Peer to Peer Support Fostering Active Aging (2014-2016)

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VWP 3: European Report

Comparative Report on Active Ageing Practices and Current Needs of Older Adults above 55 Years in Austria, Denmark, France, Poland, Slovenia, and Spain

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## Cite this report:

1 Introduction to active ageing

Population ageing is one of Europe’s greatest triumphs and at the same time one of the greatest challenges faced in the 21st century. The EU-population is ageing fast and in this context it is necessary to solve numerous problems and also reflect a lot of opportunities. An increasing population aged over 55 years deserves careful attention. Certain barriers that prevent the full participation of older people in society have to be removed in the future and ways of actively engaging in society have to be promoted.

Looking at the European ageing population, it becomes clear that the European Union’s population structure is changing and becoming progressively older – there were slightly more than 87 million people aged 65 and over in 2010 in the EU-27, some 17.4% of the total population (Eurostat 2012). These latest figures can be compared with data from the year 1985, when there were 59.3 million persons aged 65 and over in the EU-27 (12.8% of the total population). Pensions are regulated according to the years of income in many European countries.

In the 1960ies sociologists have started advancing and developing theories about active ageing. Since then the representatives of two theory paradigms – the activity theory and the disengagement theory – have been arguing with each other.

Advocates of the activity theory say that the level of satisfaction in old age correlates to one’s activities. The disengagement theory states on the contrary that in old age people detach from previous social roles and that this disengagement process is on the one hand individually desired but on the other hand also socially desired, and that this process of detaching from one’s social roles leads to satisfaction in old age.

Activity theorists hold their main ideology of being and staying active (at all costs) up, while disengagement theorists put in the focus that older people have the right to withdraw from certain roles (in working life, culture or politics) in order for younger generations to find their place.

Researchers have not been able to resolve the conflict between these two contradictory paradigms in ageing research and have been unable to clarify whether or not quality of life and satisfaction in old age are a consequence of being active or on the contrary if being active generally leads to higher satisfaction in life. Both ways active ageing and healthy ageing are closely related.

When thinking about the active ageing discourse, it becomes clear that active ageing is a transversal issue addressed in several discourses: health education, social and health inequalities, empowerment, health promotion, and health literacy.
Table 1: Discourses

Source: Own illustration

Health literacy can be understood as an educational tool to empower individuals, inform them, and enlighten them. Active ageing and healthy ageing education is about understanding what produces health and teaching older people so that they can take action and make decisions after a training course.

The PPS-project focuses on active ageing and especially on active ageing education / health literacy in old age.

The current study aims at supporting the development of a useful active ageing training programme in the respective local communities across six countries of the EU for older adults aged 55+: the PPS project will develop a face-to-face training programme (30 hours) on active ageing and an e-learning training (in five modules).

According to health literacy researchers there are three forms of literacy (Wills et al. 2013):

- Functional literacy – ability to read, write, and count
- Interactive literacy – ability to discuss
- Critical literacy – ability to assess, appraise, and evaluate information
According to this differentiation an active ageing training course has to reach the critical literacy level in which information is assessed and questions like “Why is this relevant to my life?” are asked.

The basic principles which must be applied in such a training course are illustrated below: older people must find information, understand information, assess whether or not it is relevant to their context and life, and in the end apply the information. This needs to be taken into consideration in the planning process (see Table 2).

Table 2: Basic principles of health literacy

| Find | Understand | Assess | Apply |

Source: Own illustration

Apart from receptive skills (to take up information) also expressive skills (to express knowledge and opinions) need to be promoted in the PPS-training course.

From previous research and experience it is known that there is confusion about the concept of Active Ageing and the vast variety of topics it covers. The resulting effects are unclear action strategies and sometimes a lack of political involvement. However, since Active Ageing is an open concept, it allows a degree of variation in the piloting of the training course.
2 Research question and methods

The main research questions of this study are: What is active ageing education and how responsive are older adults to active ageing education? How can active ageing trainings/courses be integrated into local communities?

The PPS-approach to the topic of active ageing was explorative in nature, using a triangulation of research methods for exploration: a mix of quantitative and qualitative methods of empirical research. Methodological triangulation involves the use of multiple qualitative and quantitative methods to study a topic, like results from quantitative surveys, focus group discussions, and qualitative interviews (Olsen, 2004; Golafshani, 2003). The results are compared to see if similar results can be found. If conclusions from each of the methods are the same, then validity is established. The benefits of triangulation are “increasing confidence in research data, creating innovative ways of understanding a phenomenon, revealing unique findings, challenging or integrating theories, and providing a clearer understanding of the problem” (Thurmond, 2001, p. 254).

In total 933 older adults above the age of 55 years participated in the research of the PPS-project from May 2014 to October 2014 in 57 single interventions (see Table 3).

Table 3: Overview of empirical work

<table>
<thead>
<tr>
<th>No.</th>
<th>Country</th>
<th>Empirical Work</th>
<th>Number</th>
<th>No. of total participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Austria</td>
<td>Personal interviews</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>Denmark</td>
<td>Personal interviews</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>3</td>
<td>France</td>
<td>Personal interviews</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Poland</td>
<td>Personal interviews</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>Slovenia</td>
<td>Personal interviews</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Spain</td>
<td>Personal interviews</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>7</td>
<td>Austria</td>
<td>Focus group discussions</td>
<td>4</td>
<td>16</td>
</tr>
<tr>
<td>8</td>
<td>Denmark</td>
<td>Focus group discussions</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td>9</td>
<td>France</td>
<td>Focus group discussions</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td>10</td>
<td>Poland</td>
<td>Focus group discussions</td>
<td>4</td>
<td>21</td>
</tr>
<tr>
<td>11</td>
<td>Slovenia</td>
<td>Focus group discussions</td>
<td>2</td>
<td>23</td>
</tr>
<tr>
<td>12</td>
<td>Spain</td>
<td>Focus group discussions</td>
<td>2</td>
<td>25</td>
</tr>
<tr>
<td>13</td>
<td>Austria</td>
<td>National quantitative survey</td>
<td>1</td>
<td>53</td>
</tr>
<tr>
<td>14</td>
<td>Denmark</td>
<td>National quantitative survey</td>
<td>1</td>
<td>39</td>
</tr>
<tr>
<td>15</td>
<td>France</td>
<td>National quantitative survey</td>
<td>1</td>
<td>107</td>
</tr>
<tr>
<td>16</td>
<td>Poland</td>
<td>National quantitative survey</td>
<td>1</td>
<td>116</td>
</tr>
<tr>
<td>17</td>
<td>Slovenia</td>
<td>National quantitative survey</td>
<td>1</td>
<td>201</td>
</tr>
<tr>
<td>18</td>
<td>Spain</td>
<td>National quantitative survey</td>
<td>1</td>
<td>257</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td></td>
<td>57</td>
<td>933 older adults</td>
</tr>
</tbody>
</table>
The PPS-research used four main methods with different scope and intensity, namely:

- **Desk Research** – keywords led search through scientific databases of journals, books, book sections and grey literature (project reports, policy documents) on *active ageing education and policy* in Europe as well as services for active ageing in the partner countries.

- **Quantitative Questionnaires** – consists of a set of closed questions about the main challenges and problems which the target groups face on active ageing. The questionnaires give the possibility for a broader and more detailed collection of information among the target groups in each country.

- **Life-stage-based qualitative Interviews** – this instrument will be used to deepen the results of the questionnaires and to conduct life-stage-based interviews about the life stage of ageing with older adults. The interviews will follow an interview guide and therefore be semi-structured.

- **Qualitative focus group discussions** – a focus group is an instrument which allows a discussion of opinions between research participants about a certain topic. It can have the aim of simply discussing inputs, developing new ideas or finding consensus about a certain idea or proposal. Focus groups can be conducted with natural groups (groups which meet anyway, like school classes) or non-natural groups (groups which only meet for the purpose of research). In this research older adults will come together and both natural and non-natural groups could be used (e.g. sports groups, reading groups, volunteer groups).
3 Overview of Results

3.1 Desk research

The main aim of the desk research was to get an overview of active ageing education in each of the six participating countries. The desk research included exploration of:

- the main existing service centres for active ageing
- collecting national and local policy documents supporting active ageing and extracting their main purposes
- collecting trainings, courses and educational services for active ageing in each country

The results show that service centres for active ageing do not exist under this heading, but different other social services which offer active ageing training under different titles. Adult educational providers and Third Age Universities are main points of interest for the older population. “Single-topic” courses dominate the market (like healthy nutrition courses etc.). Active ageing was conceived as a wide and broad topic in all countries with a good theoretical basis but with limitations when it comes to the practical breakdown of topics and subtopics connected to it. “Active ageing” as a term is used mostly in policy, but not by service providers. “Training in active ageing” has different meanings depending on working status of older people and their individual living situation, their educational background and their degree of mobility.

3.1.1 Official retirement ages across countries

Since the topic of active ageing is a European-wide topic, it cannot be discussed without knowing about the differences in retirement ages across countries (Table 4). Gender differences occur only in Austria and Slovenia; in all other countries systems have been equalized between men and women. In all countries, however, pension systems are undergoing change, which means that official retirement ages are increased in all countries, depending on the birth date of the person and sometimes on the number of working years.

Table 4: Official retirement age for all countries

<table>
<thead>
<tr>
<th>Official retirement ages (in years)</th>
<th>men</th>
<th>women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>62</td>
<td>57-62</td>
</tr>
<tr>
<td>Spain</td>
<td>65</td>
<td>65</td>
</tr>
<tr>
<td>Slovenia</td>
<td>58-65</td>
<td>58-64</td>
</tr>
<tr>
<td>Poland</td>
<td>67</td>
<td>67</td>
</tr>
<tr>
<td>Denmark</td>
<td>65-67</td>
<td>65-67</td>
</tr>
<tr>
<td>France</td>
<td>60-67</td>
<td>60-67</td>
</tr>
</tbody>
</table>
In Denmark the official general retirement age right now is 65 years. However, gradually over the next years this figure will rise to 67 years. This will be fully implemented by 2022. Besides this there is a possibility for people, who have been active at the labour market for many years and who have paid an extra quarterly amount for their unemployment insurance fund to retire earlier. In Denmark there is no difference between the retirement ages for men and women. If you are born 1953 or earlier you can retire when you are 65 years. If you are born in the last half of 1954 you can retire when you are 66 years and if you are born in the first half of 1955 you can retire when you are 66.5 years and finally if you are born in the last half of 1955 or later you can retire when you are 67 years.

In Slovenia the right to retirement compensation (pension) is conditional upon the completion of a certain age and insurance (employment years with full insurance). In order to qualify for entitlement to that pension cumulative conditions have to be fulfilled; the period varies depending on the sex of the insured.

Table 5: Slovenian retirement ages

<table>
<thead>
<tr>
<th>WOMEN</th>
<th>MEN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td><strong>Years of employment</strong></td>
</tr>
<tr>
<td>58 years 4 months (+4 months considering 2013)</td>
<td>38 years 8 months of employment</td>
</tr>
<tr>
<td>62 years (+6 months considering 2013)</td>
<td>At least 20 years of employment</td>
</tr>
<tr>
<td>64 years (+6 months considering 2013)</td>
<td>At least 15 years of employment</td>
</tr>
</tbody>
</table>

In Austria like in Slovenia retirement age is conditional upon the completion of a certain age and insurance (employment years with full insurance). For men born from 1954 or later 62 years is the official retirement age. For women this age is raised stepwise from 57 years to 62 years. Men have to be able to prove a min. of 540 months of insurance; women have to prove a min. of 504 months of insurance which is now raised to 540 as well in the coming years.

In France the 2010 Pension Reform Act raises the legal minimum retirement age for people born after 1st July 1951, which will rise progressively from 60 to 62 years. Under the 2012 Social Security Financing Act this rise is brought forward. At the same time the
age of automatic entitlement to a full pension (legal minimum retirement age + 5 years) rises to 67 for people born after 1st January 1955. Persons with many years of service, who have a severe disability or who have worked in an unhealthy or physically stressful environment can claim their pension before reaching the legal minimum retirement age. The legal minimum retirement age is 62 for persons born after 1st January 1955 and 60 for people born before 1st July 1951, increasing by 4 months each year for persons born between 1st July 1951 and 31st December 1951, and 5 months each year for subsequent cohorts. Workers may however claim their pension later if they so wish. Individuals who continue to work after the legal minimum retirement age and who have paid contributions for longer than the qualifying period for a full pension (this depending on the year of birth), can obtain an increase of their pension.

3.1.2 Existing European trainings and courses on active ageing
There have been several European projects in the past which have dedicated time to developing contents / courses / trainings connected to “active ageing”. National projects were not taken into consideration here, only those with a European scope.

SEEELERNETZ
SEEELERNETZ is a European project in which older people have the opportunity to better participate in learning processes by coming together in social groups (networks). SEEELERNETZ shows how seniors who are not used to learning in later age, will become acquainted with processes of education and learning through the setting up of social networks. The target groups strengthen their skills of learning and action, and are encouraged to participate in social life and, consequently, make a significant contribution to social change. The basic concept used in the project is that seniors who are not used to education participate in social networks, and through their activities they will improve the quality of their life. A catalogue of recommendations based on survey results and the pilot programs developed at European and national level is developed in the course of the project.

SIGOLD: Turning the silver challenge into the golden opportunity
http://www.sigold.net/
The main goal of the SIGOLD project is to support the creation of age integrated society, help 50+ workers to get a chance for active ageing as active participants in an age-integrated society and ageing well at work, at home and in their communities. SIGOLD focuses on older workers, human resource managers and trainers who work with older people in the labour market. Trainings took par, also in Austria:
The course was called “Active ageing – Ageing well”, for participants aged over 50.
The group of people 50+ is in general a very large group, but as such but rather nonspecific. This made it difficult to reach them and to find participants for the course as for example there is no network focusing on people 50+ who are still in the labour market. There are many networks for older people but they focus on 60+ or already retired persons. For this reason we could not exploit multipliers but had to use our own networks. We applied the snowball method. We had 13 persons signing up for the course but only 7 participated in the end.

Course delivery: The course was delivered in 6 face-to-face sessions - 4 hours duration for each session. Each face-to-face session was attended by two staff members who represented the SIGOLD project and acted as course facilitators.

SLIC 1: Sustainable Learning in the Community 1

www.slic-project.eu

SLIC was a two-year project funded by the European Commission’s Lifelong Learning program with partners based in organizations from Austria, Hungary, Germany, Italy, Finland and the UK. The aim was to develop new practical ways to help older adults review their past experience and personal skills and explore new and potential opportunities for volunteering and community engagement. This was done through the development of an innovative workshop model. In a two-day workshop older adults reviewed their skills and how they could be useful for volunteering. More than 103 older learners from 6 countries took part in the workshops. Learning from the implementation reports of SLIC, one could conclude the following:

- Shorter time plan (1 evening and 1 whole day are enough)
- Two older trainers (peers) are more accepted by the group than one older and one younger trainer.
- Skills profile templates need to be solid and methodologically fit for older people in retirement.
- Groups with more than 12 to 15 participants do not work.
- „Creative“ ice breakers were not accepted very well as most older people in Austria were not used to working creatively.

SLIC 2: Sustainable Learning in the Community 2

www.slic-project.eu

The SLIC II project builds on the previous SLIC I project where an innovative workshop model and a handbook on how to run these workshops were developed. It aims at broadening the SLIC workshops to fit the needs of specific target groups and at training older peer facilitators who can then run SLIC-workshops in their local communities using the SLIC-handbook as a guide. Within the project the peer facilitators also had the opportunity to practically trial the workshops.
LARA – Learning – a Response to Ageing
http://www.laraproject.net/
The project LARA aimed to support adult educators by developing and delivering training to provide knowledge, skills and practical information that enabled them to deliver learning which is adequate for active ageing. LARA produced four courses:
- Self-presentation
- My career path – Working to my full potential
- Health: How did illness or accident influence my life?
- I got so far – Planning next learning steps

Senior Guides
http://www.senior-guides.eu/
The Senior-Guides project intended developing, implementing and disseminating a curriculum for the training of older volunteers to conduct guided tours for senior citizens and inform them about specific offers for them in their locality (e.g. lifelong learning opportunities, volunteering possibilities and social services provision). The Senior Guides project suggests practical issues for the implementation of trainings with older adults, such as:
- It is a good idea to interview each participant before the training starts
- A good mix of a theoretical input and activities for self-directed learning
- Working groups are seen as a really good method for this target group
- Role playing games are recommended

MENTA50+
http://www.menta50plus.eu/
MENTA50+ aims to take action for mental fitness of seniors and to develop training materials for this purpose in order to encourage their active ageing. This is achieved by: developing a manual, developing online activities which take up and apply the concept of serious games, and provide a curriculum for continued realisation of the training programme.

3.1.3 European and national policy documents supporting active ageing
The share of older people is increasing in all countries in Europe. This demographic increase has an impact on health, social welfare, employment, and pension systems. According to the European Union app. 14% of all older people in the EU have no children (and thus no grandchildren) and are therefore more at risk of lacking support and mental wellbeing when they get older. Ageing can be connected to risks, like depression – 10-15% of all people in the European Union over 65 years are affected and are more likely to be affected by chronic illness as
well. The risk of poverty, which is amounted to 9-10% in the Czech Republic or Spain, or 20-21% in Poland, Lithuania, Greece, and Portugal) is higher the lower the income, the more interrupted the careers of older people were and the lower the retirement income is. Combined risk factors have a great impact on older people, especially women and older people with low educational background, and this also affects their health and their stage of activity in later life.

In response to these developments, policies on ageing have been developed at European level, also on active ageing. Policies have the best impact when they are designed in a comprehensive way – family policy, community policy, labour market policy, health policy, and social policy.

Older people often have a lower educational background than younger people do. In order to break the concept of “active ageing” down, courses, workshops and seminars can be designed to support older adults in becoming and staying active. Political decision makers have responded to this and have supported the political discussion on lifelong learning in the European Union. Some of these policies are briefly explained here.

**Strategic framework for education and training**

Education and training policies have gained impetus since the adoption of the Lisbon Strategy in 2000, the EU's overarching programme focusing on growth and jobs as well as the modernization of the labour market. The strategy recognised that knowledge, and the innovation it sparks, are the EU's most valuable assets, particularly in light of increasing global competition.

**European Agenda for Adult Learning**

The renewed European Agenda for Adult Learning builds on the 2006 Communication on Adult Learning, and the subsequent Action Plan on Adult Learning 2008-2010. It builds on the Strategic Framework for European Cooperation in Education and Training, ET2020 from an adult learning perspective and should be seen in the context of the Europe 2020 strategy and its targets of reducing early school leavers and increasing tertiary education graduates in all age groups.

**Terminology of European education and training policy**

A multilingual glossary of terms in English, Spanish, German, French, Italian, and Portuguese was developed to better understand education and training policies in

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2. [http://eur-lex.europa.eu/legal-content/EN/ALL;ELX_SESSIONID=nJkxJ7LZq5iQWTwnKnhjGpQ6p6JnYjvdNFkYZLwQ51GWGC3bDW3s!-223960885?url=CELEX:32011G1220%2801%29](http://eur-lex.europa.eu/legal-content/EN/ALL;ELX_SESSIONID=nJkxJ7LZq5iQWTwnKnhjGpQ6p6JnYjvdNFkYZLwQ51GWGC3bDW3s!-223960885?url=CELEX:32011G1220%2801%29)
Europe. It is intended for researchers and more generally for all those involved in education and training policy. This glossary is an updated and extended version of the ‘Terminology of vocational training policy’, published by Cedefop in 2004. 100 key terms of educational policies were selected for this glossary.

**The definition and selection of key competencies**
A competency is more than just knowledge and skills. It involves the ability to meet complex demands, by drawing on and mobilizing psychosocial resources in a particular context. The OECD’s “Definition and Selection of Key Competencies” document was designed to bring a wide range of expert and stakeholder opinion together, to produce a coherent and widely shared analysis of which key competencies are necessary for the modern world. Three competencies are mentioned, which make good sense for projects with seniors as well as other population groups: to act autonomously, to interact in heterogeneous groups, and to use tools interactively (for example ICT tools).

**Key competences for lifelong learning**

The European Reference Framework defines key competences for lifelong learning for the European population. Competences are defined here as a combination of knowledge, skills and attitudes appropriate to the context. Key competences are those which all individuals need for personal fulfilment and development, active citizenship, social inclusion and employment. The 8 key competences are:

1) Communication in the mother tongue
2) Communication in foreign languages
3) Mathematical competence and basic competences in science and technology
4) Digital competence
5) Learning to learn
6) Social and civic competence
7) Sense of initiative and entrepreneurship
8) Cultural awareness and expression

**The role of volunteering in active ageing**

Conclusions adapted by the Council of the European Union summarize the role of activities in social policy in 39 points. Volunteering as a formal, non-formal or informal activity is promoted. Also national policies reflect the topic if active or healthy ageing, however there are country differences.

Policy documents on Active Ageing refer to employability of seniors (France), Healthy ageing (France), and participation in social life (France). There is a White book on active

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ageing in Spain as well as a policy on Education of seniors. In Austria there is a Guideline for health promotion for older people. French policies are oriented around three axes:
   1. The employability of seniors
   2. The participation of seniors to social life
   3. Ageing in good health

There is a “White Book an Active Ageing” in Spain. The White Book on Active Ageing has as its purpose to analyse the new situation of seniors, their concerns, interests and motivations, needs and demands for the design of policies and actions which give responses to their development from a social, cultural and formative point of view. It will be the ‘road map’ for the policies which are going to be developed in Andalusia during the coming years with regard to older adults’ security and training as well as to their participation and contribution to society.

Also there are two regional policies in Spain:
- Active Ageing Strategy in the Valencia Autonomous Region
  This publication has as its aim to integrate the efforts made to help citizens age actively and healthily, and additionally seeks to offer the healthcare and attention required to improve our seniors’ quality of life.
- Action Plan for the promotion of active ageing in Biscay (Basque County) 2010-2011
  The purpose sought with this document is to create the conditions under which individuals wish and learn to age actively, insofar as it is something which affects not only every administration level and context but also society as a whole. This document is expected to become a useful tool thanks to which it will be possible to support and orient the efforts of the actors involved during the next few years and also to trigger a true revolution in the way to understand old age.

In Slovenia there are four national policies connected to active ageing:
- Overview of measurements for fostering active ageing
- Strategy for quality ageing, solidarity and coexistence of generations in Slovenia
- Strategies of active ageing in Slovenia 2008-2013
- Resolution on national programme for adult education

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6 Pregled ukrepov za spodbujanje aktivnega staranja
7 Strategija za kakovostno staranje, solidarnost in sožitje generacij v Sloveniji
8 STRATEGIJE AKTIVNEGA STARANJA RS 2008 – 2013
9 Resolucija o nacionalnem programu izobraževanja odraslih
3.2 Interviews with older adults 55+

The purpose of the life-stage-based interviews was to deepen insights on the subjective views of older adults about active ageing, to explore their information seeking behaviour for courses and seminars, to screen their experience with e-learning and digital literacy, and to collect their acceptance and/or rejection of a future PPS-course on active ageing. Also the interviews served the purpose to screen older adults who could act as peer trainers later on in the PPS-project.

With the help of an interview guide, older adults were looked for; all interview results were summarized using quotes from selective transcription (for “good quotes”).

The average duration of an interview was 17 minutes. Most participants in the interviews were female. The age range was between 55 years and 85 years.

Table 6: Interview respondents

<table>
<thead>
<tr>
<th>No.</th>
<th>Country</th>
<th>Date</th>
<th>Duration in minutes</th>
<th>Female/Male</th>
<th>Age</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>AT</td>
<td>22.7.2014</td>
<td>15 minutes</td>
<td>male</td>
<td>66</td>
<td>volunteer</td>
</tr>
<tr>
<td>2</td>
<td>AT</td>
<td>15.10.2014</td>
<td>17 minutes</td>
<td>female</td>
<td>58</td>
<td>active ager</td>
</tr>
<tr>
<td>3</td>
<td>AT</td>
<td>5.11.2014</td>
<td>25 minutes</td>
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</tr>
<tr>
<td>4</td>
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<td>26 minutes</td>
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</tr>
<tr>
<td>5</td>
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</tr>
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<td>6</td>
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</tr>
<tr>
<td>7</td>
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</tr>
<tr>
<td>8</td>
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<td>9</td>
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</tr>
<tr>
<td>10</td>
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<td>11</td>
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<td>12</td>
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<tr>
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<td>Female</td>
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<td>16.9.2014</td>
<td>6 minutes</td>
<td>Female</td>
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</tr>
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</tr>
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<td>10 minutes</td>
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<td>55</td>
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</tr>
<tr>
<td>17</td>
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</tr>
<tr>
<td>18</td>
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<td>65</td>
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<tr>
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</tr>
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<td>20</td>
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</tr>
<tr>
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<td>SL</td>
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</tr>
<tr>
<td>22</td>
<td>ES</td>
<td>21.7.2014</td>
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<td>Female</td>
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<td>23</td>
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<td>21.7.2014</td>
<td>6 minutes</td>
<td>Male</td>
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</tr>
<tr>
<td>24</td>
<td>ES</td>
<td>21.7.2014</td>
<td>5 minutes</td>
<td>Female</td>
<td>82</td>
<td>positive</td>
</tr>
<tr>
<td>25</td>
<td>ES</td>
<td>21.7.2014</td>
<td>6 minutes</td>
<td>Male</td>
<td>76</td>
<td>positive</td>
</tr>
<tr>
<td>26</td>
<td>ES</td>
<td>21.7.2014</td>
<td>5 minutes</td>
<td>Female</td>
<td>73</td>
<td>positive</td>
</tr>
<tr>
<td>27</td>
<td>PL</td>
<td>15.9.2014</td>
<td>18 minutes</td>
<td>Female</td>
<td>60</td>
<td>working</td>
</tr>
<tr>
<td>28</td>
<td>PL</td>
<td>17.9.2014</td>
<td>17 minutes</td>
<td>Female</td>
<td>65</td>
<td>senior</td>
</tr>
</tbody>
</table>
3.2.1 Meaning of active ageing to older adults

All interview partners were asked what they think about “active ageing” and what they associate with it. Their associations were divided into five categories: continue working, moving around, staying healthy, contributing to society, and having time.

**Continue working**

A Danish interview partner states that active ageing is connected to continuing with their job:

“I have the possibility to retire but I want to stay in the labour market as long as possible. That keeps me ‘young’ and active. My children have grown up and left home and working life has become more important to me in my older age.”

**Moving around**

Also, being able to move around (the house) was associated with active ageing in comparison to having to stay in bed.

“It is said by the word itself: ‘active.’ It means doing things permanently, being with people, having the desire to learn things, moving, having interests in everything. The fact that you are older doesn’t mean that you’re no longer interested in anything; on the contrary, at least in my case, I have ... well, I’ve always had interests, but now I have the possibility and I’m very keen on remaining active.”

(female, 69 years, from Spain)

**Being healthy**

In the interviews “active ageing” was also defined as the possibility to be healthy and fit, but also to have the will to live life to the fullest together with other people like peers or family.

“Well, in my opinion, there are no new formulas in these topics; [...] being physically well and intellectually alert. I think it is essential because we very often forget that health must come first. If we are not physically well, we can hardly function intellectually. To my mind the essential thing is to take advantage of the opportunities that we have in front of us every day.”

(male, 67 years, from Spain)
Contributing to and participating in society

Participating in social life or even actively contributing to society was mentioned.

“For me, it means to continue to be useful for society, that we must continue to learn, that we must exercise ourselves in all the spheres of society, both from a civic point of view and politically and in any other sense... otherwise, that’s what active ageing really means to me.” (female, 74 years, from Spain)

“The word ‘active’ means that once you have entered a particular stage of life, usually after having already cut yourself off from professional activities, you are facing a new way of living [...] and then a large void suddenly appears. If that void is not refilled, if you don’t replace it with a certain amount of activity, you can fall into the temptation of accommodating into a relaxing kind of life [...] therefore, carrying out some specific activities which force you to be in touch with society, with friends, inside a group, to my mind, that would be the way to live actively during that period.” (female, 82 years, from Spain)

“For me, the word ‘active’ means participating, participation in every sense and participating in projects, participating in classes.” (female, 69 years, from Spain)

Having time

A prerequisite to active ageing might be having time to engage in activities. The interview partners expressed that they could do what they wanted to, but also that they had time to read about what was going on in society.

“...to know what is going on in the society – that you are updated on what is happening at local, national and international level – reading newspapers, watching news. Now I have time to read two newspapers every day!” (from Denmark)

“To be active means to use every day and the whole day from the moment you get up; doing something that you are involved in, something that means something to you. It can be physical activities and it can me mental activities.” (from Denmark)

“Well, when I was active, at work I did not have time for things but I now realize I have. For me it is important to bury myself in different kinds of things that I did not do before, I did not even had time to follow them actively, but today I can. First of all I am interested in sociology. Like for example history and languages. That you can attend on the adult education centre Ljudska univerza. At the moment I am learning English, German and a little Italian.” (male, 69 years, from Slovenia)
“...they say when you retire you end living; you end working at your job and begin to live your own life. And that I am trying to do, when I was in a very stressful situation I always went to the nature and found some relaxation there. [...] So now I have been retired for two years and so far I have not felt the desire or had the wish to go back to work. Active means to me that I am not always at home, locked in the flat but to devote myself to various kinds of things or to say at least that I am interested in and did not have time previously.” (female, 65 years, from Slovenia)

### 3.2.2 Examples for active ageing

Older adults who were interviewed were asked about examples of active ageing in their lives. All examples mentioned can be classified in a) social, b) physical and c) mental or intellectual activities. The graph below shows some of the predominant examples that were given.

Table 7: Examples for active ageing

<table>
<thead>
<tr>
<th>Predominant examples for active ageing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social activity</td>
</tr>
<tr>
<td>Physical activity</td>
</tr>
<tr>
<td>Mental and intellectual activity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social activity</th>
<th>Physical activity</th>
<th>Mental and intellectual activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voluntary work</td>
<td>Walking</td>
<td>Reading</td>
</tr>
<tr>
<td>Attending courses</td>
<td>Cycling</td>
<td>Learning</td>
</tr>
<tr>
<td>Playing cards</td>
<td>Other sports</td>
<td>Attending courses</td>
</tr>
<tr>
<td>Taking care of grandchildren</td>
<td>Gardening</td>
<td>Reading</td>
</tr>
<tr>
<td>Caring for sick person</td>
<td>Housework</td>
<td>Attending courses</td>
</tr>
</tbody>
</table>

Source: Own illustration

### Social activities

Social activities which were mentioned cover voluntary work, attending courses, playing cards with other older people and any other activities involving participation in society. Also, caring activities within the family were mentioned, like taking responsibility for grandchildren or even caring for a sick partner or parent.

Two older people talk about their voluntary work:

“I try to be with groups in a permanent attempt to enrich myself personally [...] I belong to a volunteer group which forms part of the ‘bookcrossing’ (book release) movement in which, together with some partners, we have set up a network of places where book release and exchange is facilitated.” (female, 69 years)

“Doing and being something for others give meaning to life – when I was working I did not have time to do things for others – now I have the time.” (from Denmark)
A French older person talks about the only possibility for him to be active: “I play cards, I cannot walk.” (female, 66 years, from France)

A Danish person says that she cares for a sick partner: “I take care of my husband who is ten years older than me: 94 years old.” (female, 85 years, from Denmark)

**Physical activities**
In the category of physical activity “walking” was mentioned as the predominant answer. Other forms of being physically active were cycling, trekking, attending a fitness centre and other sports, but only if the person was still healthy. Most often being physically active meant being active in their own home doing household chores and gardening.

Among the Danish interview partners volleyball, badminton, spinning, tennis, swimming, physical exercises at home, walking, and garden work were mentioned. Walking takes over a predominant role especially within the older population who has health problems, as these examples show:

“I walk a little bit because I have pain with my knee at the moment but I finally ... I walk a little anyway... as long as I can.” (female, 77 years, from France)

“[...] I mean I do exercises. I really walk a lot, cycle not so much at the moment because it is hot, then I have a big garden at home, where I relax.” (female, 65 years from Slovenia)

“I go for a walk. No problem, when I go alone. I also go to the gym.” (female, 64 years, from Slovenia)

“I go Nordic walking with a friend once a week and I take the bicycle in everyday life and avoid the car. I take care of my nutrition, but I have always done that.” (female, 59 years, from Austria)

**Mental and intellectual activities**
The older adults who were interviewed also mentioned mental and intellectual activities in which they engage regularly. They mentioned reading most frequently, but also all forms of learning and attending courses. Also, cultural events were stated by the interview partners like theatre groups, poetry groups, painting and singing.

“I participate in cultural events that take place in Ptuj. For instance in ‘Muzik Kafe’ I go to the library and the cinema in Ptuj that shows qualitative films that attracts me.” (female, 64 years, from Slovenia)
“Well, specifically, me, apart from the training courses that I chose, well, I joined a theatre group, I joined a poetry group, ... it's not about you doing it well or badly, it doesn't matter, but it has brought me satisfaction, it has forced me to do myself up more, to go out more often, in one word, to socialise, to make a lot of friends that I didn't have before.” (female, 82 years, from Spain)

Also some interview partners talked about courses they were attending:

“I learn and take part in learning activities, like formal courses at a local adult education provider. Studying at university, I would not want that any more. But I live in a social environment with a lot of younger people. I learn for myself, I look after my grandchildren and I go to the theatre regularly.” (male, 66 years, from Austria)

“So I attended a bookkeeping course last year.” (female, 59 years, from Austria)

Others stay mentally fit by engaging in cultural and social activities, like:

“I have activities such as photography, I like to paint, I like video-editing.” (female, 73 years, from Spain)

“I read a lot and discuss books with friends and foes.” (female, 59 years, from Austria)

3.2.3 Interest in becoming a peer trainer

The peer-to-peer concept was reviewed critically by those older adults who were interviewed. A Danish interview partner stated: “It does not necessarily need to be peer-to-peer. It is not the fact that it is a peer that motivates old people – it is the personal competences of the trainer.” Another Danish interview partner supported this statement and said: “I think we learn more from other generations.”

There was great awareness among the interview partners that teaching and training are no easy issues and that specific skills are required.

Some skills of potential peer trainers mentioned by interview partners were respect, knowledge, or experience with the topic:

“In any case it should be a respectful person who is sovereign in his field of content that he can communicate with adults because here can be huge differences.” (female, 68 years, from Slovenia)

“It depends for which field (module) I would decide. ... You have to be enthusiastic about the topic, you have to know something about it and you have to know how to present it.” (female, 65 years, from Slovenia)
“Such a person should have a broad knowledge not only narrow professional but really wide. To be able to explain many things not only some facts ... when he says the first words, you could build confidence.” (male, 69 years, from Slovenia)

After review of all answers of the interview partners it become clear that there are at least three types of trainers or trainees in this generation: a) those who want to participate only in a course, b) those who feel like secure peer trainers due to their experience, and c) insecure peer trainers who might be interested but do not feel trained or equipped enough for this task (Table 8).

Table 8: Types of trainees and peer trainers

<table>
<thead>
<tr>
<th>Types of trainees and peer trainers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TYPE 1</strong> PARTICIPANT ONLY</td>
</tr>
<tr>
<td><strong>TYPE 2</strong> SECURE PEER with teaching experience</td>
</tr>
<tr>
<td><strong>TYPE 3</strong> INSECURE PEER needs training or a partner in training</td>
</tr>
</tbody>
</table>

Source: Own illustration

**Type 1 Participant only**
Some interview partners mentioned only wanting to participate, but not actively wanting to be a peer trainer.

“Participating, probably yes.” (female, 66 years, from France)

“No I wouldn’t want to be a peer trainer, if I was interested in teaching, I would do it anyway. A peer trainer has to be competent and experienced with the topic he teaches.” (female, 60 years, from Austria)

**Type 2 Secure peer trainer**
Some other interview partners stated having experience in teaching and managing crowds or groups and therefore were interested in trying out the peer teaching.

“Why not, I think I have some interest in that topic.” (female, 55 years, from France)
“After I retired one of the things which I missed the most is precisely that: teaching. I spent ten years at Miguel Hernández University teaching students who were doing the last years of the engineering degree. […] It is a really complex topic, very difficult, but at the same time it brings plenty of satisfaction. […] it was pure adrenaline.” (male, 67 years, from Spain)

**Type 3 Insecure peer trainer**
Most interview partners can be assigned to Type 3: those who are insecure about peer training and would need further training in it or could do it with a secure partner.

“I believe in the young generation. I would not want to be a trainer, only if I get paid for it. Also I have never taught a course before, so I don't know if I would feel comfortable with it.” (male, 6 years, from Austria)

“If we are not trained to impart a particular kind of teaching, maybe we confine ourselves to tell our personal experiences, and I don’t know if that would be enough for a course like this.” (female, 73 years, from Spain)

“No I do not feel comfortable in front of crowds.” (female, 70 years, from France)

“No! No, I would not know what to say.” (female, 77 years, from France)

“I mean, with other people, not only one [trainer].” (male, 6 years, from Spain)
3.3 Focus Group Discussions with older adults 55+

The main aim of the focus group with older adults aged 55 or older was to discuss active ageing education in their countries and their specific needs for such educational services (face-to-face & e-learning). The experiences, success and failure of such educational services were collected.

Table 9: Participants in focus group 1

<table>
<thead>
<tr>
<th>No.</th>
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<th>Date of the focus group</th>
<th>Duration</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Austria</td>
<td>26.9.2014</td>
<td>120 minutes</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>Denmark</td>
<td>15.09.2014</td>
<td>240 minutes</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>France</td>
<td>16.09.2014</td>
<td>120 minutes</td>
<td>11</td>
</tr>
<tr>
<td>4</td>
<td>Poland</td>
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<tr>
<td>5</td>
<td>Slovenia</td>
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<td>10</td>
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<td>6</td>
<td>Spain</td>
<td>28.7.2014</td>
<td>120 minutes</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
<td>58 older people</td>
</tr>
</tbody>
</table>

Experiences with active ageing trainings or courses

Most of the focus group participants do not have experience with formal learning in courses or trainings. In Poland even no one had experience in taking part in trainings or seminars about active ageing. In Denmark none of them had any experiences too in participating in direct training or seminars about active ageing. Training is an activity that seems to be far away from older people and their actual life (France). Very few have participated to training activities. Some say that they have almost never participated, and that they are not familiar with trainings. Also, they do not want training (France). And it seems particularly true if we talk about a training concept that is not their concept that does not correspond to an actual need.

Active ageing as a concept has to be broken down into useful pieces; otherwise it might be too fuzzy and a bit too theoretical (France). They miss having more seminars, lectures and workshops that provide information about the wide range of services, courses and activities which are available (Spain).

Half of the participants of the focus group in Slovenia have rich experience on the field of seminars, workshops or trainings on active ageing field. The other half does not have any such experiences. Some older people claim wanting to learn by themselves by using the internet.

Additionally fewer courses are offered towards people who do not live in cities and who have no mobility or literacy level (Spain). The inhabitants of rural nuclei, the disabled, and women should be the preferential addressees of this process focused on bringing the offer closer to those with disadvantages avoiding discrimination.
Also some comments were made concerning the marketing of such courses: Generally there is a lack of dissemination and marketing for active ageing and information fails to reach a vast proportion of society – and, for that matter, seniors. The structures meant to disseminate and provide information about the existing offer should be redefined (Spain). Also, there could be a short commercial seminar before the course (Poland).

Opinions about a face-to-face training on active ageing
Providing and developing an overview course for active ageing was seen as positive and interesting by participants (Austria). Contents which were much desired were: using technology, 70 years after the end of the war (1945-2015), using different print and online media, sports and fitness etc. Practically, the participants said that a course should not take place more than once a week due to time constraints of most seniors, but be offered as a series (5 weeks in a row, each Thursday for example). They stated that peer education was a useful concept and that younger trainers needed to be aware of terminology which older people did not know or learn. Inputs by local experts can also be performed by younger people.

Face-to-face training is the most-preferred training form in Spain. In fact none of the participants of the focus group has ever done an online or semi-physical (mixed) training course. Nevertheless, they believe e-learning or online training can be interesting though, for the time being, they think that older adults need to be in contact and interact with one another. One of the great aims of active ageing is socialisation and the removal of isolation and exclusion. That is why they try to mix and seek contact with other people, after having often lost their friendship and relationship circles when they retired. Therefore when seniors come to courses, they are in search of training proposals and activities oriented towards active ageing, they seek physical and emotional contact. It is quite complicated to do that on the internet only.

Some people mentioned not being able to take part because of health problems (France, Slovenia). Some would not be able to participate in group trainings because they have problems listening and hearing properly in large groups (France). Some participants feel they are "medical doctors of general practice for themselves" because they perform research on diseases, mental health, and active ageing (Slovenia). Therefore, they are interested in themes that address medical treatment, both physical and mental; they look forward to meeting experts from the medical fields, so they can learn from professionals. They could provide them with ways and meanings of self-care and self-respect (Slovenia).

Face-to-face trainings are considered as interesting when there is a lively discussion, when exchange of experiences and good practice takes place, when practical knowledge is achieved, and when participants have the possibility to listen similar problems and doubts (Poland). Participants indicated that trainings should be carried out in small groups (8-10 people). These groups should be open because it gives the possibility to
connect to it when a person is interested. The schedule of meetings should be no burden by the number of hours, often having breaks, and a local opportunity to meet (Poland).

Opinions about an e-learning training

- **General perspective: sceptic**
  E-Learning was viewed sceptically in some countries (Austria, Denmark). Some of the participants in the focus groups expressed skepticism about starting with an e-learning program in their age for the first time (Denmark).

- **Requirements are digital natives**
  For an e-learning training to take part it needs digital natives. Most participants expressed that they had access to the internet and that they were active on the internet (Denmark), but only one person had experience from working life with online education. The participants in the focus groups think e-learning can bring benefits, but of course only to those that are computer-literate (Slovenia). However, a high percentage of older people do not have mastery of ICT-tools and therefore are still digital illiterates (Spain). E-learning is even much more distant to them than face-to-face training. The word is sometimes even unknown. Some of them like to search for information on the internet or use it to communicate with their family, but they would not like to use internet to participate in a formal course (France).

- **Solutions**
  1) **Two by two e-learning**
  E-learning can be done within a training programme but only if it has a social component, for example if the e-learning is used two-by-two (two older adults in front of one computer, sharing their ideas about how to solve a certain problem online) (Austria).

  2) **Blended learning**
  Generally e-learning should only be used as an integral part of blended learning. Online trainings can be a double-edged sword, insofar as seniors who join such e-trainings very often isolate themselves, they get hooked on the computer and forget about face-to-face (in person) relationships (Spain). But it is easier for some people who stop going out to the street, become sedentary, do no exercise, and no longer physically carry out any activities with other groups, to take part (Spain). The participants in the focus groups reached the conclusion that the ideal thing would be a mixed training that could allow physical “face-to-face” activities and an online training as a complementary support for personal development which helps people continue with their training and broaden their wisdom from some previous, experimental knowledge (Spain).
3) Defining specific target groups
Another idea to solve the general scepticism towards e-learning specific target groups among older people could be defined for who this kind of training makes sense. An online training could be a solution to isolated older people with reduced mobility or accessibility, who could have the possibility to be connected through the Internet (Spain). Also, participants could take the opportunity of using this training form via the internet if they suffer from a chronic disease (Poland).

4) Expert support
Also, an e-training could be conducted with the help of expert support. Since older people belong to the generation that did not grow up using computers on an everyday level, most of them learned about computers in the age of their retirement. However, they could use expert help during an e-training and have face-to-face contact with their mentors as well.
3.4 Focus Group Discussions with local stakeholders

The main aim of the focus group with local and national stakeholders was to discuss active ageing education in their countries and to develop a shared vision of active ageing education in their countries. The experiences, success and failure of such educational services were collected.

Table 10: Participants in focus group 2

<table>
<thead>
<tr>
<th>No.</th>
<th>Country</th>
<th>Dates of the focus group</th>
<th>Duration</th>
<th>Number of total participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Austria</td>
<td>10.9.2014 12.9.2014 8.10.2014</td>
<td>160 minutes 180 minutes 160 minutes</td>
<td>11</td>
</tr>
<tr>
<td>2</td>
<td>Denmark</td>
<td>13.10.2014</td>
<td>240 minutes</td>
<td>11</td>
</tr>
<tr>
<td>3</td>
<td>France</td>
<td>10.09.2014</td>
<td>120 minutes</td>
<td>08</td>
</tr>
<tr>
<td>4</td>
<td>Poland</td>
<td>29.09.2014 09.10.2014</td>
<td>240 minutes</td>
<td>10</td>
</tr>
<tr>
<td>5</td>
<td>Slovenia</td>
<td>16.9.2014</td>
<td>156 minutes</td>
<td>13</td>
</tr>
<tr>
<td>6</td>
<td>Spain</td>
<td>21.7.2014</td>
<td>120 minutes</td>
<td>14</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
<td>67 stakeholders</td>
</tr>
</tbody>
</table>

The Shared Vision

Within the focus group discussions among active ageing stakeholders two main shared visions were brought forth:

- A free educational offer for one week available to all older citizens in the first year after leaving the labor market – focusing on the challenges and the opportunities of being an active senior.
- Designing an active ageing training course which actually empowers older participants and makes them more active than before (empowerment and participation).

These visions were underlined by certain prerequisites either political, financial or ideological in nature or concerning the target audience:

- At present, due to shortage of resources in many EU-Member States derived from the recent economic crises, active ageing is no longer a priority for public institutions, which is why they only maintain the existing resources at the most and the development of new projects are limited.
- A lack of public support always has a strong negative impact on any sort of activity.
With regard to older adults it needs to be clear that not all older adults are receptive to training, be it for active ageing or for something else, and also receptive to its implementation.

Active ageing as a concept is theoretical and distant to many older adults and needs to be broken down into digestible pieces. The participation of older adults in educational services for active ageing could be limited if the vision or understanding of the actual concept of ‘active ageing’ is restricted or confined to the absence of physical or mental illness.

A variety of initiatives currently exist which contain subjects focused on different (health) aspects of active ageing. However, an added value could be to adopt a specific empowerment scheme and thus give insight into the essential methods required to achieve “true active ageing”.

In addition it has to be taken into account that seniors are not a homogenous group and have completely different needs, for example comparing a completely autonomous person with a senior citizen who has restricted mobility or disabilities. In accordance with their age and degree of autonomy, each individual should have the chance to take part in the active ageing training suited to his/her active ageing needs. In this respect, we do not only have to revise the concept of active ageing but also adapt the national programs to the diversity of older adults and addressees.

The shared vision lies in the fact that all stakeholders want to empower older people to be or become active (in using the computer, in social contacts, in physical activity etc.), but that courses alone do not guarantee activation. From the experience of participants in the focus groups older people need more than just a course (a formal learning act), but courses with a lot of informal time (breaks, lunch) in order to get in contact with each other, or other incentives to take part (VIPs offering a lecture, aftercare, the possibility to develop their own project idea etc.).

Level of desirability of another active ageing course
The level of desirability varies throughout the countries in which focus groups took place. There is actually a supply of ‘Active Ageing Courses’ but they are highly scattered topic-wise and the purpose and contents are not well defined in relation to the wide variety of older adults and their lifestyles.

It is necessary to bear in mind that many older adults do not have a clear answer to the question “what is active ageing?” – and they do not know where they can receive training for it either. The training could contribute to **fighting ignorance and disinformation** and find a way to reach people with a training need. It is thus essential to come closer to older citizens through different communication channels and explain to them what active
ageing means, making them embrace this concept even before involving them in any training schemes.

Individuals age actively when they are prepared, i.e. ‘empowered,’ to age actively, for which they need to be trained in a variety of fields (psychological-mental aspects, healthy lifestyles, nutrition, physical exercise, use of medicines, cultural aspects, ICTs, self-knowledge, philosophy of ageing…) according to Spanish stakeholders; that is, what they need is an integral, holistic view of “Active Ageing”. Therefore, far from being only a “question of health,” this is actually a very broad and dynamic concept which has to do with age and the evolutionary stages of a senior at different moments and under various circumstances – and depending on each person’s life profile.

An effective training for seniors in Poland is possible when we take to consideration real needs, they can feel as co-authors of the programme and they can exchange experiences.

The desire for having this kind of trainings/educational opportunity is not big in Denmark. The focus group considers that older adults have a rather negative attitude towards training which is supported by current educational offers from health centers in the 95 municipalities in Denmark and the general high level of information in the country – via newspapers, television, magazines and web pages.

The level of desirability for active ageing education in Slovenia is still low. Suggested solutions could be meetings with authorities.

The level of desirability in Austria was discussed in connected to the target group. Active ageing courses are often offered to people aged 50+, 55+ or 60+ but are not specific in who they address. This is a barrier to successful implementation according to the experiences of the focus group participants. Natural groups (like yoga groups) offer a good possibility for piloting training material, since trust is already available in a group, which meets regularly.

There is no offer like the PPS-course for older people in France. There are some offers for health workers and it is accessible as part of a continuous training offer. Perhaps there is no course with a full approach of active ageing. Participants are a bit skeptical about having such courses based on e-learning. However, it could be a way to reach people who are still at work in order to prepare their retirement period.
Practical issues

Marketing and preparation activities

- The training course must be presented well in terms of marketing in order to make people understand what it contains.
- The introduction and information material will have to point out precisely what the expected outcome can be to the individual senior, meaning that the material has to inform and raise questions about “normal ageing”, in a way so that people will understand. Examples could be:
  - Is it a part of normal ageing to lose physical competences? NO it is not.
  - Many lose life expectations when they lose their spouse – does it necessary have to be this way? NO it does not.
- From previous trainings on active ageing it can be learned that training material needs to be very practical, not making it an effort for trainers to understand the exercises. Exercises must be described in detail offering material such as pictures along with the training handbook.
- In addition to the above, instructor training is of paramount importance too. It must be in tune with the project content, both in terms of relationship with his/her peers and regarding the topics, so that the training relationship established with his/her peers can become as effective as possible, for which the instructors will have to be suitably trained – apart from having a number of own qualities which make them apt for this task.

Trainer profile

It is also important to have a clear profile for the instructor or trainer and to set criteria for the selection of such people. This person should have a specific set of qualities such as:

- Ability to transmit information
- Willingness to listen
- Motivation to be an instructor or trainer
- Empathy
- Commitment to the training
- Capacity to transmit confidence/trust and to be positive
- Sociability and flexibility
- Age above 40 years
- Previous teaching experience or experience with groups
Topics of active ageing
As far as practical issues are concerned, topics of the PPS course were discussed in all focus groups, such as: mental health, ICT and older people, media competence, filmmaking, storytelling, intergenerational activities and leisure time services.

The following general modules are suggested as modules in an active ageing training:

- What do we know scientifically about the ageing period?
  - Myth and facts about ageing period.
  - What are our individual expectations – and why do I have these expectations?
  - What picture do I have in my head of being old?
  - Present the new understanding of ageing process.
  - Do we want to have an active ager – and how do we understand this?

- What is mental fitness?
  - Present and try different tools to strength and maintain mental health
  - Tools targeting at
    - Memory
    - Language
    - Functioning
    - Reasoning
    - Attention
    - Sensation

- What does it mean to be physically active?
  - How much do I need to do to maintain or develop different physical competences through ageing?
  - Examples of physical activities – do something together.
  - Why is it difficult to start – and how do we start?

- The importance of social networking
  - Why is it important?
  - How do we renew our social network?
  - Finding a new loved one in high age?
  - When is my social network strong enough to last all my life?

- ICT-training and tablet training
  - Working on photos.
  - Surfing in the internet.
  - Safe bookings in the internet.
  - How to use tablets.

- Food habits and healthy nutrition

- Learning and keep on learning
Optional modules could be:

- Explanation of concepts and extension of knowledge
  - What is ageing?: cellular and emotional
  - Philosophy of ageing
  - Psychology of ageing
  - Ageing and Health: Physical Exercise, Nutrition, habits, memory

- Social Skills, Competences and Instrumental Capabilities
  - Emotional Intelligence and social skills
  - Competences: ICTs, languages, management of administrative issues

- Possibilities for the older adult to actively participate in society
  - Different ways to collaborate in the training with minors (children) and/or youngsters (intergenerational offers).
  - Volunteering among seniors.
  - Other forms of participation.

- Self-help as a form of collaboration between peers
  - What is self-help?
  - Creation of groups and work teams. Theory about groups and collaborative learning

- Understanding the determinants of active ageing according to the WHO Model (2002):
  - Transversal Determinants
    - Culture: The Mediterranean culture is not the same as the Slavic one and that becomes essential for this approach
    - Gender: Taking into account the different roles of each gender
  - Determinants related to healthcare systems and social services
    - Health promotion and disease prevention
    - Curative services
    - Long-term care
    - Mental services
  - Behavioural determinants:
    - Physical Activity
    - Healthy diet
    - Alcohol
    - Medicines
    - Therapeutic compliance
  - Determinants linked to personal factors:
    - Biology and Genetics
    - Psychological factors
  - Determinants associated with the physical environment
    - Security at home
Falls
  - Determinants associated with the social environment
    - Social and family support
    - Violence and abuse
  - Economic determinants
    - Income
    - Social protection
    - Work

Didactical Methods
In terms of exercises which have proven to be suitable for older people, three forms of methods for social interaction were stated: connecting older people (least degree of interaction), exchanging opinions and experiences (average degree of interaction), and collaboration (highest degree of interaction).

With regard to methodology we think that blended learning where knowledge is acquired through a combination of distance learning and in-the-classroom learning is the best option. That is to say, face-to-face and online sessions in the proportions which are deemed appropriate complemented with clear, practical and highly visual didactic materials and, most importantly, leaving plenty of room for feedback between peers (teacher and students).

The methodology of the training must be active with a clear and effective support for the technical part of the project because, first and foremost, seniors like to be listened to and also to have a constant feedback which is usually guaranteed in face-to-face classes; but in the case of the online training which is carried out on the internet through the use of electronic resources, older adults also need to feel that there is someone who can solve any technical problems which may eventually arise. In this respect, the possible virtual platforms to be developed will necessarily have to be accessible, user-friendly and properly adapted to the teaching imparted.

Recommendations in terms of methods are:
- Planning half days and one whole day (to do something practical of longer duration).
- Short presentations – no more than max. 20 minutes – then followed by some physical/practical activity.
- As much time in small groups as possible to activate participants. Let participants work out and discuss statements – statistical figures – and different presentations.
- Discuss the possibilities for team work, self-preparation, and use of technical equipment by older adults.
As for team work, we think it is enriching for everyone; it represents an opportunity which can make all those involved in the project grow. Furthermore, team work is always more than the addition of all the individualities. This additionally permits to use the experience owned by each participant and resort to social networks, which are also multiplied through the addition of the individual qualities contained in a working group.

During the course establish a network (teams) who can in the end of the course encourage each other to carry out activities together and keep “doing things together” in their common future.

If “self-preparation” activities are planned they should be limited in time and effort.

If **E-learning** is applied, a “room” is recommended, in which participants step in: a community centre with different rooms: a library, a garden, a fitness room, a kitchen etc. In each room different skills of active ageing can be learned. In the library memory training could take place for example and in the fitness room physical activity could be trained etc. Also older people like to re-activate their knowledge from school, which could also be trained in an e-learning session.

Methods which attract older people are excursions and active getting to know organisations, associations or places of active ageing in the community. An active ageing course could consist of common visits to such places.

The E-learning modules bear the chance of a follow-up with participants and of an in-depth study of a specific topic (e.g. mental health). What is mentioned as important is a follow-up after three months of the face-to-face training (asking questions about actual activation after the course and barriers to activation).
4 Results of the quantitative survey with older adults

In the framework of the PPS-project an explorative survey was conducted across six European countries with older people above the age of 55 years in order to explore their perceptions on and experiences about active ageing and the main challenges they face (PPS-survey). After the development of the questionnaire it was sent out to older people through different electronic channels of communication by the six project partners. The online survey was open for two months from May-June 2014. The responses were collected online using surveygizmo, http://english.1ka.si or www.limesurvey.org and the data was first analysed within one country. These results are now compared in this report across countries: Austria, Denmark, France, Poland, Slovenia and Spain.

Table 11: Survey response rates per country

As the table above (Table 11) shows the total response rate across all countries was n=773 questionnaires (AT: n=53, ES: n=257, SL: n=201, PL: n=116, FR: n=107, DK: n=39).
4.1 Who participated in the survey?

Several dimensions of socio-demographic variables were asked for by the respondents. The only filter question was “age” – all those under 55 years were excluded from the online survey. The PPS-survey reached all age groups above 55 years, but mainly those between 55-65 years (rather “younger older people”). Between 49% and 72% of respondents belonged to the youngest age group. In the Danish survey even younger people were reached best: those between 55-60 years. Only between 6-15% of older people above 75 years were reached with this survey (see Table 12).

Table 12: Age groups of respondents

<table>
<thead>
<tr>
<th></th>
<th>55-65 years</th>
<th>66-75 years</th>
<th>76 or older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>58.5%</td>
<td>63.8%</td>
<td>35.8%</td>
</tr>
<tr>
<td>Poland</td>
<td>49.0%</td>
<td>29.3%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Spain</td>
<td>37.4%</td>
<td>42.0%</td>
<td>19.3%</td>
</tr>
<tr>
<td>France</td>
<td>38.6%</td>
<td>13.0%</td>
<td>15.0%</td>
</tr>
<tr>
<td>Denmark</td>
<td>58.0%</td>
<td>33.0%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Slovenia</td>
<td>72.0%</td>
<td>74.0%</td>
<td>63.0%</td>
</tr>
</tbody>
</table>

Source: Own illustration

The share of men and women who participated (gender) was well distributed, however, there are tendencies that the share of women is higher in some countries (AT: 70%, SL: 83%, DK: 74%).

The PPS-survey generally reached older people with a good management of their household’s income. When asked how well they manage it, the answers “we manage well” or “very well” were predominately ticked: AT 73%, FR 78%, PL 61%, ES 90%, SL 63%, DK 95%. The largest differences between countries can be seen between Poland with 61% (where only 2/3 of the respondents answered to manage their income well or very well) and Denmark with 95% (where almost all respondents answered to manage their income well or very well).
Living conditions of respondents differ by country as well, although two answers were predominately given: living in couples and living alone (see Table 13).

**Table 13: Living conditions**

<table>
<thead>
<tr>
<th></th>
<th>AT</th>
<th>FR</th>
<th>PL</th>
<th>ES</th>
<th>SL</th>
<th>DK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Couples:</td>
<td>43%</td>
<td>70%</td>
<td>66%</td>
<td>63%</td>
<td>61%</td>
<td>67%</td>
</tr>
<tr>
<td>Alone:</td>
<td>37%</td>
<td>20%</td>
<td>16%</td>
<td>26%</td>
<td>24%</td>
<td>28%</td>
</tr>
</tbody>
</table>

In Spain, Poland, Slovenia and Denmark around two thirds of respondents live in couples while in France approximately 70% live in couples. Only in Austria this share is only 43%.

Regarding the working condition of older respondents differences between the countries occur: In Denmark and Poland the share of respondents who are retired is low (DK 21%, PL 38%) while in France, Spain and Slovenia it is higher (FR 72%, ES 72%, SL 86%, AT 55%). So, the PPS-survey reached older employees in Denmark and Poland while in the other countries more retired people were reached.

### 4.2 Opinions about active ageing and information seeking behaviour

In the PPS-survey older respondents were asked about how they perceive active ageing. A number of different responses were given to them (multiple answers).

The results show that some associations with active ageing are similar between the respondents: They favoured associations of being healthy (between 65.4%-89%), being in a mentally (between 55.2%-84.4%), and physically good state (between 55.7%-88.7%) participating in social life (high levels in Austria with 79.3% and in Denmark with 79%), being mobile by foot, car or bicycle (high levels in Austria with 83% and France with 73%), travelling (high levels in Spain with 70%) and learning new topics (high levels in Spain and Slovenia with 80%). The older respondents associated less with items like continuing to work, having a sexual life, feeling safe in one’s home environment, participating in family life or being able to help their families.
If the list of associated items with active ageing is reduced to the TOP 5 associations, the following list can be shown.

As shown in Table 15, mental health, physical health, learning new topics, and being mobile by car or foot represent the topics associated mostly with active ageing.

When asked in the survey about their information seeking behaviour, survey respondents did not generally look for information about active ageing as such, but for more specific topics of active ageing.

We differentiated between formal and informal information seeking, the first one at municipalities, NGOs or training centres; the second one with friends, family or neighbours.
As the graph above shows, the formal information seeking behaviour among the respondents groups in the different countries is low in all countries except for Slovenia. In all other countries those who do not seek information dominate those who look for information. In France even 97.5% of the respondents do not look for information about active ageing.

We conclude that the concept of Active Ageing is a theoretical one, one used by politicians and scientists, but which is not known to the public. We believe there is a low level of conscience for Active Ageing as a whole, but that single topics (like nutrition or volunteering) are definitely researched and looked for.

When asked about their informal information seeking behaviour, results look alike (see Table 17).
Table 17: Informal information seeking behaviour

![Informal information seeking behaviour](image)

*AA= Active Ageing

When information about active ageing is sought, it is sought more often in a formal context.

4.3 **Literacy and technology literacy of older adults**

Concerning the literacy of older adults above 55 years using literacy screening questions, the respondents showed to have high literacy levels (see Table 18).
Literacy levels were measured with three screening questions. Results show that literacy rates are generally high, especially in Austria, Spain, and France. In Poland 17.2% of the survey participants have some difficulty in reading information material and 15.8% have some difficulty in understanding written information. 8.2% of the respondents in Spain are not confident with filling out forms at all. In all other countries these shares are smaller.

We also measured technology literacy of older adults in the survey, since we want to construct a course on active ageing which also has online learning elements. Learning via the internet can only happen if technology resources are available in the lives of the older (mostly female) adults, so we wanted to know the degree of affirmation with these statements:

- I believe to be capable of finding information online.
- I have a digital device with internet access at home – computer, pad, smart phone.
- I can easily access and use the internet at a public access point – library, coffee house, community centre.
- I have someone at hand who can help me with the digital device if I have questions.

The results in Austria show that more than 88% of the respondents have digital devices at home in order to use the internet. Fewer older people have access to the internet in public spaces: Only 34% have good access via libraries or community centres. About two
thirds of the respondents say that they have help if they have questions about their digital device or the internet.

82% of Danish respondents say that they fully understand the basic principles of the internet. 76% say that they have a digital device with internet access at home.

In Poland only half of the respondents (41.3%) understand the basic principles of the internet. 42.1% of survey respondents use the internet in daily life and 30.1% of the participants read and collect information online. 31.9% selected sharing information or communicating with others online. 35.1% of the Polish respondents are capable of finding information online and 59.8% of the respondents indicated having a digital device with internet access at home.

In Slovenia 53% fully understand the basic principles of the internet and 47% use the internet in everyday life. 59% of Slovenian respondents have a digital device with internet access at home.

73% of the Spanish respondents have a digital device with internet access at home and 59% are capable of finding information online. 45% agree to fully understand the basic principles of the internet.

**4.4 Interest in an active ageing course**

The general interest in an active ageing training course exists among survey participants throughout all countries.

52.8% of respondents in Austria, 77.4% of respondents in Spain, 70% of respondents in Slovenia, 43.1% of respondents in Poland, 38% of respondents in Denmark and 33% of respondents in France are interested in attending a course on active ageing.

In Poland, France and Denmark more respondents stated not being interested in taking part than being interested. In Austria, Spain, and Slovenia there were more people with an interest in active ageing training.

A minority is not interested in taking part in Spain, Slovenia and Austria: 22.6% in Spain, 30% in Slovenia, and 47.2% in Austria.
When the survey participants were asked about the **top priority topics**, the following topics were mentioned most frequently:

- Healthy ageing
  - Mental health
  - Physical health
- Mobility
- Travelling
- Lifelong Learning

Of course country differences occur, since needs differ according to the individual lifestyle, the place of living, and social and political conditions in the respective country. Nevertheless, the top priority topics are similar in the countries (see Table 20).
Table 20: Top priority topics

Source: Own illustration
However, a big share of older people is not interested in active ageing education and in participation in a training course.

**Non-participation** is explained in this way (see Table 21):
24% in Austria, 24% in Denmark and 23% in France say that active ageing is no priority in their life right now. 24% of the Austrian respondents, 41% of the Slovenian respondents and 8% of Danish respondents stated other reasons for non-participation like “I am still active enough”, “I don’t need a formal course” etc. 12% in Austria, 6% in Slovenia, 32% in Denmark and 11.6% in France say that they have no time for a course on active ageing. The high share of Danish respondents with limited time can be explained with their working status. Between 2% and 8% do want to take part in a formal course or need further information with the exception of Slovenia where 23% want more information about the course.

Table 21: Reasons for non-participation

<table>
<thead>
<tr>
<th>Country</th>
<th>Active ageing is no priority in my life right now</th>
<th>I have no time</th>
<th>Other reasons</th>
<th>I am generally interested but I need more information</th>
<th>I am generally interested but I do not want to take part in a formal course</th>
<th>I am not interested in courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>48%</td>
<td></td>
<td></td>
<td>24%</td>
<td>12%</td>
<td>19%</td>
</tr>
<tr>
<td>Spain</td>
<td>5%</td>
<td>24%</td>
<td>6%</td>
<td>5%</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Slovenia</td>
<td>41%</td>
<td></td>
<td></td>
<td>23%</td>
<td>24%</td>
<td>3%</td>
</tr>
<tr>
<td>Poland</td>
<td>23%</td>
<td>9%</td>
<td>0%</td>
<td>6%</td>
<td>8%</td>
<td>19%</td>
</tr>
<tr>
<td>Denmark</td>
<td>32%</td>
<td>24%</td>
<td>8%</td>
<td>3%</td>
<td>8%</td>
<td>23%</td>
</tr>
<tr>
<td>France</td>
<td>23%</td>
<td>16%</td>
<td>3%</td>
<td>0%</td>
<td>0%</td>
<td>16%</td>
</tr>
</tbody>
</table>

Source: Own illustration
5 Conclusions and Implications

Concluding all the research done, several recommendations can be expressed. The research mainly addressed older adults between 55 and 70 years – those who are younger and not those above 80 years. However, each training course in each country should choose a more specific target group (e.g. older adults with mobility restrictions, older adults without grandchildren etc.).

Also reasons for non-interest in active ageing or training courses in general have to be taken seriously. The most dominant answers for not being interested were that active ageing was no priority in their life and that they had no interest in formal courses. The interest in active ageing training course as higher in Slovenia and Spain, but low in all other countries, which has an effect on the degree of marketing efforts to be made in some countries before the course takes place. There will be major differences in the implementation of PPS-courses between countries because of the different needs that arose in the research. So modules will have to be selectable (topic variety).

Also hindering and enabling factors for developing an active ageing training course were deduced:

- **Hindering factors**
  - confusion about concept
  - unclear topics
  - lack of interest
  - reaching those who still work (and have limited time)

- **Enabling factors**
  - few offers in rural areas
  - partnerships with external services
  - available technology for e-learning
  - good household’s incomes among survey participants
  - high literacy rates among survey participants

The next steps are: arguing the selection of topics / modules, finding a balance between topics in the project application and the research results above, and choosing which topics are suited for e-learning and which are not.
Generally it should be taken into account that:

- Activation should take place and not just the giving away of information.
- National differences will occur.
- Main topics and sub-topics need to be optional and selectable.
- Existing curricula could be used for developing of concrete exercises.
- Teaching methods should consist of empowering methods and no top-down teaching.

A possible **structure for an active ageing training programme** could look like this:

How to use this training program

Module 1: Introduction. Aging and you
Module 2: Mental fitness
Module 3: Physical fitness
Module 4: Staying connected. The importance of social networking
Module 5: ICT-training and tablet training
Module 6: Food habits and healthy nutrition
Module 7: Learning and keeping up learning

Informative self help resource
6 Literature list


For more information visit our website:

http://www.activeageingproject.eu/