investment for public institutions in terms of labor market costs.
- reduced absenteeism – use of resources – telecare, nursing homes, day centers... – and quality of life.
- Potential for methodological transfer to other caregiver support programs: a scalable and adaptable to other regions and contexts.

KEY CONSIDERATIONS

- Limited reach among marginalized populations due to a lack of strong institutional support.
- Strengthen institutional involvement and political commitment to ensure the program's long-term sustainability.
- Ensure the model's sustainability beyond public funding.
- Bridging the digital divide for a group of potential users who face barriers to accessing technology, through accessible tools and personalized support.

DESCRIPTION OF THE INITIATIVE

OKencasa is a remote support program that offers psychosocial and educational support to informal caregivers of elderly people in need of care. Through an accessible mobile app and a user-centered approach, the program offers personalized tools for self-care, training, and professional counseling, addressing the emotional exhaustion and burnout experienced by this group while promoting the caregiver's well-being and a Improved quality of care provided.

Although the tool is designed for family caregivers, its methodology can serve as a reference for public entities or professional services seeking to strengthen their support strategies in the care sector.

Specifically, the program provides caregivers with the following resources:

- Individual sessions with a specialist: regular online appointments with a family caregiver support professional who provides guidance throughout the process.
- Periodic burnout assessment: every four months, an assessment is conducted to evaluate the caregiver's well-being.
- Online community of caregivers: a virtual space to share experiences and feel supported by others in similar situations.
- Online training and skill development: access to educational content to strengthen skills in daily care and promote self-care.
- Tools for organizing care: access to resources that facilitate the planning and coordination of daily care-related tasks.

OBJECTIVES

- Improve caregivers' mental health and well-being.
- Reduce the burden and stress associated with caregiving tasks.
- Strengthen caregivers' capacity and autonomy in their daily lives.
- Prevent social isolation and involuntary loneliness.
- Improve the quality of care received by older adults with care needs and support their ability to remain in their own homes, promoting a dignified life in the environment of their choice.
- Support public institutions in ensuring the sustainability of the healthcare system.

IMPLEMENTATION STEPS

- Caregiver-centered research and design.
- Development of a proprietary methodology and scientific validation (in collaboration with research teams from the Public University of the Basque Country and the London School of Economics).
- Pilot phase with caregivers, through a 9-month randomized clinical trial involving 210 families, approved by the Basque Country Clinical Research Ethics Committee.
- Implementation of the service with the Basque Government (regional government).
- Ongoing evaluation and adaptation of the service.
- Gradual expansion to other regions or countries.

IMPLEMENTATION REQUIREMENTS

OKencasa is a comprehensive "turnkey" service, meaning it is delivered fully ready to launch, without the institution having to handle any operational or management tasks. The service includes identifying eligible families, providing support directly through the app, and managing the service in its entirety.

Its implementation requires institutional commitment to integrate it into the public strategy for supporting caregivers, as well as the provision of stable funding to ensure its long-term sustainability.

FURTHER INFORMATION

https://okencasa.com/ (website available in Basque and Spanish)

TESTIMONIAL

M.C.L.I. takes care of her husband in Ordizia: *"It's an invaluable source of support. There, you find understanding and affection; you learn to value yourself to take care of ourselves and to care for others. It's very special and rewarding. We're lucky to be a part of it. I am grateful every day for the opportunity to participate."*

28. Assessment tool and prevention of burnout risk: I help, I assess myself

LINKS TO THE WP2 TRAINING MODULES

Module 7:
Promoting quality of life and well-being of caregivers and professionals (prevention of burnout).

HASHTAGS

#Caregivers #Assessment #Well-being

NUMBER OF PARTICIPANTS

Approximately 300 people.

NETWORK OR PEOPLE INVOLVED

- The project brings together various stakeholders who pool their expertise.
- Foundations focused on caregivers and supporting vulnerable populations.
- Research centers.
- Project management companies and the creation of digital resources.

HIGHLIGHTS

Caregivers can recognize their exhaustion before it's too late Caregivers can take steps to get some respite.

KEY CONSIDERATIONS

This tool lacks visibility due to the presence of other existing systems.

DESCRIPTION OF THE INITIATIVE

The "I Help, I Assess Myself" initiative is a digital app that assesses the caregiver's health status.

In this app, a simple, anonymous, and free questionnaire is provided to caregivers, covering various topics related to the main areas of the caregiver's life that can lead to burnout: physical, mental, and socio-environmental. This questionnaire generates a personalized assessment illustrated with a burnout risk score ranging from 0 to 100.

Based on the assessment, recommendations and contact information are provided to caregivers to guide them toward professional resources and support solutions.

OBJECTIVES

- To help family members become aware of the risk of burnout.
- To help family members track burnout over time.
- To enable family members to access respite care and appropriate support services.
- To enable professionals who support family caregivers to raise awareness of the risk of burnout as part of a comprehensive health and awareness initiative.

IMPLEMENTATION STEPS

1. Find partners to carry out the project and funders to finance the app.
2. Conduct a comprehensive communication campaign to disseminate the information.
3. Engage professionals in advance who will be able to support caregivers who come forward.
4. Promote and communicate about the digital tool.

IMPLEMENTATION REQUIREMENTS

We need to rely on healthcare professionals to create and analyze caregiver assessments, but we must also find a partner capable of managing the IT and digital aspects of the application. Funding is also needed to make the app free of charge.

FURTHER INFORMATION

https://www.france-repit.fr/ca_vous_interesse/jaide-je-mevalue-outil-devaluation-et-de-prevention-du-risque-depuisement/

TESTIMONIALS

Samira, 43, mother of an autistic child:
"The tool helped me take I realized I was completely neglecting my health. I kept putting off all my medical appointments. The advice encouraged me to see a doctor, and we discovered high blood pressure that required treatment. Without this realization, I would have continued to ignore the signals my body was sending me."

Dr. Laurent Martin, geriatrician:
"This tool greatly facilitates dialogue with caregivers. It allows us to address topics that some people don't dare to bring up spontaneously during consultations. I systematically recommend it to the families of the patients I care for."

29. Listening and support service

Comprehensive care for family members of people with dementia in Navarre (A.F.A.N. Association of Family Members of People with Alzheimer's and Other Dementias in Navarre).

LINKS TO THE WP2 TRAINING MODULES

Module 7:
Promoting quality of life and the well-being of caregivers and professionals (prevention of burnout).

HASHTAGS

#FamilyCaregivers #Dementia #Support #Training

NUMBER OF PARTICIPANTS

- According to the 2023 annual report:
- 539 people received counseling services.
- 182 people participated in support groups.
- 430 people benefited from the training program.

NETWORK OR PEOPLE INVOLVED

- The AFAN team consists of health psychologists, a social worker, and administrative staff.
- Volunteers who serve on the board of directors to support the technical team in management.
- Partners from other organizations and entities in the sector. For example: in rural areas, we must work with social services and health centers to be able to care for people who leave our facilities.

HIGHLIGHTS

- Improving the emotional well-being of caregivers.
- Building a community of solidarity among families.
- Improved understanding and management of the disease.
- Promoting the independence and well-being of caregivers.

KEY CONSIDERATIONS

- Risk of overburdening family caregivers.
- Need to adapt to the different stages of the disease and to new patient profiles.
- Difficulties participating due to personal or logistical reasons.
- Maintaining partners' motivation and commitment.
- Lack of public awareness of the AFAN resource.
- Reliance on grants.

DESCRIPTION OF THE INITIATIVE

The AFAN team provides ongoing support to family caregivers of people with dementia through individual psychological counseling, support groups, and training sessions. These activities are designed to address the emotional and educational needs of caregivers by fostering a supportive and understanding environment. Various types of volunteer opportunities are also available, such as home visits and administrative assistance. (AFAN aims to be a leading organization in this field throughout Navarre. That is why it also operates in rural areas, offering the same type of care as the centers in Pamplona and Tudela).

OBJECTIVES

- To provide emotional and psychological support to families.
- To facilitate the creation of a support network among families.
- Provide training to improve the quality of care.
- Raise community awareness about dementia and its effects.

IMPLEMENTATION STEPS

1. Needs Assessment: An initial assessment designed to identify the specific needs of each family.
2. Psychoeducation: basic and general information about the illness.
3. Individual psychological care: scheduled sessions to provide emotional support to caregivers.
4. Support groups: regular meetings where caregivers share their experiences and receive advice.
5. Training: workshops and educational sessions on managing dementia and caregiver training. Specific topics vary from year to year, or training courses are organized upon request. Most training sessions are intended for families, but training is also offered to professionals.
6. Follow-up: Families contact AFAN when they deem it appropriate and based on their needs. Given the nature of the disease—which is degenerative, progressive, and variable in terms of symptoms—the frequency of care or families' use of the association's services varies.

IMPLEMENTATION REQUIREMENTS

- Material resources: meeting space, training materials, and psychological management tools.
- Human resources: psychology professionals with qualifications in the health field and knowledge of dementia, social workers, administrative staff, and volunteers.
- Policies: compliance with regulations regarding psychological care and data management.

FURTHER INFORMATION

https://www.alzheimernavarra.com/

TESTIMONIALS

"The best support I've ever had has been from the AFAN association."

"Suddenly, you realize that your mother is no longer your mother, that she is nothing more than a body, and my father was consumed by caring for her. He couldn't take it anymore. AFAN and its support groups have helped us and continue to help us a lot to fight loneliness. In this society, it's very important to overcome the fear of caring for people with Alzheimer's disease. I encourage you to lend a hand to that neighbor or relative you surely have nearby. The only advice I can give you is to contact AFAN. They are the ones who know. Every case is unique."

https://www.facebook.com/watch/?v=1175677326845926

https://www.diariodenavarra.es/noticias/navarra/2024/09/20/amaia-49-anos-duro-mi-madre-no-me-reconoce-cree-hermana-pequena-622472-300.html

30. Listening space "We Caregivers"

LINKS TO WP2 TRAINING MODULES

Module 7:
Promoting quality of life and well-being of caregivers and professionals (prevention of burnout).

NUMBER OF PARTICIPANTS

In 2024, 8 caregivers were involved, with diverse backgrounds and varying levels of support.

NETWORK OR PEOPLE INVOLVED

- Volunteers and Caregivers.
- Public health services.
- Social services.
- Community organizations.

HASHTAGS

#Caregivers #Listening #Volunteering #SocialSupport

HIGHLIGHTS

Strengths were highlighted by active volunteers:

- Promotes social and personal openness
- Identifying caregivers not known to social services.
- Combating loneliness and addressing the need for connection.
- Promoting solidarity among peers.
- Supporting caregivers in coming to terms with their new situation, asking for help, and taking care of themselves.
- Using active listening, valuing the person and their experience without judgment or prejudice (core value).
- Supporting the caregiver in expressing their requests and needs when the illness is viewed as a private matter and any assistance may be perceived as an intrusion.
- Access to "another perspective," an important and constructive element for caregivers, volunteers, and institutions.

KEY CONSIDERATIONS

- Adherence to the values described in the strengths (above);
- This is not the only support space but rather offers a complementary support space that draws on the power of conversation and peer-to-peer exchange;
- One of the challenges is often dealing with the urgency of requests given the response times.
- Support caregivers in becoming active agents rather than passive recipients, capable of bouncing back, taking care of themselves, recognizing their own desires, and fulfilling their own wishes;
- The vulnerabilities of caregivers (advanced age, prolonged care periods, etc.) must be identified to help them find appropriate solutions;
- Encourage telephone consultations for those who are unable to travel;
- It is necessary to expand communication about the existence of these listening spaces so that everyone can have access to them.

DESCRIPTION OF THE INITIATIVE

The project stems from the conviction that “caring for…” must be considered a community commitment, regardless of whether it is carried out by a caregiver, a family, or the Services. The pandemic, in its extreme negativity, has brought care back into the spotlight. Care, in its many dimensions (social, health, educational), has often been overlooked. The gradual aging of the population and the rise in chronic and degenerative diseases are leading to a growing need for care, which requires recognition and appreciation of those within the “family” who provide that care. Recognizing that family caregivers cannot and should not be left alone in this task, the creation of a dedicated listening space represents a concrete step toward acknowledging, supporting, and promoting their role. It is equally important to value the very experience of being a caregiver.

This is why ASC InSieme and the Bologna Local Health Authority (AUSL), Reno Lavino Samoggia district, have supported and promoted the opening of listening spaces designed “by caregivers for caregivers.” These are places where one can speak freely and be welcomed without judgment by those who understand the experience of caregiving.

Peer support has a special power: it doesn’t offer ready-made solutions, but provides genuine understanding. Sharing one’s experience with those who know what it means to “be there” every day alongside a vulnerable person helps one feel less alone, more clear-headed, and stronger.

The support workers in the listening space have completed training designed to enhance their sensitivity and attentiveness as listeners, enabling them to offer a welcoming, mindful, and respectful presence.

OBJECTIVES

The support center for family caregivers is based on the guiding principles of mutuality, mutual support, active listening, and shared assistance. It is designed to support individuals and families caring for a family member or an acquaintance who is partially or totally dependent, and has set the following objectives:

- To listen to, connect with, understand, and support family caregivers.
- Identify situations of vulnerability and connect them with social and health services.
- To recognize and value the role of family caregivers in society.
- Preventing isolation and loneliness among caregivers.
- Promote the psychosocial well-being of caregivers through active listening and mutual support.
- Connect family caregivers with professional services for more structured support.
- Recognize the essential role of family caregivers in society.
- Promote caregiving as a community value.
- Refer caregivers to professional services for additional assistance.

IMPLEMENTATION STEPS

1. Phase 1: Create a group of volunteer caregivers.
2. Phase 2: Specialized training for caregivers involved in the project: 16 hours of training in active listening and supervision of specific cases every two months.
3. Phase 3: Opening of listening centers in designated areas.
4. Phase 4: Public presentation of the report by health authorities.

IMPLEMENTATION REQUIREMENTS

To carry out the activity, volunteers coordinated by an institutional representative are required. In terms of equipment, the following is required:

- Comfortable rooms or lounges that encourage listening and allow people to speak freely;
- A laptop with an internet connection and a printer;
- Materials to promote and raise awareness of the listening centers: portable signs with the name and logo of the listening centers to be placed in promotional locations, brochures and informational materials.

FURTHER INFORMATION

https://www.ascinsieme.it/index.php/content/view/fc67a00e2h/progetto-cure-familiari

TESTIMONIALS

"When I entered the listening space, I felt overwhelmed. Talking to someone who truly understands what it means to be a caregiver made me feel less alone..."

"I didn't think talking with other caregivers could do so much good. In the listening space, I found understanding and a new perspective on my daily fatigue. Thank you to those who make all of this possible."

"Yesterday, I was glad to have participated in the listening space, because I was able to reflect on the question of whether speaking and listening are a temporary interlude or a way of being, of living, and of being human. So I answer that I believe listening is, as someone said, a revolutionary political act. In this harsh, chaotic world..."

Words from a volunteer caregiver: *"Let's stop, listen, listen to each other, and talk."*

"Today, I went to the listening space in Crespellano; I felt very comfortable there, and I'd like to go back..."

"Today, my father was very happy. I saw him come home beaming. They also invited him to all the other activities for caregivers. He was happy! He realized he wasn't alone... A user of the service explained how the respite care service allowed him to return to the theater after five years, because he received the help he needed to manage the responsibility of caregiving."

31. Respite service

LINKS TO WP2 TRAINING MODULES

Module 7:
Promoting quality of life and the well-being of caregivers and professionals (prevention of burnout).

HASHTAGS

#Caregivers #Family #Support

NUMBER OF PARTICIPANTS

The service is available to residents of the four municipalities, with no limit on the number of participants.

NETWORK OR PEOPLE INVOLVED

- Social service providers.
- Support staff (including agency workers and volunteers)
- Family caregivers.
- Local community organizations.
- Volunteers supporting the elderly and people with disabilities.

HIGHLIGHTS

- The service allows family caregivers to focus on their own well-being and enjoy moments of rest and leisure.
- It helps caregivers manage periods of physical and mental overload.
- Having the same caregivers strengthens the bond between the caregiver and the older adult.

KEY CONSIDERATIONS

- The availability of human resources, including volunteers and agency workers, is essential to the success of the service.
- Trusting external caregivers to handle care situations independently can be a challenge, as caregivers may feel uneasy about leaving their loved ones in the care of others people.

DESCRIPTION OF THE INITIATIVE

The respite care service is designed to provide a break for families caring for dependent elderly individuals or people with disabilities. It offers practical, flexible, and personalized support that allows caregivers to take care of themselves as well, by lightening their physical and emotional burden.

The service provides home visits by qualified staff (caregivers, educators, and home health aides), who care for the person receiving assistance for a few hours a week or on weekends, allowing the primary caregiver to rest, go out, or attend to personal matters. Each visit is preceded by a needs assessment to ensure personalized support.

In Italy, there are over 7 million caregivers, often without any support. 56% of them would like to be able to take a break, even if only temporarily, from their caregiving duties. The respite care service was created specifically to meet this need.

Where it is already active, such as in Terre d'Argine, 80% of caregivers reported an improvement in their physical and mental well-being, and 65% used the time freed up to take care of themselves, socialize, or simply rest.

Inspired by a French model ("baluchonnage"), the service is now available at reduced rates or free of charge depending on income and is also accessible through corporate health insurance. In addition to supporting families, it creates new job opportunities for trained caregivers. It is an innovative model a scalable model that highlights the value of in-home care and promotes a society that is more attentive, supportive, and responsive to people's real needs.

OBJECTIVES

- Provide respite for family caregivers.
- To provide opportunities for rest (4 hours per week, weekends, or vacation periods).
- To alleviate the burden on caregivers and ensure the well-being of both caregivers and older adults.

IMPLEMENTATION STEPS

1. The service is organized according to priority guidelines provided by public social services.
2. Home care is provided based on the specific care needs and circumstances of the elderly.

IMPLEMENTATION REQUIREMENTS

- Support from local municipalities is essential to fund the project and ensure the availability of the necessary human resources.
- Adequate funding must be allocated at the start of the project to cover operational costs.

FURTHER INFORMATION

https://www.anzianienonsolo.it/online/servizi-di-sollievo/

https://personemagazine.it/sostegno-ai-caregiver-quando-il-sollievo-e-una-boccata-daria/

Tools

Isola-repère

The Isola-repère tool was designed as a resource for community awareness regarding social isolation. It is not intended to intervene directly with individuals at risk, but rather to prevent isolation and foster a shared awareness within the community, making it easier to recognize situations of isolation and respond appropriately.

Its goal is to promote early detection and facilitate the activation of existing support networks.

The tool takes the form of a bookmark accessible to both support professionals (in health, social, or community services) and the general public. It can be made available in high-traffic locations such as pharmacies, doctors' offices, community centers, stores, or waiting rooms, ensuring it is easily accessible and user-friendly.

Each copy can be customized with the contact information of local organizations and services to contact in case need. It thus becomes a simple and practical resource that provides clear guidance on who to contact when a potential situation of social isolation is identified.

Ultimately, Isola-repère aims to strengthen the community's shared responsibility in addressing social isolation. It helps both professionals and residents develop the ability to recognize the signs and refer them to the appropriate authorities, thereby fostering the creation of more attentive, supportive, and connected environments.

GINKGO
The social link factory

Isola-spot

A tool to raise awareness about the risk of isolation among older adults

- [ ] Have you noticed a change in your neighbor's behavior?
- [ ] Has someone you know told you they'd like to have more visitors?
- [ ] Does your friend still go out as often as before?
- [ ] Is your neighbor still taking care of their home and garden?
- [ ] Have you noticed that mail is piling up at your neighbor's house even though she's home?
- [ ] Is your loved one still taking good care of themselves?
- [ ] Have you noticed any difficulties in verbal communication with your neighbor?

Who to contact?

.....

.....

.....

.....

.....

.....

Social isolation can have a significant impact on the physical and emotional health of older adults. Often, the signs are subtle and may go unnoticed. Paying attention to small changes in behaviour, habits, or communication can help us identify situations where isolation may be a concern and take action to provide support and com-panionship. This tool has been designed to encourage a more attentive and mindful approach toward the older adults around us.

www.ginkgo-project.eu

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Co-funded by the European Union

A tool to enrich your interactions

As part of your work or volunteer experience, you will be supporting a senior or regularly calling an older person to offer support... To do this, you need inspiration to enrich your conversations.

In day-to-day support, difficulties may arise in starting or maintaining a conversation, particularly when the person is experiencing increased loneliness or is going through a difficult emotional period, such as sadness or discouragement. These situations can complicate the formation of a bond and limit the depth of interactions.

In this context, the tool for improving interactions is designed as a resource for the professional, the caregiver, or the support provider. It aims to facilitate the initiation and continuation of more meaningful conversations, fostering a climate of trust that allows the relationship to progress gradually and the intervention. It is by no means a questionnaire, a formal assessment tool, or a means of collecting information in a structured manner; rather, it should be understood as a flexible guide designed to steer the conversation and suggest ideas or topics that can open up new avenues for dialogue. Its value lies in its ability to support the meeting, encourage active listening, and help build a relationship of trust.

Through a visual representation organized around different aspects of a person's life, the tool encourages a focus not only on social and health needs, but also on interests, desires, abilities, memories, and aspirations. It thus helps to strengthen a more personalized model of care and support, centered on the individual and consistent with their life story.

GINKGO
The social link factory

A tool to enrich your interactions

WHAT?

This tool is designed to foster meaningful interactions between older adults and professional caregivers, with the aim of improving the support provided.

WHY?

It allows us to build on people's desires, wishes, and abilities in order to better tailor our programmes and social activities.

HOW?

The different tabs guide you through a range of topics that can help spark discussions with the person. It is not necessary to ask all the questions; this booklet is intended as a source of inspiration rather than a questionnaire.

OLDER ADULTS

LIFESTYLE
What would your ideal day look like (routines, pets, visitors...)?

PERSONAL HISTORY
What would you like us to share about your personal story? (work, places, pets, nicknames...)

WISHES
What would you miss? What would you like to do for yourself?

NEEDS
What do you need? What might worry or upset you? What would make it easier for you to go out?

HEALTH
Do you take care of your health? Do you feel independent or dependent?

RELATIONSHIP
Do you enjoy interacting with other people? Do you know your neighbors and people in the neighborhood?

LIVING SPACE
How do you feel at home? Have you lived here for a long time? Do you usually go out a bit?

LEISURE
How do you spend your free time? (books, radio, sports, music, gardening...)

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PERSONAL HISTORY

- In what year were you born?
- Where?
- What was your profession?
- What word, if any, best describes you?
- Your life story: how would you describe it?
- What are your favorite places: those where you've lived and those you've visited?
- What would you like us to know about you?
- What is the one thing people should remember about you?
- Have you ever had a nickname?
- Did you ever have a pet?
- Have you ever volunteered, or do you still volunteer?
- In which field?

LIFESTYLE

Tell me about your day:

- What would your ideal day look like?
- Do you have any habits?
- What makes you feel most fulfilled?
- What makes you happy?
- Do you have a pet?

WISHES

- What would you miss?
- What would you like to do for yourself?
- What are your plans? Your expectations?

HEALTH (SELF-CARE)

- Do you take care of your health?
- How do you take care of yourself?
- Do you feel independent?
  > If so, in what way?
- Do you feel dependent?
  > If so, in what way?

LEISURE

- How do you spend your free time?
- Do you like reading the newspaper, books, or comic books?
- Do you watch TV? What do you like to watch?
- Do you listen to the radio? Which station?
- Do you listen to music? Who is your favorite singer?
- Did you use to play sports? What about now?
- Are you creative?
- Do you like nature/gardening?

LIVING SPACE

- How do you feel at home?
- Have you lived here for a long time?
- Do you usually go out?
- Do you like to go for walks?
- How do you view our society?
- Do you feel comfortable in this society?
- What does aging mean to you?

RELATIONSHIPS

- Do you enjoy being around other people?
- Do you get visitors from time to time?
- Do you know your neighbors and people in the neighborhood?
- Do you get along well with your neighbors?
- Do you prefer to do things on your own or would you like to do them with someone?
- Do you have someone to share your hobbies or activities with?
- Who do you see most often?
- Are you satisfied with your relationships, or are there people you would like to see more often?
- Are you still in touch with your family?

NEEDS

- What do you need?
- What kinds of things might worry or upset you?
- What would make it easier for you to go out?

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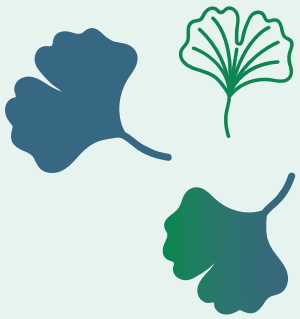

The GINKGO project partners:

- Etcharry Training and Development, Ustaritz, France
- Community Social Action Center, Urruña, France
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- Public University of Navarra, Pampelune, Spain
- Gizarte Zerbitzuen Mankomunitatea, Etxalar, Spain
- University of Bologna, Italia
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