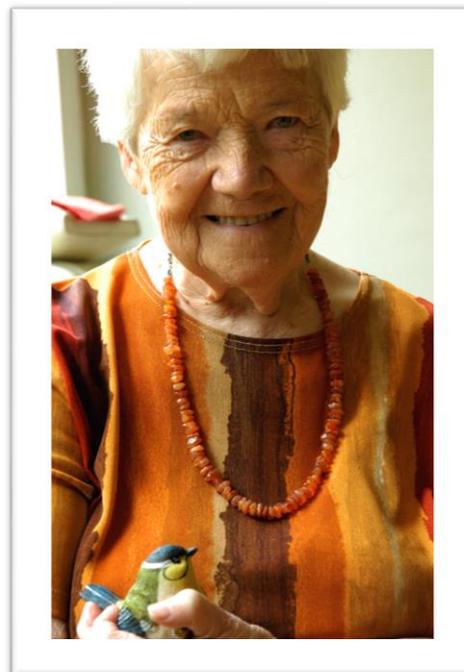
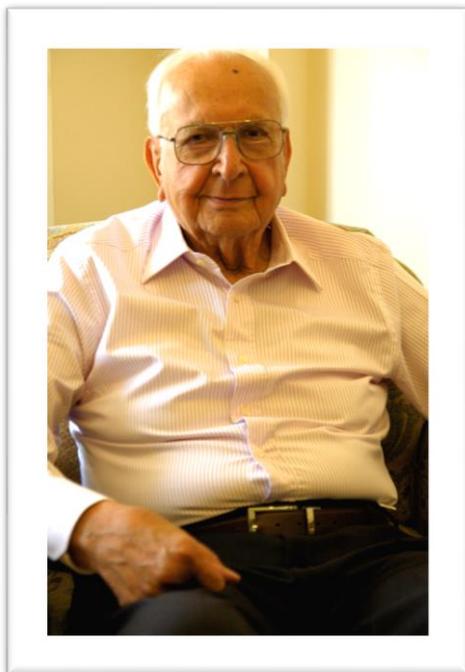


***Empowering Processes for Older People
in their Care Settings***

**A Manual of Good Practice from
the Grundtvig PEP Project**



This manual is based on the findings of Grundtvig Project 2013-1-DE2-GRU06-16260 3, *Empowering Processes for Older People in their Care Settings*. The project ran from August 2013 to July 2015 and comprised a partnership of the following agencies:

Der PARITÄTISCHE Landesverband Thüringen, Germany

Faculty of Health Sciences, Staffordshire University, UK

CURAVIVA Schweiz, Switzerland

Marmara Universitesi Pendik Egitim ve Arastirma Hastanesi, Turkey

The Social and Health Education Project, Ireland

Centre de Formation pour les secteurs infirmier et de santé (CPSI), Belgium

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INTRODUCTION

The age profile of Europe is changing: across the EU, the proportion of older people is increasing, and this is increasing the need to provide care. The ratio of economically-active to older people requiring economic support is currently around 4:1 across the EU, but by 2050 is projected to drop to around 2:1 (United Nations 2008) In addition, there has been a cultural shift across Europe: traditionally, care was provided by families and local communities, but with increased mobility and reduced family size, care provision is now complex. It may involve hospitals and residential homes; but also informal or professional care at home; supportive housing schemes; and assistive technologies such as alarm and monitoring systems (see EU 2007).

It is very important to regulate and monitor the care received because older people in care situations are vulnerable to neglect, abuse and manipulation. Across Europe, there has been a number of high-profile cases and the number of cases is rising (see European Reference Framework 2013). Although the causes are complex, a central factor is the disempowerment experienced when one is in need of care from others. Older people needing care are, by definition, a vulnerable group: in many societies, they tend to be socially compliant and reluctant to voice their own needs; and they may be isolated because of their disabilities or social setting.

The project and the partners

The project that gave rise to this Manual had its beginnings in a Grundtvig Contact Seminar organised in Antalya from 08 – 11 November, 2012 by the Turkish National Agency, on the theme of “Active Ageing and Solidarity between Generations”. At that meeting representatives of our respective agencies discovered that we had a shared concern for the ways in which older people may be vulnerable in care settings. We also all agreed that there was a multitude of ways in which older people may be empowered and supported to retain their sense of power, agency and control over their lives even if they were suffering from impairments and disabilities.

The final project partners were:

CPSI (Belgium)
Curaviva Schweiz (Switzerland)
Der Paritätische, Thüringen (Germany)
Marmara University (Turkey)
SHEP (Ireland)
Staffordshire University (United Kingdom)

The partnership we assembled brings together a unique blend of skills and experience. It includes partners that are directly involved in spreading empowering practices among older people and their carers through education (Ireland, UK); those

representing the education and training of future caregivers (Turkey, Belgium); and a range representing national bodies that have a direct influence on national policy, practice and the culture of care (Belgium, Germany, Switzerland).

The project group thus included a range of different professional perspectives on the question of empowering older people, and as we discussed this area of shared concern, we realised that we had much to learn from each other. The cultural and economic position of older people was different in different countries. Social and historical factors (for example, urbanisation in Turkey; or de-industrialisation in the UK) gave rise to distinctive challenges. The way in which health and social care was organised and delivered varied widely from country to country. Therefore we expected, and found, that there were many similarities in the solutions offered in each country, but also a number of interesting differences. These will be explored more fully in the pages that follow.

The structure of this manual

This manual is organised in two parts, which attempt to summarise the experiences of the participants, and the experiences of older people in each country. This latter section has been added to provide the crucial 'service user voice': the first principle of empowerment is to enable each participant to speak with their own voice, and name what is most important to them. So the two parts are designed to be read together.

At the end of each section there is a summary reflection on what may be learnt from it. At the end of the Manual, there is a concluding chapter that seeks to distil out practical recommendations for how empowering practices may be embedded across Europe.

The Participant section comprises a brief description of up to 4 activities from each country, with a summary of key comments by participants. No attempt has been made to include all the feedback responses from participants, but recurrent themes have been identified and illustrated with a few direct quotations from the feedback.

In the Voices of the People section, the methodology was that the hosts in each country identified 2-3 older people, couples or carers who were prepared to participate. They were invited to bring something to the meeting that represented their 'autonomy', and to speak to it in an interview with Catherine Cianci (Belgium). A short summary of that conversation appears in each case, alongside a photo of the participants.

In the final section, we reflect upon the learning gained from this project for us individually and collectively; and we seek to draw out from our experiences some general principles for promoting the empowerment of older people in care settings.

References:

The European Reference Framework Online for the Prevention of Elder Abuse and Neglect (2013) at <http://www.preventelderabuse.eu/elder-abuse> (accessed 6.2.13).

EU (2007) *Health and long-term care in the European Union*, Special Eurobarometer 283 available from http://ec.europa.eu/public_opinion/archives/ebs/ebs_283_en.pdf (accessed 6.2.13)

Scott, P. *Autonomy, privacy and informed consent 3: elderly care perspective*

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PART 1: PARTICIPANT LEARNING AND FEEDBACK

MEETING 1: ERFURT, GERMANY, 7-10 October 2013

Retirement and nursing home "Georg Boock"

The retirement and nursing home "Georg Boock" is centrally located in a residential neighborhood in Erfurt. It has 94 barrier-free single rooms and 15 are accessible double rooms. There are various supply possibilities in the immediate vicinity, including a medical center (general medicine, surgery and dentist), a pharmacy, a bank, two supermarkets and two restaurants. Furthermore you'll find nearby leisure facilities such as a park, a church, a theater, an ice rink. The organization specializes in the care of people with neurological disorders, dementia and Alzheimer's disease, people who tend to wander, pain management and gerontopsychiatric diseases.

The following notable features may contribute to the empowering of residents at the home:

- An advanced programme of dementia care including Occupational Therapy, daily structured care, biography work and relaxation therapy.
- The regular education and training of the staff as well as regular management coaching to ensure a high standard of care.
- A range of care options including full and partial inpatient care, assisted living, day care, holiday or respite care.
- Individual decoration of residents' rooms, along with encouragement for residents to bring their own furniture.
- The opportunity for prospective residents to have a 'trial period' in the home before committing themselves.
- Guest rooms for friends or relatives of residents.
- Community facilities: a TV room, a library, a music room, the bowling alley and a room for private parties.
- A range of options for meals: residents can eat in the dining room at their request, in the café or in their own room.
- A range of services: a car service, a laundry service, a concierge service, a hairdressing salon and fitness facilities for residents.

Further information: <http://www.asb-helfen.de/wohlfahrtspflege.html>

In what way did this process make an impact on you?



“It felt more like an actual home and less like a hospital environment.”

“This nursing home is well organised for all the needs of elderly people.”

“Especially some practical ways that I learned for dementia and Alzheimer’s disease are very useful for me. For people with dementia encompasses the particular therapy Occupational Therapy, daily structured care, biography work and relaxation therapy.”

“It is a good idea to offer day care.”

In what ways did you or did you not, experience this process to be empowering for older people?

“Café at the entrance of the home: a pleasant meeting place for people living there, and a welcoming place for visitors to spend time with residents. Potential to reduce isolation and encourage new conversations and friendships.”

“The objects around the home that had been brought in by residents: added to the sense of a ‘real’ home, and provided possible talking points to encourage conversation.”

“Residents were free to bring in their own possessions. I think that this must reduce a lot of the potential distress of parting with treasured items.”

“Residents were also free to bring in pets, as long as they weren’t dangerous. This would also reduce distress and offer the benefits of having pets to look after.”

“Open plan cooking areas and meeting places– encourage interaction.”

Any other Comments?



“There were a number of ideas that were quite simple yet clearly valuable. For example, there was a photo of each resident near the door of their room, along with their name. This must help people to get to know each other and must also be useful in orientating people with memory loss.”

“The imaginative outdoor space included a large aviary, and a ‘figure of eight walk’ aimed at people with dementia who are sometimes inclined to go walking and to get disorientated and lost.”

“It was good to see people interacting in positive ways in the social spaces (e.g. playing games), when often the stereotypical scene in a care home is of the chairs around the edge of the room with people sleeping or simply being bored.”

Multigenerational House "MitMenschen e.V."

The *multigenerational house* of the organization called "*MitMenschen e.V.*" offers for all citizens, senior citizens, single parents, children and youths in the city district and neighboring districts the opportunity to an open intergenerational meeting place. You'll find there integration services for migrants, various educational programs, offers of social support, vocational integration and mutual aid. The *multigenerational house* develops these offerings together with different stakeholders, including associations, cultural and educational institutions, foundations, voluntary agencies, media and local businesses. The houses are now an essential part of social life and make nodes of volunteering. The work of the *multigenerational houses* is based on four thematic focuses: age and care, voluntary engagement, integration and education as well as arranging household services.

Multigenerational houses are central meeting places where the cooperation between the generations is actively practiced. They offer space for group activities and create a new neighborly coexistence in the community.

The following features contribute to the empowerment of elderly people in the community:

- The interplay of generations preserves life skills as well as experience knowledge and promotes integration and greater cohesion between people - including and especially outside the family.
- The "open meeting place", such as a bistro or cafe, builds up the center of each house. Here people can meet, come together to talk and make initial contacts.
- The adaptation to local challenges: each *multigenerational house* produces customized and individual solutions for the small and large daily challenges of local people.
- European, federal and municipal funding for support services supplied through the *multigenerational houses*.
- Encouragement, training and support for volunteers.

Further information about the organization:

<http://www.mehrgenerationenhaeuser.de/mehrgenerationenhaus-moskauer-platz>

Further information about the funding program:

<http://www.mehrgenerationenhaeuser.de/>

In what way did this process make an impact on you?

“I was impressed by the background to the role of the centre: the fact that the provision for older people developed in response to a need that arose following the unification of Germany when younger generations moved away from east to West Germany, leaving many older people isolated.”

“We understood that the centre brings together every age group. This is particularly important to help to integrate disadvantaged groups including women, children, elderly people and immigrants, they need to be social and integrate to the society.”

In what ways did you or did you not, experience this process to be empowering for older people?

“The involvement of a range of age groups, rather than working with older people in isolation, which is potentially very valuable in promoting the social inclusion of older people and understanding across generations.”

“The fact that services were developed in response to actual needs also has advantages in terms of empowerment.”

“For elderly people to be social is very essential, also close to young generation gives them dignity. It is empowering for elderly people to be social.”



School for geriatric nursing

„DIE SCHULE für Berufe mit Zukunft“ [*THE SCHOOL for Jobs with a Future*] is a provider of (initial) education in the health sector. In Thuringia there are 30 schools for the education of geriatric nurses. The school trains geriatric nurses, but also pediatric nurses and other health care professions. The training for the profession of geriatric nurses is regulated in Germany by the federal law “Care for the Elderly Act (AltPflG)”. There is also the federal law “Act on nursing care”, which regulates the education of nurses. The three-year training in geriatric nurse includes at least 2,100 hours of theoretical and practical instruction and practical training of at least 2,500 hours (in total three years). Some schools offer the education part-time (in total 4 years). The training in geriatric nurse takes three years (or four years part-time) and ends with a state examination. The geriatric nursing schools play a major role in the education and are usually responsible for the whole education process. With modern instructional and teaching methods in the theoretical and practical instruction in the care of the elderly including on the job training sequences the students will be holistically prepared for the future job.

Key features of this School which contribute to the empowerment of elderly people in care settings include:

- The designation and training of specialist geriatric nurses, which recognizes the unique needs of older people
- A holistic and action-oriented teaching - through scenic play or holistic case management
- Close links between the academic and practical training
- Practical experience in a range of facilities (psychiatric hospitals, general hospitals, geriatric rehabilitation facilities, facilities for elderly assistance.)

Further information about DIE SCHULE: <http://www.die-schule.de/home>;
<http://www.die-schule.de/erfurt/willkommen>

Further information about the education in geriatric nursing in Germany:
<http://www.altenpflegeausbildung.net/startseite.html>

In what way did this process make an impact on you?

“I was very impressed by the in-depth training that care staff in Germany receives..”

In what ways did you or did you not, experience this process to be empowering for older people?

“The higher expectations regarding training and qualifications that carers require in Germany would seem to contribute to a higher status for the carers. It can only be empowering to older people to be cared for by people who are well trained and have a greater knowledge and understanding of people’s needs and how best to address those needs.”

“The well-educated nurses are very important in empowering for older people.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I think that it would be quite a huge change to social care in the UK to introduce this level of training. It would require a lot of investment, and other challenges.”

-



Der PARITÄTISCHE Thüringen - Links Welfare organization to member Care Homes

The Association/organization "*Der PARITÄTISCHE Thüringen*" is one of the big six leading welfare organizations in Thuringia, located in Neudietendorf, next to the capital of Thuringia (Erfurt). It is the umbrella organization for approximately 332 member organizations - from large assisted living facilities for people with disabilities (mentally and physically disabled) and nursing care homes, children and youth centers, women's shelters, family centers, counselling agencies for people with several social issues, to interest groups and self-help initiatives.

"*Der PARITÄTISCHE Thüringen*" is politically non-partisan and non-denominational. As the main focus of the activities *Der PARITÄTISCHE Thüringen* defines service orientation, political lobbying, social planning and citizen participation. Here, the goal of the Association shall be considered as "engine of social progress for a sustainable and humane society of all citizens, which is characterized by openness, diversity and tolerance"

Under the umbrella of *Der PARITÄTISCHE Thüringen* itself act 53 associations of nursing and elderly care. Among the wide range of services fall 28 inpatient geriatric care facilities and 60 outpatient care services and social centers. In addition to that you'll find day and night care services, respite care, outpatient hospice services, day care for people with dementia, family groups, outpatient assisted living as well as low-threshold care services.

This service contributes to the empowerment of older people in care settings by:

- Developing and promoting social infrastructure, by initiating neighborly, self-help and regionally oriented networks and promote social dialogue and participation.
- Representing the interests and needs of the member organizations towards funders and decision-makers
- Organizing training events for the staff and also for the management of the member organizations.
- Negotiating mandates to the various payers (nursing care insurance, health insurance, social security benefits).
- direct feedback to the member organizations through regular working groups, technical information and device individual counseling and support.

Further information: <http://www.paritaet-th.de/>

In what way did this process make an impact on you?

“I was simply aware that the umbrella organisation provides support for a range of organisations, including those that we visited.”

In what ways did you or did you not, experience this process to be empowering for older people?

“I don't think that were opportunities to see direct examples of empowerment through this process.”

“Maybe we accept this experience such as management style of the home cares to elderly people.”



MEETING 2: BERN, SWITZERLAND, 25-28 March 2014

Domicil Schöneegg, unique ways to identify each room

Domicil Schöneegg is a care home for elderly persons. About 81 residents live and 75 persons work there.

In most of the care homes in Switzerland each person has her own room. In Domicil Schöneegg we have seen a speciality to identify each room. Next to the residents roomdoor there is a small cupboard with a glass window to the corridor. The resident can fill in whatever she likes to present herself to other residents, to employees or to visitors. On the other hand it is also a possibility to identify her room and maybe also a way to find back to her room, when she recognizes the objects in the cupboard.

Walking through the corridor we have seen cupboards with pictures of the family, the husband or animals, with objects like flowers, small dolls, handicrafts and so on.

This practice contributes to the empowerment of residents by:

- encouraging creativity and self-expression
- giving a sense of security: each resident recognises their own room and feels safe in it
- encourages residents to treat their room as their home
- gives each resident the opportunity to tell a story about their life to interested persons



Further information: <http://www.schoenegg.domicilbern.ch/>

In what way did this process make an impact on you?

“...Like houses on a street, each room is different and offers a little bit of knowledge of its inhabitant.”
“Overall it conveyed personhood, uniqueness, sensitivity, gentleness and worth in a context of a care-home setting where sometimes there is a danger that these aspects can be diminished.”

In what ways did you or did you not, experience this process to be empowering for older people?

“At first I only perceived it like a nice touch to allow the elderly to be at home. Now I think it can also be really useful to help them locate themselves and may procure a safer feeling if they are disoriented. This “safer feeling” was also pointed out by other PEP-participants.”

“I felt the clients were able to express their individuality to others whilst also having privacy in their own rooms.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I suppose the challenge would be getting the cabinets provided.”

What would help to deepen the understanding and knowledge of the process?

“...It would be good to hear the voices of the residents as to the impact and significance for them of this process.”

“We would need some advice about the choice of display, safety aspects etc”

HealthRHYTHMS empowerment drumming



HealthRHYTHMS is an enlivening group empowerment-drumming program, which research has proven significantly increases the disease fighting activity of circulating white blood cells. The program is all about learning, discovering, enjoying, and sharing musical insights that can help everyone improve quality of life. *HealthRHYTHMS* includes a protocol, which consists of ten

steps. The program's lead researcher was neurologist, Barry Bittman, MD, CEO of Yamaha Music & Wellness Institute, and an expert in US healthcare reform.

Zentrum Eymatt is a new built care home for elderly persons, with about 38 residents and 32 employees. They offer *HealthRHYTHMS* as empowerment drumming to the residents. Once a week a group of 6-8 persons and a "teacher" sit together and starts to work with different instruments of rhythm. For example each person drums the name of an animal and the rest of the group has to guess what it could be. There is a lot of laughter and teasing each other.

The involved employees report a good experience with this special empowerment of the residents.

This practice contributes to the empowerment of residents by:

- Bringing a sense of Fulfillment, Enthusiasm and Personal Accomplishment
- Promoting Team work, Camaraderie and Support
- Increasing Attentiveness, Active Participation, Socialization
- Positive Mood effects including Happiness, Contentment, Laughter & Joy
- Enhancing Self-Esteem

Further information:

<http://www.zentrum-eymatt.ch/>

<http://www.remo.com/portal/pages/hr/benefits/7+Evidence+Based+Elements.html>

In what way did this process make an impact?

“It was clear that the residents had much fun and enjoyment by participating at the drumming session.”

“This process is simple and easy to organise”

“The experience gave me the ability to be able to express different emotions and was very energising.”

In what ways did you or did you not, experience this process to be empowering for older people?

“People who could not speak were still able to participate”

“It clearly increased participants’ sense of wellbeing”

“... Being able to let go of our thinking mind and just going with the flow is very freeing ...”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“ The biggest challenge is the practicality of training a facilitator to lead these sessions.”

“ ‘empowerment drumming’ has a direct application as a tool for facilitators to use with groups to enhance health and wellbeing”

“It’s another way to get in touch with elderly people who may no longer be able to enter into communication verbally.”

What would help to deepen the understanding and knowledge of the process?

Some persons would like to practise this directly with other people and do the exercise with elderly people

“it would be good to get feedback/evaluate from various participants on different courses how they experienced it and its benefits.”

MixMax House of Generations

Domicil Schöneegg is a care home for elderly persons. About 81 residents live and 75 persons work there. It includes an **Inhouse daycare facility for children, entitled Mix Max**



The inhouse daycare facility Mix Max for children gives the residents as well as the children the possibility to meet on occasion. They also organize common events like playing theatre, playing cards or just reading stories and much more.

From time to time also birthday celebrations or barbecuing in the garden take

place for the children and the residents. The residents become something like a grandmother or grandfather for the children, so the contact can be very close. If a resident dies they also organize a ceremony for the deceased person. It gives the children the possibility to “say good-bye”.

If an elderly person lives in a carehome, they often miss a daily routine and the contact to younger persons or children. So they get in touch with “problems” and also happy moments, when they are together with the children. On the other hand the elderly persons can take a role as grandmother or grandfather. In this “function” they feel needed and helpful.

This practice contributes to the empowerment of residents by:

- Enabling them to meet and make friends across the generations
- Developing a sense of purpose and belonging
- Helping them to continue in a parenting role

Further information: <http://www.mix-max.ch/de/jungundalt/generationenhaus.179.html>

In what way did this process make an impact?

“It’s not really special that children visit carehomes - the speciality of MixMax is that the kindergarden is directly located in the carehome.”

“MixMax is an interesting methodology to bring older adults and young children together to spend some time with common activities like storytelling, singing, painting and so on.”

“The lay-out of the building provides the opportunity to facilitate this living community of different generations.”

“I just thought it was wonderful for the residents to have children share their home and have easy access to each other.”

In what ways did you or did you not, experience this process to be empowering for older people?

“There’s a free choice to be involved in the encounters and organised activities”

“Residents keep a sense of responsibility for the interaction with the children”

“it supports social interaction and reduces isolation of the residents”

“It gives the possibility to form relationships with the younger generation”

“...Interaction with young people can have the effect of keeping them young in spirit”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“It would be difficult to bring this model to our country. There are challenges in health, safety, policy and procedures as well as in limited funding.”

“...there is definitely potential ... in this process”

MEETING 3: ISTANBUL, TURKEY, 10-13 June 2014

Intergenerational Exchange (orphans and older people)

There are two kinds of provision for elderly people: one from the government as a free service to elderly people who are poor and the second one supported by private organisations. Darüşşafaka is an extraordinary example among the other private home providers in Turkey because the elderly people who live in Darüşşafaka Residence are very rich. The organisation first was founded to educate orphaned children by donations. Since 1997 donors become members of the Darüşşafaka family and the organisation therefore undertakes to look after all their needs until the end of their life. So their donations will be used to educate the orphaned children and the elderly people (donors) have been met all their needs till end of their life. Darüşşafaka Residences are categorized into different class related to their target groups' needs, Şenesenevler Residence serve the elderly people who are independent, don't need any help during their daily life. Maltepe Residence serves elderly people who are dependent need help, and immobile.

This project may be understood as empowering older people because:

- It incorporates them into a larger 'family' which includes orphaned children
- It reserves dignity and independence
- It gives the residents a social role and contribution



More information: <http://www.darussafaka.org/residences/senesenevler-residence>

In what way did this process make an impact?

I have never seen or heard about a similar service / care institution, where older and rich persons donate their money to support orphans and then got the possibility to live in a residence till they die. It is an interesting model.

It was very interesting for me to see, how the residents are living in this residence. It is a real residence for old people – but it is not a care home. The connection between the residence and the orphanage was very impressive and it is an interesting way of making a connection between the orphans and their supporters from former times.

It was really interesting to see how this project had its roots in philanthropy. It is an clever and effective project – though I have some reservations about creating elitist communities.

This place is somehow equivalent to what we designate as *Seigneureries* (« home for seniors). On an ethical point of view, we strongly questioned on the system based on donation process. In some ways it looks like a Life Lease Housing. When the elder person deceases, immovables and other become the property of the rest home. The elderly has in return a quality of life environment.

In what ways did you or did you not, experience this process to be empowering for older people?

This place of life allows the elderly of same social level to gather. They likely share common values, leisure, similar interests. The living places are designed in order to the elderly people might have activities comparable to the ones they used to have before entering the rest home (e.g. swimming-pool, jacuzzi, card game, fitness room and so on). . . . There has been a real elegance, friendliness and so on.

I can imagine, that the possibility to help children in special family situations can be empowering, that means they feel needed and they get into contact with the child they support. As well as to know that you have a nice home for the rest of your live, where you are welcome and cared, is surely helping to get older.

I was also pleased to learn that some of the people who were resident were still actively involved in running their businesses, or would move out for the summer and go to a holiday residence.

I think that, within its context, it gives a high degree of respect and autonomy to older people. It also means that they belong within a sort of family structure, which I can see is important

I didn't really see how this process was empowering for the older people concerned as I think that these older people were already empowered . . .

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

We can communicate this kind of practice. But it seems poorly generalizable or transferable because this practice appears as a "luxury" solution.

I have thought a lot about this. I think it provides a lesson in how to offer care to ethnic minority communities who are used to supplying care within the family, since it provides an alternative family. But it would need to be adapted to each minority.

Family support for older people in Turkey

Most elderly people are not so far from family support in Turkey. Especially in the rural areas or small cities of Turkey, elderly people usually live together with their daughters or sons as a big family. In the big cities elderly people live in their house alone but still there is a close connection with the family, as in most cases the grandmothers look after their grandchild in their house. Only a small proportion stay in elderly home care, as in our culture staying in elderly home care makes many people unhappy. They feel themselves disliked or undesirable. Most of the elderly people who stay in home care don't have any children or close relatives to look after them.

However in the last 20 years more elderly people who have regular retirement salary prefer to stay in elderly home care.



Traditional family support and care may be empowering for older people because:

- The person still has a role and identity as they contribute to family life
- They will remain in a familiar context and setting
- They are surrounded by people who know them well and have emotional ties to them

In what way did this process make an impact?

In Switzerland many years ago there were also more generations living in the same household especially on the countryside. Today it is completely different – more people live by themselves in different places. Therefore a lot of elderly persons needing care are in carehomes. For me it is a question of culture and obviously Turkish people are more family oriented than maybe persons living Switzerland.

I understood from my visit that older people in Turkey did not do any work they retired early and sat around all day to be waited on by the younger family members. I believe this may put a heavy burden on family and this burden may fall on the younger members

This is how it used to be in Ireland also but today there are a lot of older people living in nursing home settings. This impacted me as I believe that it is more conducive to an older person's emotional and psychological well-being to continue living on in their natural environment.

In what ways did you or did you not, experience this process to be empowering for older people?

I think to get the support from the own family gives the elderly person the feeling to be loved and cared by the relatives. And this can be more empowering than to stay in a unfamiliar place, where they are lonesome and to not know anybody.

This may be empowering for older people if they remained active and involved. If they expect their family to wait on them and the older person just being passive I believe they would begin to grow old at a very young age. I asked if Turkey had any active retirement groups the answer I got was that Turkish older people did not want to be active.

It was interesting to see the extent to which loneliness was identified by the medical personnel as a key issue among many such older people who have been uprooted from their own local communities.

They are empowered by the families on one hand but dependency is seen on other hand that elderly are not expected to do their work even sometimes the household which may be leading to some long term conditions like obesity a problem for health professionals.

Respect and morals associated with looking after and taking care of elderly means that they are empowered 'listened to' and their advice and suggestions taken on board which is a positive aspect of this society.

Another question is to determine if one single person might be at the same time husband/spouse, care giver, psychologist, physical therapist and so on. It is difficult to assert that this "good practice" in all cases favors the autonomy of the aged. It tightly depends on a set of variables : familial dynamics, personality of the aged, quality of familial ties, life environment and so on.

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

The notion of "enlarged family" is definitely an application. An old person, even if living alone in large cities as Istanbul will always get some help from cousins, family friends and so on. This "good practice" invites us to question about our own values, the place of the elderly in a society where the winning process, the need for performance and similar items are more valued than experience, wisdom,...

Semi-independent living within a building

There are many private elderly home care facilities in Turkey, and one of them is KASEV. The total number of the residents is 135. The main aim of the organisation is to socialise the elderly people and in order to achieve this aim there are many activities are organised. Beside this there are 24-hour health services, social, occasions game activities, and special needs provision. KASEV provides special health care and service for any dementia and Alzheimer patients with severe impairment of intellectual capacities with a scientific approach.

There are a lot of activities for residents such as hobby kitchen, library, music and painting room and social activities example visit to popular destination, or organise social events.

This process may be empowering for older people because:

- The whole range of therapies is available in one place
- Residents can have varying degrees of independence depending upon their care needs



Further information: <http://www.kasev.org/tasarim/kasev/default.asp>

In what way did this process make an impact?

I believe this is like Ireland In Ireland some people do well in nursing homes and live a long life others do not. It probably depends on the Nursing Home and on the individual.

This process made an impact on me as this semi-independent living within a building seemed to work well for the residents involved. There was a nice atmosphere there and a sense of freedom with an active social life amongst the residents.

This was a very worthwhile visit to a remarkable community. I experienced great hospitality and a wonderful sense of community. I loved being able to experience the environment and atmosphere in the building which to me came across as safe, warm, welcoming, free. I really enjoyed meeting the different people who lived there, particularly one woman who kindly spoke to us at length and brought a few of us to her own apartment.

The old people get support from carers and do not have to live on their own. It is not an empowering process, but it is support for the people to manage their life. Without the help of the carers, they would have to deal with their affairs by their own.

In what ways did you or did you not, experience this process to be empowering for older people?

When we were playing Bingo together with the residents it was nice to see how motivated the persons were to participate and also to win. This kind of empowerment makes people laugh and taking part at the daily life.

The concept to join a care unit besides the rest home is particularly interesting. As a matter of fact, any one may have a quick access to health care. In addition, high technology is available thanks to the venture between care for elderly – clinical care for other people. This may lead to a good “profitability” of the process.

Some activities favor the autonomy of the elderly. We were particularly attracted to the “urban promenade” which allows the simulation of a city walk (crossing a street, get down the edge of the sidewalk and so on) This may also favor the reassurance of the elderly who scares to go outside. Supermarket space is also an activity favoring the autonomy.

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

I just wonder if this facility is only accessible to those with their own private funds and if so what about people who don't have money behind them but might need and benefit from this type of facility? Is there any government aid in place to help those who don't have a lot of money but might do very well in a facility like this?

I think that people in the UK desire to have more privacy and to be more individuals. This can cause problems in a care setting and would make it difficult to implement this model in the UK.

MEETING 4: CORK, IRELAND, 20-23 October 2014

SHEP training programme

The Social and Health Education Project (SHEP) has a 40 year track record of providing safe, inclusive spaces where people can learn about themselves, develop their self-confidence, communication and relationship skills, enabling them to live full, healthy and responsible lives. SHEP offers a range of specialised practitioner training courses to those who have completed prior trainings in Personal Development, Social Awareness and Group Facilitation. These are

- i) 'Specialised Tutor Training' which prepare people to work as Community Tutors, facilitating groups through SHEP's Community Education Programme,
- ii) Community Advocacy Training which prepares participants to work as volunteer advocates through SHEP's Cork Advocacy Service, and
- iii) Community Facilitator Training which, it is envisaged, will prepare people to work as volunteer facilitators in communities and with voluntary groups. This model of facilitation and practitioner training for community health and well-being is unique in Ireland.

Participants usually start with the SHEP's Certificate in Personal Development (year-long and part time) which is a unique programme which has been refined by the project over many years. Co-facilitated by two experienced psychotherapists participants are helped to examine the way they think about themselves and those around them. They are also helped to recognise their emotional responses to given situations and the ways in which they typically manage these responses. Those on the Grundtvig visit to Ireland experienced this methodology in action in the workshop facilitated by Rose and Dolores where they were invited to reflect on 'their own aging' – the question participants were asked to reflect on was 'What do I see as opportunities and challenges for myself as I get older?'

This training contributes to the empowerment of older people by:

- empowering the students themselves through the distinctive training methodology
- preparing students to facilitate the same empowerment and transformation of individuals and communities.
- Preparing people for specific roles (such as the advocacy service) that act to empower older people in care settings

For further information on SHEP's training programme visit www.socialandhealth.com

The Experiential Learning Cycle



In what way did this process make an impact?

“It is only when someone is clear to himself that he may be available to listen to the other.”

“... the progression cycle is interesting, starting from [personal] representations and experience, to ultimately reflect on the transfer conditions in his/her own practice of supporting assistant. . . We could reflect about the setup of such a training program for volunteer candidates in hospital setting and/or rest home.”

“ . . .the combining of the training with psychotherapists is really needful, because especially volunteers in the social sector are vulnerable for burn-out-syndrome.”

In what ways did you or did you not, experience this process to be empowering for older people?

“This experience may help the elderly people to express their wishes, their needs and also to make up their mind.”

“Ahead of the process, the fact that the accompanying persons are trained in such a way has an impact on the autonomy of the elderly. . . helping the elderly to formulate realistic objectives having a full sense for him/her ... but also to respect the dis-interest, the demotivation and so on.”

“The “secret” of the group facilitation might be the answer to the development of exclusion that we see in these days in our society. People want to belong to something. . . “

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I was particularly struck by the fact to impose, nearly naturally, a cycle of continuous training and reflexivity to those persons who wish support elderly people. I believe this point very positive because, in Belgium, we also have many volunteers who wish to do it but without really challenge themselves; this may sometimes lead to real concerns on the human and psychological level.”

“As written in the Advocacy Service the training programmes should be compared with similar German training programmes – to identify similarities and differences to think about adopting the training programmes in German structures.”

“In the context of arts and health I can see how many arts practitioners use their own experiential learning within their arts practice. The SHEP training demonstrates how challenging life experiences can be beneficial when working in the wider community and also shows the value of group work, recognising how much people learn from each other.”

Cork Advocacy Service

Cork Advocacy Service offers people living in residential institutions contact with people trained in independent advocacy separate from and outside of the institutional environment. The purpose of creating access to independent advocates is to support residents to speak up for themselves and/or speak on their behalf as required in relation to anything that may be perceived as a problem or concern by the person. Independent advocacy is also available to people, who have reduced capacity to make decisions and speak for themselves, to ensure the person's will and preference remain central.

As well as providing access to independent advocates individually, the advocacy service also support group advocacy through the facilitation of Residents Meetings which allows for people to put forward concerns collectively and so further enhances capacity for empowerment.

The process is a reflection of a cultural shift in the care and support of older people which frames the support within the context of rights and entitlements. This is an ongoing process, moving away from a best interest approach to one based on the will and preference of the individual. This, in part, stems from an acknowledgement of the history of institutional abuse and the continuing potential for the disempowerment of individuals and groups that are marginalised and so vulnerable to abuse. SHEP trains its own volunteers to provide this local service though there is also a national volunteer advocacy training initiatives (see link <http://www.thirdageireland.ie/what-we-do/52/sage-e---support-and-advocacy-service/> for further information).

This process empowers older people in care settings by:

- Enabling them to speak up for themselves
- Ensuring that the person's will and preference are respected
- Facilitating group meetings to discuss shared concerns

The logo for SAGE (Support & Advocacy Service for Older People) features the word "sage" in a lowercase, sans-serif font. The letters "s", "a", and "g" are green, while the letters "e" and "e" are blue.

Support & Advocacy Service
for Older People

In what way did this process make an impact?

Many expressed interest in the potential of this model for their home countries as an empowering model of good practice.

“It is interesting to know if some persons take the time to defend the interests of the elderly who cannot do it. ... what we were particularly concerned with is the quality of the proposed training, in terms of training hours volume as well as in contents”.

“One of the greatest experiences in our meeting: The “Advocacy Service” is in my point of view the best way to organize a high level of transparency between affected persons (dependents) and external parties... Especially the training for these volunteers to organize a network made the impact for me.”

In what ways did you or did you not, experience this process to be empowering for older people?

Generally the participants commented on the value of independent advocacy as potentially empowering. However more significantly they commented on their experience of seeing for themselves on the visit the nature of the relationship, warmth and trust, between the advocate and the residents.

“On the one hand, this independent advocacy can help to give empowerment to an older person. But the basis is a very deep relationship and a trustful understanding of each other ... such an advocacy program can help older people to stay longer in their homes or generally stay longer autonomous, ...”

“During the visit in a care home together with an advocate I could see the warm contact between the lady [advocate] and the residents. It was obvious that she was really welcome and that the persons trust her.”

“The fact that the advocates are actually based in the hospital and are thus able to make patients aware of the service is immensely valuable.”

“Many older people feel thankful for the help they’re given and notice how busy the care staff are so don’t wish to speak out and complain or ask for more. Relatives also can be reluctant to ‘rock the boat’ in case their questioning and speaking out has negative repercussions on the care of their family member. “

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

There was genuine interest in the training for and potential of voluntary and independent advocacy roles.

“As a training centre we could reflect on the setup of such a training in partnership with Ireland“

“ The first step would be, to compare the theoretical basics of the volunteer- training with the manuals of volunteer- work in the elderly care sector here in Germany (differences/ similarities).”

Active Retirement Group (Monday Club)

The purpose of the Monday Club is to provide an outlet for retired persons or those wishing to avail of companionship through monthly meetings, outings, interest groups and classes. It is organised by older people for older people. A local Ceoltas Group of musicians was playing traditional Irish music for the Grundtvig visit and the Monday Club



Usually, the club meets on the first Monday of the month. The club meeting starts with tea and a chat, followed by an update on activities. Next there is usually a guest speaker followed by an activity such as Bingo or music. There are also regular outings and trips. Members pay a small cover charge towards hall rental or class expenses but most funding

comes from the Health Services Community Section plus incidental occasional grants or gifts from local sources. The local Education and Training Board, , provides tutors fees for a range of classes on a range of topics from crafts, fitness, personal development for health, and wellbeing.

The Monday Club was empowering in the way it:

- Championed the skills and individuality of the participants
- Appeared to have a culture of support and encouragement as a basis for the organisation, with little evidence of hierarchy
- Ran various courses and were seeking more to engage in
- Provided further opportunities for learning new skills and developing interests
- Promoted exercise and wellbeing activities
- Provided a supportive facility for social integration, which was noted as especially valued by people who were carers, or widowed or new to the area
- Promoted creativity as beneficial and accessible to all
- Encouraged participants to go on outings together
- Appeared to be tremendous fun! (Laughter is great for wellbeing)

The active retirement group model is replicated across many communities in Ireland] by different organisations. For more information see <http://muintir.ie/>

In what way did this process make an impact?

Aspects that most commonly were named as having impacted participants were: the social connectivity the club created; the fun and enjoyment of life evident in the older people; the well organised nature of the club; the varied activities – arts, music, dance, educational courses, arts, crafts, organised outings and holidays.

“I was very impressed by the high degree of motivation of the elderly people and their involvement in the “every day life” of the society. They have given tasks to everyone according to his or her talents”.

“The way of maintaining the (Irish) culture (music, etc.) was impressing for me.”

“The spirit of adventure and openness to learning new things and supporting each other to participate. The group were very active in many diverse ways and were interested in discovering new avenues to explore.”

“The thing that was most impressive to me about this project was the links with SHEP and engagement in learning courses. I was also impressed by the the ways in which they clearly endeavoured to make links with the wider community, for example with our project, and also with schools.”

In what ways did you or did you not, experience this process to be empowering for older people?

“It is empowering to be involved in the decision-making-process e.g. for which kind of free time activity they would like to do the next Monday.”

“For me it was interesting to see, that they do not only chat, but have also the possibility to dance, sing, make gymnastics and a lot of other things together.”

“There was also empowerment through the opportunities for lifelong learning . . .and the focus on experiential learning would be immensely valuable and confidence building in this context.”

“With the obvious culture of mutual support, there was also clearly a great encouragement to volunteer within the group . . . so this could also contribute to the empowerment of group members.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“The challenge is to keep it going on. Somebody has to organize it and be responsible for the “socializing” and the concepts behind the meetings.”

“There are some ways/institutions in Thuringia which are organising these networks, but there is still a lot of potential/need to connect the different offers to generate synergy effects (to exchange experiences).”

“I think it can take time to build a community group that works so well with people taking shared responsibility for various aspects of the organisation.”

Talking Mats



'Talking Mats' is Social Enterprise based in Scotland. It is the company name for a tool that improves communication and so enhances a person's ability to remain included in their own lives and in any decisions taken in support of them. The method was illustrated in a visit to Cobh Community Hospital for older people in Ireland. It is also a tool for independent advocates who are

supporting individuals who may not communicate through verbal language. The vision statement on the www.talkingmats.com website states:

'Talking Mats is a social enterprise whose vision is to improve the lives of people with communication difficulties by increasing their capacity to communicate effectively about things that matter to them. Our innovative, award-winning communication tool is based on extensive research and was designed by Speech and Language Therapists.'



It is one example of creative ways in which we can enhance communication with people who are marginalized through loss of speech or reduction in capacity to communicate. There is a cultural and legal shift happening in Ireland which will enhance individual rights to self-determination. These shifts

support empowering processes for older people because they are challenging the established power of those deemed to have authority. Talking Mats is one way of translating these shifts into practice. Through making all efforts to communicate we support the right of the person to stay central in their own life.

The process is empowering for older people because:

- It resists the marginalization of those who find it difficult to speak
- It therefore supports the right for each person to have their desires and wishes known

Further information: www.talkingmats.com

In what way did this process make an impact?

“I am impressed by the use, the methodology and the response of the patient ... In our following training programs . . . This card game implies much interest because it allows: - entering in touch in a funny way, working the relationship with time (past, future); exercise the memory, and so on. We might insert this “good practice” into our training program.”

“Talking Mats is a great way to get information from people who can’t talk in a proper way we do every day. It helps to make decisions, to talk about other things, it is good for different scenarios.”

““Talking mats” seems to be a very easy method without any long need for preparation and sensitization of the people you want to work with.”

“The picture cards can be limiting and I found I needed to customise the kit when using it in an interview situation.”

In what ways did you or did you not, experience this process to be empowering for older people?

“ It is a method to let people remember her life, to start to tell about it and it to feel the emotions. For me it is a really good instrument to empower older persons.”

“I only saw one person using the tool with the support of a facilitator. The demonstration, whilst valuable, was also limited by the fact that it was not a very natural context, given the ‘audience’ of project participants. ... It would have been useful to also observe the resident without the Talking Mats to notice the conversational limitations, i.e. see his disempowerment without a simple communication aid.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I have talked about this method to our training department and they were interested to get more information about it ... I discussed taking mats in our house. Our activation therapist knows this method and she will try to introduce it in our house.”

“I would certainly consider using Talking Mats if I was undertaking research with older people with dementia. I would need training in the approach in order to do so.”

“The conversation is quite slow and requires a quiet uninterrupted environment to allow greater concentration with minimal distractions and plenty of time. “

What would help you to deepen your understanding and knowledge of the process?

The general feedback was that Training would be the major steps to bring the Talking Mats into any setting and deepening understanding. It was also felt by some that “more examples of the ways in which insights gathered through their approach have been used to empower older people”

“Possibly viewing some training videos would help people to understand how the Talking Mats can be used to empower people in different situations, Case studies demonstrating how communication is enhanced in varying ways according to whether someone has dementia, head injury, a stroke or cerebral palsy might be useful. Also an example of how Talking Mats can be used in Advocacy, e.g. to assist with major decision making such as choosing where to live.”

MEETING 5: ERFURT, GERMANY, 9-12 December 2014

“Stiftung Wohnen Plus...”: Vision and Process of development

The “Stiftung Wohnen Plus...” (Foundation living plus...) is a non-profit organization and was founded by two brothers (Family Bokemeyer) who had a vision on how they want to live as elderly people – but such a place doesn't exist. So they turned her vision into reality in Weimar, Thuringia. In short: „Living together instead of alone” is the basic idea. The “Stiftung Wohnen... plus” is a new idea of community living, based on the principles of a family: with a Neighborhood, with friends and with a help-yourself-concept as a key element, empowerment as a different concept to autonomy. For the residents, help, support and care will be offered if it is necessary, but it is not a must. The goal is to stay in the own home as long as possible, best until the end of the life. There are for living areas, spread across the city. Two high-rise buildings in the northern area of Weimar with 79 and 50 apartments, the “Kammergut und Mühle Tiefurt” (an area in a village and an old Mill near Weimar) with 50 apartments and an old rectory near the “Kammergut” with 8 residential units.



The "Stiftung Wohnen Plus..." in Kammergut Tiefurt was founded in 2008 by the Bokemeyer family. An essential component of the concept is the “WIR ‘Wohnen im Ruhestand’ e.V.” club, which is not a part of “Stiftung Wohnen Plus...” but they are working together very closely. The club members organize a variety of activities.

This process is empowering for older people because it:

- Provides them with an active community in which to participate
- Helps them to live independently in their own home for as long as possible

For more information: <http://www.stiftung-wohnen-plus.de/>

In what way did this process make an impact on you?

“‘Action against isolation’ is a phrase which I took from my visit to ‘Stiftung Wohnen Plus’ and continued to resonate with me on my return to the UK. . . . The ideas and possibilities presented to me seemed extremely innovative and I was intrigued by the fact that the German government seems to have encouraged and supported entrepreneurial thinking. The use of abandoned buildings is something that is of particular interest to me especially as it has been done with a genuine desire to create community cohesion, even architectural decisions seem to have been sensitive to community living and linking the present to the cultural past.”

“The impact this had on me was of a personal nature and made me reflect on whether or not this is an environment in which I would like to live myself as an older person. I liked the idea of community sharing resources and being available to each other.”

“It reminded me that a lot of things can happen with the will and dedication of a few people..”

In what ways did you or did you not, experience this process to be empowering for older people?

“As older people are able to remain part of an active community it seems they are empowered to be independent for longer. The placement of accommodation next to purpose build amenities such as shops, hairdressers and pharmacies also enables independent living.”

“The result of the vision was a structure of accommodation and community living that was conducive to empowered living for older people..”

“We were surprised by the informality of the commitment (no written commitment, no charter, ..). All that was required was the will to be part of the project.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I believe the biggest challenge is to look at this model in a wider context and consider the themes which it has highlighted which are common across Europe

“The immediate opportunity is bringing the information and sharing my experiences. The main challenges would/could be getting the concepts and ideas across.”

“Stiftung Wohnen Plus...”: Co-located living in Apartments (mixed-ages)

The Foundation “Stiftung Wohnen Plus...” uses a special concept in Weimar- Nord and Kammergut Tiefurt. The slogan is “living together instead of alone” which also means, young and old should live together.

In Weimar- Nord in the high rises, there is a special kind of outpatient care. You can rent a flat and it's open for everyone, younger families or older people. This will not depend on your personal care situation. But if you are getting older and you need care someday for you or your family member, you can use the nursing service who is part of the building.

That's the reason why also younger people and even families are moving to “Stiftung Wohnen Plus...” and living there, mixed ages, until they need care. Younger and older people live together in the same house, but with the point of view for autonomy. This arrangement supports the empowerment of older people because:

- They don't need to move again when they are getting older.
- They don't need to change their whole environment, which is a problem by dementia
- They can get to know other people in the house.
- They are not always together only with older people
- They can easily use nursing service as an inhouse-offer, but they don't have to.
- It is possible to use a different nursing service (protected by law), although you live in the house.



Further information: <http://www.stiftung-wohnen-plus.de/>

In what way did this process make an impact on you?

“It’s an idea which to me seems simple and beautiful but one which is often overlooked. It also struck me that the sense of support and companionship works both ways as younger residents inevitably benefit the guidance and influence of having older neighbours within their community.”

“This left me with questions as to why we do not have a system like this in Ireland. I particularly liked that we saw and spoke with many of the people living here and I could see how the concept worked in a real way.”

“It struck me that the opportunity to purchase at a good price the tower block was very fortunate, but was possible because a vision existed.”

“There are examples of organizational method that we can submit to ours students (future care home directors and geriatrics) and invite them to imagine concrete and realistic proposals to activate in our political contexts”

In what ways did you or did you not, experience this process to be empowering for older people?

“The co-located living model allows people to remain in their own homes and have their homes adapted to suit them as their personal needs change. It seems empowering to me that people will have the option to remain in their homes until they die. Additionally community living enables older people to remain useful members of society as younger residents also benefit from the advantages of co-located living.”

“The availability of a community space that was encouraged, as well as the option of privacy in your own room was important. Meeting the two house dogs, who were busy competing for the most attention, was very homely and important – they made big fans from all our group and I imagine they are very important for the residents.”

“They had choices to live with and sharing with one another and the community. I believe this is a very empowering lifestyle for anyone.”

“It is an urban example of the possibility of maintaining the elderly in an individual and personal space, while protecting it by appropriate infrastructure integrating socialization modalities.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“This is a big question as it is more to do with how our system of care for older people is run in Ireland as opposed to my own workplace. However I have taken every possible opportunity and will continue to do so, to talk about this concept with various groups.”

“The difficulty is to live this intergenerational aspect daily. Indeed, some similar experiences are proposed in Belgium but most of the time, because of different timetables and concerns, the elderly people keep to themselves and the families develop their own interest (children, ..)”

“To have the political will and support for this kind of project. It requires a global vision of land settlement and construction ; of the needs of a whole life from child to elderly person.”

Any other Comments?

“The type of living units here is very impressive. To live in a community that accommodates such a diverse age group and dynamic must be liberating and provide great scope for contentment, comfort and security.”

“Stiftung Wohnen Plus...”: ArtCrafts Workshop

In the Foundation at Weimar-Tiefurt we saw workshops for residents and the creative handwork and crafts they made. The residents can take their old tools with them when they move to the apartments in “*Stiftung Wohnen Plus...*”. They have their place where they can talk and be together while working on wood or metal or simply drinking some beer. This is also very important by the viewpoint of biographical work.



The craft rounds and hand working groups are mostly once a week for all interested residents. There is also the possibility to create something together. Mentally active, mentally confused and physically challenged residents can all participate.

This process can empower older people, particularly those with physical or mental impairments, by::

- Evoking feelings of success (e.g by crocheting simple shapes, window displays, pot holders, cord etc)
- Promoting motor skills, especially fine motor skills
- Giving an experience of joint activities in the group
- Developing and promoting creativity

Further information: <http://www.stiftung-wohnen-plus.de/>

In what way did this process make an impact on you?

“The importance of building relationships and the arts are not seen as optional extras here. The value of social and creative activities needs to be raised. . . I was also interested to learn that residents are very much encouraged to bring existing tools and craft equipment with them so that they can continue their creative pursuits often forming social clubs to share their interest with others.”

“It was good to see the variety of arts and crafts available and to hear that people are encouraged to develop their own interests. I feel we could use some of these ideas with groups in Cork..”

“I was very impressed by the facility of the arts and crafts rooms and the sense of value it must bring to people, especially the artist who works with others.”

“ In our training for care home directors, it is important to raise awareness of the importance of this kind of activities to stimulate the empowerment of elderly people. The collaboration with the occupational therapist is also fundamental “

In what ways did you or did you not, experience this process to be empowering for older people?

“residents are empowered to continue with existing hobbies and influence and direct the types of groups and activities which exist.



A good example of this is the puppeteer who’s workshop we saw at Tiefurt.”

“People can learn from each other and teach each other so everyone has something to offer.”

“The services exchange and the workshops offered by elderly people answer to the need to feel useful. The elderly person keeps a social status, bringing his or her expertise, art and experience”.

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I would like to create more opportunities for using participants existing skills and interests within my work. . . . It is always a challenge to allow creative projects to grow organically and not to allow external influences such as the agenda of host institutions or funders to dictate outcomes to the detriment of the actual participants.”

MEETING 6: BRUSSELS, BELGIUM, 3-6 March 2015

Abbeyfield Community House



Abbeyfield's participative shared housing is intended for active *seniors* who have the will to manage their own lives. Abbeyfield is both a concept of shared housing and a movement of volunteers who help elders, most often isolated but autonomous, to share a fulfilling quality of life.

Each individual flat (no more than ten in a community) includes a living room with kitchenette, bedroom and bathroom. In common premises, the group shares of a kitchen, a dining room (also potentially used as a living room), a guest room, a laundry room, and so on. According to their abilities, the residents actively participate in the management of their home, helped by external volunteers. They are full members of their local Abbeyfield private non-profit organization. They distribute between them duties and responsibilities concerning their house. The respect of private life and opinions is guaranteed and the resident remains fully free of his/her movements.



Each house is constituted as legal body governed by either the rules of private non-profitability organization or the rules of cooperative society with social objectives, for which the residents are full members. The association usually rents the building where the flats are located. House operating costs are distributed among the residents. In this community, residents pay monthly fees, at a level fixed by the General Meeting. The Residents Committee determines which are the

activities (meals, meetings,...) organized by and for the residents as well as their frequency.

This project is intended to empower seniors who :

- wish to have a more convivial life
- want to fight loneliness while keeping their independence
- think that gathering renders them stronger to ensure their own security

Further information: www.abbeyfield.be/fr/maison_watermael-boitsfort,bruxelles_le-martin-pecheur

In what way did this process make an impact on you?

“They make their own rules and they support each other. The executive board does not intervene to the house rules, to the composition of the household”

“This experience strengthened my vision about living communities of older people. I am convinced that this form of living is suitable for our grandmothers and grandfathers who would be alone in a flat. In my opinion, the concept of Abbey field is a good example for a tolerant and respectful way of living together and helping each other in a self-chosen environment. “

“We evaluated this process as creative idea, it can provide to elderly people to have convivial life, to fight the loneliness while keeping their independence“

However, this way of living involves some conditions :

“Clearly, this is a very specific way of living and it would not suit everybody. It is necessary to be physically fit, single, and have some skills in living in community.”

In what ways did you or did you not, experience this process to be empowering for older people?

This process is empowering for older people in different levels :

- To trust members of a household to be able to organize themselves
- The fact that residents were able to define the internal processes
- A communal basis to decision-making, so empowerment had a social basis.
- promoting of freedom and independence
- To offer company of others and security
- To have a good social life which is known to improve the wellbeing of older people

“As long as people are able to make their own decisions, they are independent and they are an individual part in our society. And as long this feeling is in an individual – there is a big amount of empowerment and self-confidence.”

“As long as the people living there are healthy, Abbey Field is a good solution. It can become a problem when some of the residents has bigger diseases and can no longer assume his part of responsibility in the house.“

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“Planning and setting up such a programme would need time and commitment, identifying willing participants and working with local partnerships.”

“ In order for a community to exist, a number of things must be in place. There must be money, a building, and residents who desire to be part of the community. Local regulations on housing and taxation would also be a factor.”

Finger Food

Rillette, Pâté, Tarama toasts, also avocado, eggs, ham-and-cheese rolls, Belgian endives, bread tuna or vanilla custard, *quiche*, pieces of fruit, in order to eat with hand... “Finger Foods” or “Eating with hand” are meals offering the possibility to easily eat with one's fingers. This kind of food is particularly suitable to residents with dementia who face difficulties when using cutlery at meal time. This concept allows an increase in dietary intake and improves both nutritional status and autonomy during meals.

As a matter of fact, some residents would like to eat by themselves. But sometimes their disability does not allow it anymore. As a consequence, it is necessary that a nurse or a care attendant stays besides them and feeds them. In addition to being time-consuming, this procedure takes their sense of dignity away. “Finger food” allows those residents to eat and drink according to their own rhythm. The ‘Finger Food’ secret is based on the creativity of the cook. “Finger Food” must be as delicious as usual food and a sufficient variation is necessary to maintain pleasure

along the meal (attractive colors, various textures, ...)



Those bites are also convenient regarding another Alzheimer's specific disorder : wandering concerning patients unable to keep sitting down who can walk 5 to even 10 km a day. In order to help them eating, plates with bites are placed on their way, including salted cakes, stuffed foods, little cabbages, and so on.

This process empowers older people in care settings by:

- Giving them some control over the pace at which they eat and the foods they select
- Enabling eating at irregular times or unusual places according to the preference of each resident
- Preserving nutritional value for residents who have difficulty eating conventional meals

Further information: <http://www.schaerbeek.be/vivre-schaerbeek/aides-sociales/cpas-schaerbeek/services-daides-sociales/maison-repos-soins-cerisaie>

In what way did this process make an impact on you?

“I had encountered ‘finger food’ before as a basic concept. In my experience, it usually means snacks bought in a packet and simply emptied onto a plate in order to supplement everyday meals. This form of finger food was different in that it had been carefully prepared in a nutritionally balanced way that could if necessary be tailored to each resident. It was attractively presented in an interesting way. This seems a very positive approach to nutrition for people with dementia.”

“One of the biggest advantages is that you don’t need any special technology. This is easy and simple”!

“It is creative idea for elderly people who have eating difficulties by themselves. To feed by nurse may be vulnerable for elderly people especially for Parkinson patients. This kind of food is suitable for them. Beside this in the process allows the elderly people to eat and drink according to their own rhythm, we can called it autonomy during meals.”

“The initiative is interesting as it addresses many levels of the person’s experience. It can assist with nutritional intake, but can also reinforce self-esteem by enabling the person to eat independently.”

In what ways did you or did you not, experience this process to be empowering for older people?

“This concept gives the old people the chance again to decide themselves what they want to eat from their plate. In addition they can eat as much as they want. And so this is a decision-making –concept that gives some competences back to the people. And so it is empowering.”

The variety of food make mealtime more attractive with different varieties of food on the plate. “When dealing with a knife and fork is getting more and more difficult, finger food is a good idea. The “bite-sized” morsels can be easily handled and the residents can eat by there own. This is in my opinion an important fact for people with dementia, they remain more autonomous and even the meal is much more delicious while eating by herself.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“Finger-Food is a well-known concept in Germany but not everywhere. The biggest fact against finger food is to start. Secondly, the management often think it is really expensive and this will rise up the costs per resident. And thirdly, they think they need a lot of advanced training for the staff and this is also expensive. “

“In some homes for elderly people in Switzerland, this has been introduced. Perhaps some institutions are too “rigid” in their organisation to promote this.”

“In practice, ‘finger food’ in traditional UK culture has generally been in the form of ‘snacks’ which are taken between meals rather than the meals themselves. Many homes will make toast for their residents between meals, and it would be easy for ‘finger food’ to be adopted in this un-nutritious way. The main problem here is, as always, time and money. The best practices are often the most expensive and time-consuming ones. However, I was impressed by the evaluation that had been performed: this suggested that the extra time spent preparing food was balanced by the reduction in carer time necessary to assist with eating.”

Robot Zora

A robot dedicated to the help of elderly people is not a fiction. *Zora* is a humanoid robot about fifty centimeters tall, commercialized by QBMT which is a Belgian company. Her mission is multipurpose because she is a robot equipped with an advanced developed “artificial intelligence”. In Belgium, this robot is already used in nearly thirty rest homes, hospitals, schools. Two Belgians have conceptualized the software making the robot working. *Zora* of course does not replace the caregiver staff but assists them. In the morning, she loudly reads the newspaper; in the afternoon, she shows the gymnastic movements. At the end of the day, it is again her who takes the winning numbers of the bingo.

The humanoid also plays chess. But above all she is able to hold a personalized chat with the residents. Her answers are adapted to the purposes addressed to her.

This process empowers elder people in care settings by:

- facilitating communication among the socially isolated
- encouraging healthy behaviours such as exercise
- releasing care staff to concentrate on other residents' needs



More information: <http://zorarobotics.be/?lg=en>

In what way did this process make an impact on you?

The opinion about Zora was very positive in general. Each participant found his own story or advantages : new technologies for more autonomy, creativity, winning time.

“Robot Zora is good example for creative idea. It can be implemented for hospital to assist care giver in child clinics and geriatric clinics. Robot Zora maybe attractive during the days in hospital.”

“Zora” helps to save the most important thing in this field: time!”

Zora also raised questions, hesitations and reflections:“I am interested in the use of robots and artificial intelligence in elderly care as one form of ‘assistive technologies’. But I did wonder whether the best way was to use a single device (Zora) to do all these different things. It might be better to have an exercise robot, a separate reading device, and a separate speaker for the bingo. The unanswered question in my head is: “How important is it to have a humanoid robot with an apparent personality that elderly people can ‘make friends with’?”

In what ways did you or did you not, experience this process to be empowering for older people?

Several participants see an empowering for older people, for different reasons:

“Zora is empowering in two different ways: on the one hand it empowers the old people to start a new way of communication and to keep in touch with other individuals. On the other hand the robot as empowering for the carers as well. It enables them to get a bridge between the professional way of caring and the lack of time that we have in our society today..”

“The big plus of Zora is the fact that she combines all the different parts into one housing. And the housing is like a human being or a child, so every one likes Zora. This is a good concept to help zora to be accepted..”

Advantage for some can be seen as a disadvantage for others:

“It was also suggested that Robot Zora could highlight if a person had left a room or facility. I just feel a bit uneasy with a robot undertaking surveillance.”

It also raises some ethical questions:

“It was highlighted that people disclosed personal matters to the robot that they had not disclosed to anyone else . . . If the person is unaware that disclosure to the robot will be heard by a human then this could be considered a form of deception.”

“I am uneasy about how Zora is perceived by certain people with dementia. If a person with dementia thinks Zora is alive, there is an ethical question about whether they should be told the truth. There is also the possibility that a person may feel bereaved if Zora is taken away. “

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

The participants see different challenges:

- The financial aspect. Many care homes don't have the budget.
- The ethical point of view
- It has to be accepted by the residents and their families

“People have fears about machines . . . “should we give away our own responsibility for the elderly people in different aspects to a robot”? Here is education and it takes time.”

MEETING 7: STOKE, UNITED KINGDOM, 16-19 June 2015

Blore Heath Farm and Green Age

Green Age is a not for profit social enterprise. It offers a “natural health service” by using the landscape, plants, and animals on the farm to help people to connect even more with the natural world. It is inspired by the well-established Dutch “zorgboederijen” (care farms) where ordinary farms open their doors to people with health difficulties and special support needs. This is part of a new health movement called “Green Care”.

Care farming is the use of ordinary farms – the landscape, animals, activities – for promoting health and wellbeing. Care farming has been prominent in Holland for over a decade and is beginning to catch on in the UK. The National Care Farming Initiative (now, [Care Farming UK](#)) is the umbrella organisation promoting Care Farming in the UK and its website has case studies and profiles of many care farms, together with useful background research papers and policy documents. “Green care” is a wider concept, referring to the therapeutic use of the natural world, including animal assisted therapy, wilderness experience, walking for health and other initiatives, including care farming.

Crafternoons (Crafts in the afternoon!) sessions are aimed at older people and those with disabilities. A range of nature-based craft sessions offer the chance to make something (with volunteer help if need be) to take home. As well as a “club” atmosphere, participants take something home each week. Recent craft sessions involved making clay plaques, willow supports for plants, and planting bulbs in bowls. Meetings are usually fortnightly.

The intention of this type of activity is to empower older people build or maintain a connection with the natural world and with practical activity. As well as providing a social context (older people in the UK are frequently relatively isolated), there are established benefits for mental health and well being from this type of activity.



*Connecting with nature
for health and wellbeing*

Further information : <http://www.green-age.org.uk/>

In what way did this process make an impact on you?

I was very impressed by the enthusiastic presentation and the quotes of the crafternoon-participants. I also appreciated the academic background of the management, because it creates trust in the whole project.

The converted farm had an effect on all of us. The space and nature all around us had a calming effect and helps to get distance from the events of the day

I felt disappointed on another level that the political/economic climate had not allowed for the successful development of this project.

This type of environment is very relevant in rural Ireland. Most of our residents come from a rural background or enjoyed caring for large gardens

The model has potential and especially useful to hear about the Dutch experience and share that resource.

In what ways did you or did you not, experience this process to be empowering for older people?



Older people are empowered to craft handmade products and keep them or use them as gifts. I think this raises their self-esteem, activates them in physical and mental ways. It also gives them the opportunity to get to know other people and build relationships.

And also to be outside, in contact with the nature. I have sometimes the feeling that they don't go out enough. It is a good way to do it with a purpose.

I think also however that the model would have limitations for certain groups particularly where there is an impairing disability and/or impaired mental health capacity

A good place for seniors to meet others, to undertake a range of tasks and get a sense of achievement. In particular, the Crafternoons are a very good idea to counteract loneliness and depression by simple means.

The value of having an opportunity to participate in a social group that uses resources from the natural world to create. The opportunity to be in a space that is close to nature, a sense of freedom. This is in direct opposition to the sense of going into residential settings that can feel isolated from our environment.

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

The simplicity of the concept makes implementation feasible, but it needs an initiator, and funding

I don't know if it exists in Belgium for elderly people. We also talk about eco-psychology.

Due to the architectural requirements, it is difficult to transfer to our context. We are already trying to offer nature-orientated care. The challenge is to inspire employees and the elderly out of the city to benefit from it.

I would like to investigate further the use of allotment spaces as a 'compromise' option to care farms.

Already have set up craft group who are producing all sorts of book marks!

connecting current activities directly with nature or including this aspect is relatively straight forward I believe Challenge to think simply and small at the beginning – what could I do within our existing structure and programmes?

Berryhill Retirement Village

In the UK, many people own their own homes. As they get older, they may find it gets difficult to live alone, but they are not ready to enter full-time residential care. Retirement villages offer a way that people may be supported as they get older, without losing their independence.

BerryHill was one of the first retirement villages opened by ExtraCare, a not-for-profit charity. In this model of housing, individual apartments may be bought by anybody over the age of 55. The apartment complex includes many facilities such as a shopping street, restaurant, gym, hairdresser and library. As a resident gets older, additional care can be provided by the on-site team without the older person having to attend hospital or move into a different home.

Compared to a residential care home or living in a traditional house, Retirement Villages are empowering because they:

- Allow people to live independently and have the privacy of their own home
- Can provide care efficiently because people are all living on the same site
- Can offer a range of facilities tailored to the needs of the residents
- Create a strong sense of community through shared events and activities
- Encourage residents to help and support each other

More information: <http://www.extracare.org.uk/locations/berryhill-village>



In what way did this process make an impact on you?

Participants had mixed impressions of this project. While many appreciated the idea of providing a secure, varied facility on a single site, others wondered if it might be too isolated from the surrounding community:

“I was impressed by fact that there were so many possibilities to spend time on only one property. The economic possibilities were also very interesting.”

“I support the concept of assisted living, but I think the offer should be less institutional, low-threshold and applied close to the community”

“I had mixed feelings about this process. . . . by creating a ‘street’ and all facilities within the walls of the ‘village’ I was concerned about disconnections, isolation from the world. I was also concerned about the new builds getting higher and higher. More to sell with less land purchase required. I see that as removing us even further from supporting ‘wellbeing through nature.’”

In what ways did you or did you not, experience this process to be empowering for older people?

Again, there were mixed feelings:

“Older people can live their lives in a safe setting and they can work voluntarily. They have the chance to live completely independently; they also can participate in a lot of activities if they like. I like the idea of not have to choose between independence and a helpful surrounding. They can have both if they like to.”

“I will hold onto the themes around giving options, people not having to move to residential/nursing care but being supported at end of life to stay in a familiar environment.”

“This was an entirely empowering project. This offered the residents . . . independence; privacy; social life; activities; support; entertainment; choices; sharing; volunteering. All of this and more in a secure and safe community and access to any outside health and social services they needed”

“Single generation mixing prevents the residents from meeting younger generations in natural settings bar their own family visits (provided these visits include young relatives), therefore residents with little or no young family relatives are restricted to socialise with fellow residents only”

“I felt the Berry Hill was an intimately sized development and would be empowering for that reason – some of the bigger development I fear would have the opposite effect in that the sense of living in an intimate community could be jeopardised.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“I think that this is a model yet to be explored in any depth in Ireland. I would like to be able to source information on the experience and views of people who choose this option.”

“Yes. I can see this working in many rural areas where there is a danger of isolation for those living alone and indeed couples. I can see this concept working for retired farming and rural dwellers, developing on small scale in their country kitchens.”

“Luxury Retirement Villages can only attract the better-off people thereby excluding a large percentage the population”

“I would question whether there may be a tiered system that could create ill feeling. ie higher costs for those who are more financially comfortable.”

Hidden Voices, Making Connections

In an exciting multigenerational film project, school children from Stoke Minster School and Burntwood Community School in Stoke-on-Trent have worked alongside residents in Staffordshire Housing Association's Residential Villages to record the stories of people who were teenagers in the 1950's and 1960's.

Five teams of ten-year-olds have then created imaginative scenarios for Television Programmes where they each have found ways of travelling to the past. In the 1950s and 1960s we include extracts from the many interviews these young people have filmed - illustrated with archive film footage from Staffordshire Film Archive. Each of our young time travellers turns up in vintage film of our local industry, schools and leisure - then brings a message to us from the Past when they return to the present in their programme.

This potentially empowers older people by:

- Drawing on their memories and experiences to help in the education of young people
- Encouraging them to learn from the experience of filming and production
- Through the films and the work of the schools, increasing the visibility of older people in the community



More information: <http://www.stokesentinel.co.uk/Time-travelling-pupils-filming-Potteries-past/story-26751640-detail/story.html>

In what way did this process make an impact on you?

“It was interesting to note the parallels and differences between the generations, particularly the differences in their daily work. At the same time, the film showed how seniors are often ignored.”

“While we got the end result it struck me the process and depth of what went on in the making of the films. I was touched by the joyful and fun take the young people brought to the work.”

“Memories and any vehicle for eliciting these are powerful – I imagine that showings of the films to the community will have a big impact.”

“The innovative development of young people interviewing older people in reminiscence work. Bringing the art world together with the world of the caring/service provision world through children.”

In what ways did you or did you not, experience this process to be empowering for older people?

It is a very good initiative to reach older people . . . and it will increase their self esteem.

“For the memories and the possibility to share these memories; to give them a place in the society; To be in contact with children”

“I believe that any process that gives opportunity for people to be heard is empowering and this process was grounded in listening to people’s experiences and memories. I believe that giving time to listening gives value to the human experience and in so doing, validates the individual.”

“In this project the children were active, but the older generation appeared rather passive. Which generation was this intended to benefit most?”

“We didn’t see the process of making the films so much but I imagine that the dialogue between the older and younger people would have been experienced very positively.”

“It immediately connects one to their past memories, memories which may have been buried or forgotten. For me that in itself is empowering. It affords opportunities to contemplate and reflect on pasttimes. It encourages reflection, language and conversation and associations.”

What opportunities are there, or challenges you might face, to bringing this process to your workplace or context?

“Besides the emotional impact, the process made me think about a possible adaption in local schools and nursing homes. “

“I think there are possibilities to translate this project in German school projects. Especially because there’s a kids-television-station in my hometown.”

“I like the idea to use the media to show things about elderly people. If it was in French or with French subtitles, I could share it with my team. Maybe, I should talk with the director of the CPSI to subtitle it and to show it to our students.”

“I would like to look into what archive visual material exists and consider the possibility of using it to help to jog memories . . .”

“I am going to involve the local Historical Society to meet with residents and local students and set up a project that will involve photography/filming that will show a history of Cobh involving current residents.”

SUMMARY OF PART ONE. SHARED CONCERNS, NEW IDEAS

So far, this has been an account of the visits that we made, the learning in which we engaged and the reflections we offered our hosts by way of feedback. It should be clear to the reader that a number of common themes crop up repeatedly in the feedback. In our own reflections upon our learning together, we identified the following recurring priorities in the process of empowering older people in care settings:

- 1. Preserving the uniqueness of each person.** In residential care in particular, people can become disempowered when they are unable to express their individuality. Carers can start to forget that each resident is a unique person who has their own needs, wants and desires. We saw a number of initiatives to encourage people to express their own uniqueness: individualized sign boards (Domicil, Ch); policies to encourage people to bring their own possessions, and even their own pets (Georg Boock, De) and recognizing the different ways people might like to eat in their old age (Finger Food, Be). The challenge now is to find creative ways of responding to people in residential care that celebrate and encourage each person's uniqueness: often, carers are overstretched, and it is easier to treat everybody in the same way; but initiatives such as Talking Mats (Ie) may point a way forward.
- 2. Solidarity between generations.** We all come from increasingly urban and mobile societies, in which traditional ways of supporting people in old age such as the example of Family Support in Turkey are breaking down. In the absence of family carers of a younger generation, it is easy for older people to find themselves cut off from the wider community, and speaking only to other older people or their carers. In our partnership, we encountered a number of ways to actively promote solidarity between generations: by multigenerational meeting houses (De); Co-located apartments (De); incorporation of a kindergarten in the care home (MixMax, Ch); Mutual support for orphans and older people (Darussafaka, Tr); and the Hidden Voices movie project (GB). Clearly, different strategies are appropriate for different cultural contexts: but we all agreed on the importance of maintaining links between the generations.
- 3. Maintaining independence.** We witnessed a number of initiatives to encourage people to retain their autonomy for as long as possible, and in as many different ways as possible. Several schemes (Co-located apartments, De; Georg Boock, De; Berryhill Village, GB; Abbeyfield, Be) existed that were specially built to be accessible and useable by older people. They shared the same basic idea: that older people should move into suitable accommodation while they are still active, so that as they become less independent they can be cared for in their own homes. We also saw an example (KASEV, Tr) of a

large nursing home which encouraged residents to maintain as much independence as possible while still offering specialist nursing care right to the end of life.

4. **Community living and shared decision-making.** In many residential settings, we observed the principle of shared decision-making by the resident (Stiftung, De Abbeyfield, Be; BerryHill, GB; co-located apartments, De). This seems a very important principle that should be extended as widely as possible to older people in care settings. If the community residents cannot make decisions among themselves about how their home is run, then by definition they are disempowered: human beings flourish best when they have as much control as possible over their environment.
5. **Technology and creative care.** We observed some examples of very complex technology (Robot, Zora, Be), which may in the future have a real effect on care settings. But we also observed very simple technology which can help people to maintain their independence and empower them (in various projects, but particularly the walking surfaces at KASEV, Tr); and the creative use of food technology or architecture (finger food, Be; Georg Boock, De; Talking Mats, Ie). There is a lot of interest in so-called 'Assistive Technologies' and they clearly have a great deal of potential. But, we observed, they can only fulfil that potential when they are introduced in a compassionate, caring and empowering way. They are not a substitute for human interaction, but an aid to it.
6. **Shared activities.** A range of shared activities were witnessed. What they had in common was their potential to build solidarity, cooperation and so mutual empowerment. Examples included the Monday Club, Ir; Drumming, Ch; bingo, Tr; crafts workshops, GB; Artcrafts, De; and Georg Boock open plan cooking and eating, De.
7. **Importance of training** for care workers, advocates, nurses. We considered that the appropriate training builds Knowledge and experience, but also expectations and status (School for Geriatric Nursing, De; SHEP, Ie; CPSI, Be; Paritatische, De). It has the potential to break the vicious cycle of underinvestment, low expectations of carers and therefore low status. This is essential if older people are to be treated with dignity and as autonomous individuals
8. **Engaging with the Political and economic context.** We need to understand the key changes in the environment for older people, such as Post-industrial mass outward movement of younger would-be carers (in Erfurt, De; and

Stoke, GB); and the rise of urban vs rural culture (in Istanbul, Tr; Bern, Ch; and Cork, Ie). As well as enabling creative solutions to be found, this understanding can promote lobbying and community organisation, as witnessed in the work of Der PARITÄTISCHE Thüringen, De; and SHEP, Ie. Engagement with political debate is particularly important because we found there was a recurring question of how to fund excellent care. Many of the best examples we saw were only available to a few people. Some (e.g. Darussafaka, Tr) relied on a high level of personal means; others (e.g. Domicil, Ch) more on the shared wealth of local political units. Others again (e.g. Multigenerational house, De) were funded on national or European level. But affordable solutions may require more dependence on volunteers (e.g. Cork Advocacy Service, Ie), technology or 'efficiency savings'. This in turn demonstrates the need for political will to create structural changes (such as the creation of co-located living, De)

PART 2: LISTENING TO OLDER PEOPLE AND THEIR CARERS. THE PHOTOGRAPHIC PROJECT

When working on “the empowerment of older people” it is sometimes easier to **talk about** elderly people and to propose solutions **for** them than to **listen to** them. With these interviews and these pictures, we wanted to give people the opportunity to express themselves. For this, we went to meet them in the places where they live. To go deeper in the subject, we also met the carers. We asked them about their daily life with elderly people.

Each meeting was unique and different. The pictures show the richness of the conversations: funny, stirring, sometimes nostalgic, overflowing with anecdotes. Each of the interviewees was invited to choose and to present an **object** which symbolizes autonomy and empowerment for them. For most of the persons interviewed, it was easier to broach these concepts through an object. Along the conversation, images, examples and stories emerged!

At the end, a picture was taken of each participant his/her object, in the context of his/her daily life.

Without analyzing too much, let the pictures lead you : discover a look, the delicateness of a hand, a smile, ... the pictures talk by themselves.

We hope you will enjoy them !

Brendan MC CARTHY – Ireland – October 2014

Brendan is 72, and has been living in an institution for approximately 40 years.

After a year working for County Council in the Republic of Ireland as Revenues Officer and undertaking a series of short term jobs, he was deemed unable to live alone and entered hospital, remaining single with no children. "I stayed single, no bad habits!" he says.



Enjoying his life in an institution, with his own TV, bathroom, and his own car which he still drives, Brandon feels independent.

"Freedom" is the term he uses when speaking of autonomy and empowerment, choosing the **camera** as the object which best represents his sense of freedom to explore his interest in photography and history. As a member of the Historical Society and the Photography Club, Brandon expresses his enthusiasm for taking pictures of historical buildings, going on photo shoots, and meeting people in this way.

"The only thing I could take off", Brandon seems to consider his camera as an important tool for self-expression, asserting his identity, differentiating himself from others. Although he mentions he would be happier living in Northern Ireland, he says he is happy with the care setting because he can move around freely.

Clotilde MEEUS – Belgium – June 2014

Clotilde is 92 and bubbling with life. She grew up in Antwerp, and sought to pursue university studies in social work and education, which the outbreak of WWII soon interrupted. Clotilde followed her calling to enter religious life, taking her vows in 1940, and became a teacher.

In 1954, she was offered a temporary position in Kinshasa where she finally spent 48 years of her life. Thrilled to experience non-segregated European and African education, she was very interested by her students and formed tight knit relationships with Africans. Mobutu's dictatorial regime gave rise to serious ethical challenges for Clotilde in terms of what children were being taught, and she found creative ways of exploring freedom of thought through Paolo Freire's pedagogy, reinventing the school's sociology syllabus.

She thoroughly enjoyed her rich and diverse career in education in Congo and returned to Belgium aged 80, when she started working alongside the dying. When her own health was jeopardized after falling down the stairs, she entered care and found ways to keep helping the elderly within the facility.

The **walking stick** symbolizes her autonomy in terms of mobility, yet she makes a clear difference between autonomy and freedom, maintaining "freedom is within, and goes a lot further than autonomy". Even though her autonomy is diminishing with a decline in her hearing and capacity to walk, her sense of freedom is intact. She loves interacting with the carers and patients within the nursing home, but clearly expresses that due to financial reasons; too much pressure is placed on an understaffed team, leaving far too little time for human contact, which she sees as vital to wellbeing.

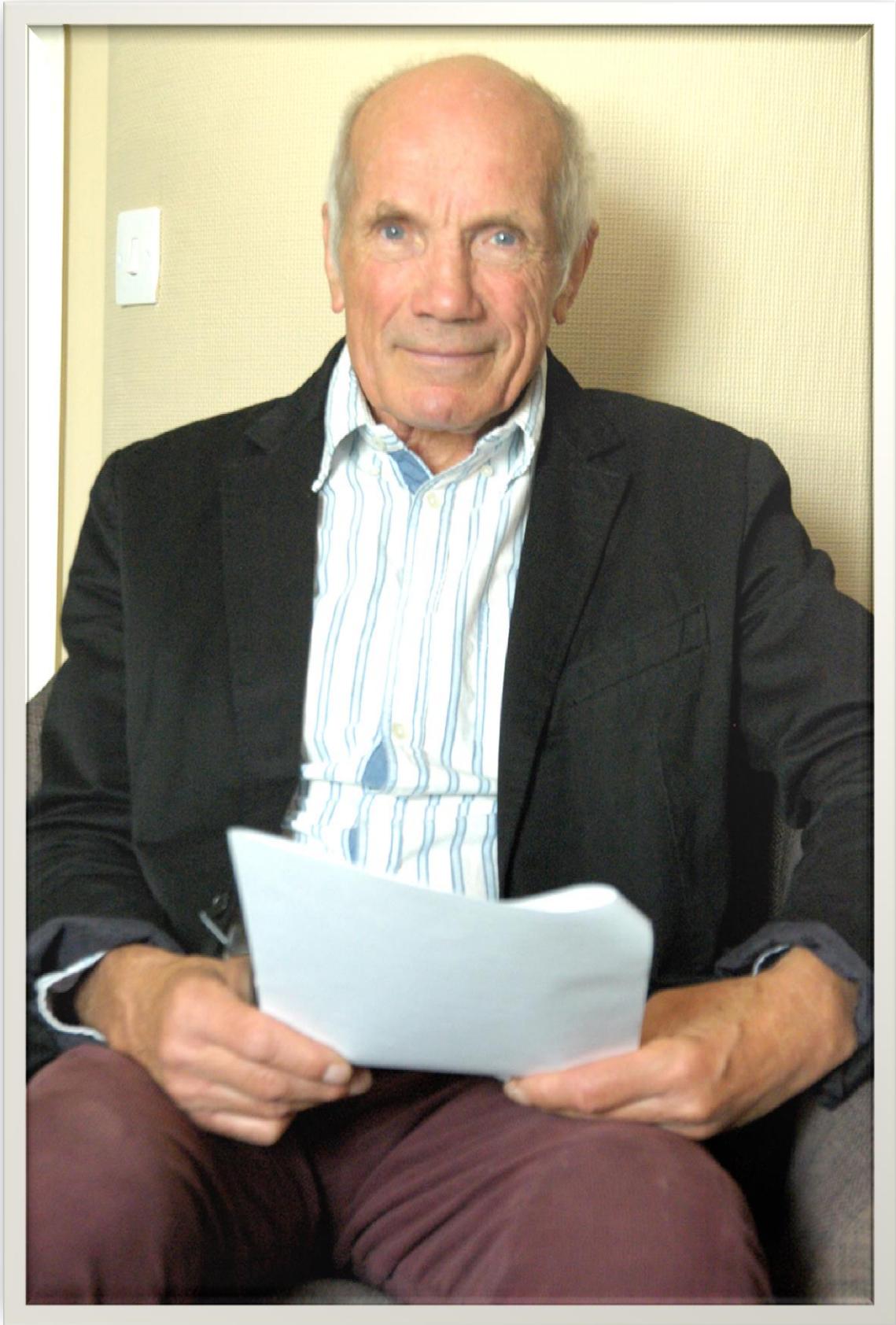


Dennis WRIGHT – UK - June 2015

Dennis is 76 years old, married twice, had four children and today has seven grandchildren. He lives with his 66 year old wife and is an active member of his community. After a career in industrial relations within the shoe manufacturing industry and graduating from the Open University with a Bachelor's and a Master's degree in industrial relations in his late forties, Dennis became a university lecturer in Human Resource Management. Although he has been forced to retire, he still occasionally works as an examiner and invests a great deal of his time a community project for men, of which he is the Chair.

On this project, men work together renovating portacabins, making spaces available for creative work to take place. Each one makes his own contribution to the greater good, helping to avoid loneliness, "which is especially important for those who have lost their wives" he explains. According to Dennis, autonomy is the capacity to make decisions for himself, within the boundaries of society. Health, finances and a healthy mind also play an important part. To represent his vision of autonomy, he chose this **phrase from a T.S.Eliot poem: "when I grow old, I shall wear the bottom of my trousers rolled"**, expressing his joyful interpretation of old age as breaking free and "cutting across" fashion and expectations.

The freedom to meet and engage with others, regularly visiting the elderly in their homes, gives him a tremendous sense of well being. "It's not about doing things for people, it's about doing things with people" Dennis has identified transport as being a key issue in reaching out to the more isolated members of the community. In addition, he values the benefits of bringing together the old and the young, as well as the connection which can be made between elderly people and pets.



Diane HORNBY – UK - June 2015

Diane originally trained and worked as a nurse in England for ten years before moving to the US where she completed her training. Since she was sensitive to the elderly, having taken care of her grandfather who suffered from senile dementia, she decided upon her return to England to take a course in geriatrics, along with a degree in psychology and sociology. Taking a further qualification in counselling, she also worked with alcoholics and drug addicts. She broadened her professional portfolio even further by qualifying as a teacher, but she was working over 70 hours a week.

With failing health of her own, Diane has had to retire from nursing and teaching altogether. Unable to sit idle and empowered by reaching out to the vulnerable, she still cares for several elderly individuals who have no one to turn to. Diane explains how complicated it can be for elderly people who are isolated and suffer from both physical and mental illness to enter the care system. She observes they are fearful of asking for help, and that social services procedures can be slow and counter-productive, thereby losing sight of the most needy.

For Diane, autonomy is having the dynamism to "get up and go", to find the courage to break out of isolation and socialise with others despite illness and old age. She sees a wonderful example of this in her own elderly parents. She feels everybody needs love, and chose **her cat** to portray her vision of her own autonomy. After suffering two abusive marriages herself and today living on her own with serious health issues, her relationship with her cats generates sufficient love within her for her to "be a better person and more instrumental in helping people". She finds a great reward in reaching out to vulnerable people around her, taking them out of their homes and enabling them to enjoy the simple pleasures of life.

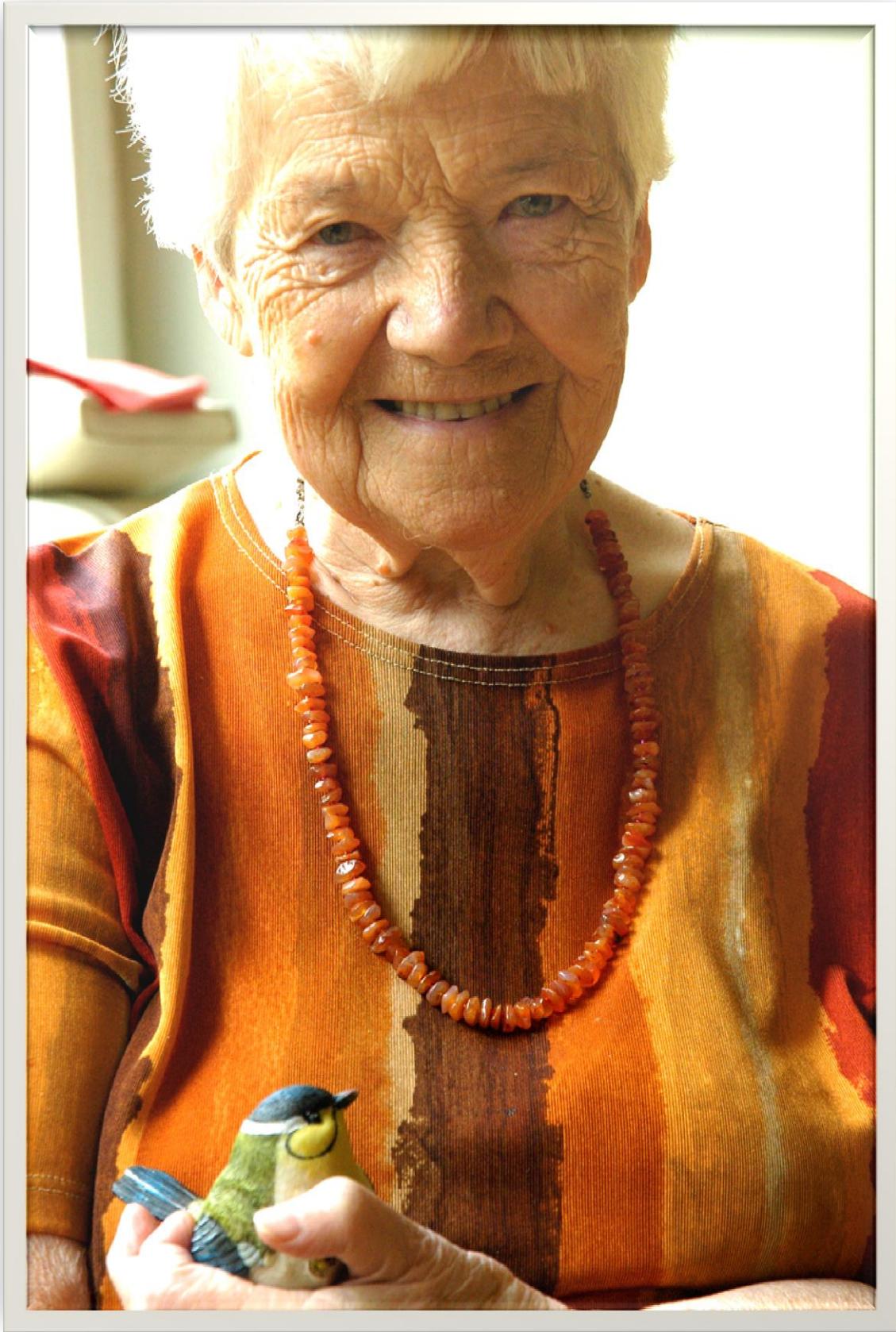


Fernande DELABY – Belgium - June 2014

"I've had a beautiful life" says Fernande. She is 88 years old, and only recently returned from the Middle East where she spent 44 years of her life working with minority students in Israel, Jordan and Syria, within the framework of a lay Christian organization. She enjoyed her life in Jerusalem where she lived alone, spending a lot of time outdoors, constantly stimulated by her exchanges with young people. After suffering from cerebral thrombosis and seeing her physical capacities diminish, she was unable to find a suitable care setting in Israel and moved into a nursing home in Belgium in 2012 with a positive attitude.

Fernande had never spent very much time with the elderly, and finds it tough to see people's mental and physical capacities decline. She makes a distinction between freedom and autonomy explaining autonomy is defined by one's education and culture, for example. Autonomy is intrinsically linked to dependency, whether physical or social, whereas freedom is the capacity to be oneself and to remain true to one's personal human values. "I can become dependent for many things, explains Fernande, but ultimately remain free".

The **bird** is a symbol of this freedom, a beautiful and uplifting creature, regimented by natural laws yet free to sing and fly. Fernande stresses the importance of recognizing the lengths some patients go to remain autonomous despite their diminishing physical and mental capacities, to support them in their efforts and provide help where it is useful. Time and money are factors which add pressure to understaffed nursing teams, creating a climate of insecurity, and often limiting spaces made available for social contact within a facility.



Fikri ERTUKEL – Turkey - June 2014

95 years old, Fikri seized the opportunity to study electrical engineering in the United States after World War II. He graduated with a bachelor's and two master's degrees in electrical engineering, working in electricity generation and distribution throughout his life. In the US, he met a Japanese born Qatari lady with whom he had a daughter, and after 54 years of marriage they returned to Turkey, where his wife passed away a year later.

Fikri chose to relieve his relatives from looking after him and took the decision to enter care in 2010. For him, a human being's life is parallel to that of a **tree**, it follows a similar cycle. It all starts with a seed, then a young tree, a young life, which gradually strengthens to take on responsibility, growing branches, some of them buckling, some of them growing stronger. Branches eventually start breaking away, you lose relatives or are separated from them, and you reach a point when you're like a single leaf, ready to fall, which in turn again leads to new life.

For Fikri, "freedom is to live a healthy life in relative comfort within the limit of the institution". His freedom is curtailed by rules and regulations which he agreed to follow when he chose to enter this care facility. He takes full responsibility for making this choice, explaining "nothing is black and white as they say, it's grey!" He strives to find a middle ground where both personal and institutional needs can be met, through mutual understanding, and being helpful to the organisation. He appreciates that all patients are respectfully treated as human beings, irrespective of their physical and mental abilities. Unlike other more commercial homes, he feels he is backed up by a solid organisation, allowing him also to feel secure.



Gerhard BUCHING - Germany - December 2014

Gerhard is 81 years old and moved into an assisted housing facility with his 80 year old wife just under a year before he was interviewed. Born in his grandparent's family house in Weimar, he remained there throughout his married life with his wife and two sons, working in the bookshop his grandfather had set up in the front room of the house. The couple always enjoyed going for walks in nature, working on their garden located on the outskirts of the city, and attending a variety of cultural events such as the opera and the theatre, which they still visit today.

Gerhard loves travelling and maintains he has enjoyed his freedom throughout his life, even when Eastern Germany was under tight government control. For Gerhard, autonomy is being outdoors, being in **nature** and travelling. The **picture** he chose represents this. It depicts trees and reminds him of walking in nature with his wife. For him, autonomy is clearly linked to mobility.

Finding it increasingly challenging to cope with the stairs in their family home, as well as taking public transport in winter for example, the couple naturally started seeking help from home carers. They recently decided to move into an assisted living apartment, where cooking and cleaning is taken care of and where a driving service takes them wherever they choose to go. Aside from calling on these services, they have their own washing machine and can do most things by themselves. "You can be as free as you want" says Gerhard, who now happily uses a walking stick for extra security when he's out and about, keeping his independence.



Guzin KAVARELI – Turkey – June 2014

88 years old, Guzin went into care in 2009 with her sister, both hoping to share their retirement days together. Life was to decide otherwise however and her sister died 8 months later due to serious health complications. Guzin grew up in a coastal village near Old Istanbul with her family up until the 1950s, a place she loved and where she felt free. She married straight after high school, and several years later, due to factors beyond her control, she found herself moving into a house surrounded by very little aside from an airport. Struggling to accustom herself to this new environment, she felt very homesick.

The **painting** she chose was a gift from an antique dealer, to whom she had sold a valuable painting of her sister which she had to part with. It depicts a castle symbolising her feeling of isolation, and the sea, representing the freedom she felt so strongly earlier in life. Her feeling of isolation and loneliness was the main reason for going into care. Since her husband had passed away 4 years earlier, and with no children, "if anything happened to me, who would know?"

Guzin feels her autonomy was cut down when she was alone, whereas, now she is looked after, she feels free. With a small house of her own and all household chores taken care of, she has her privacy as well as being surrounded by over 60 other relatively healthy and independent patients, like her. She expresses some frustration about sharing so much of her time with them, being restricted in her movements due to her health, and having to ask permission to do certain things. She says a change in regulation has cut down the time care takers can spend with the elderly and if it were possible, she would prefer to have a live-in carer, a life companion and a continuous presence in the house. On the other hand, she is pleased this new regulation ensures caretakers are certified and expresses her satisfaction with the way she is looked after.



Regina RUNGE – Germany - December 2014

78 years old, Regina is divorced with two children, and worked in the finance department of Germany's industrial machinery export sector most of her life. In her sixties, she moved in with her son and his wife, and in 2013 decided she needed to live in a flat with no stairs, a place where she could remain autonomous and free to lead her busy life while still having help around the house and a service close-by to keep an eye on her health.

In 2011 Regina suffered a heart-attack, her lungs have been poorly and she has been known to have black outs. Although she initially struggled to face up to her declining health and refused help, today she sounds at peace. Germany's care system enables her to benefit from the medical assistance she requires without having to go into hospital, and she is very happy living in her own apartment, where she is regularly checked up on.



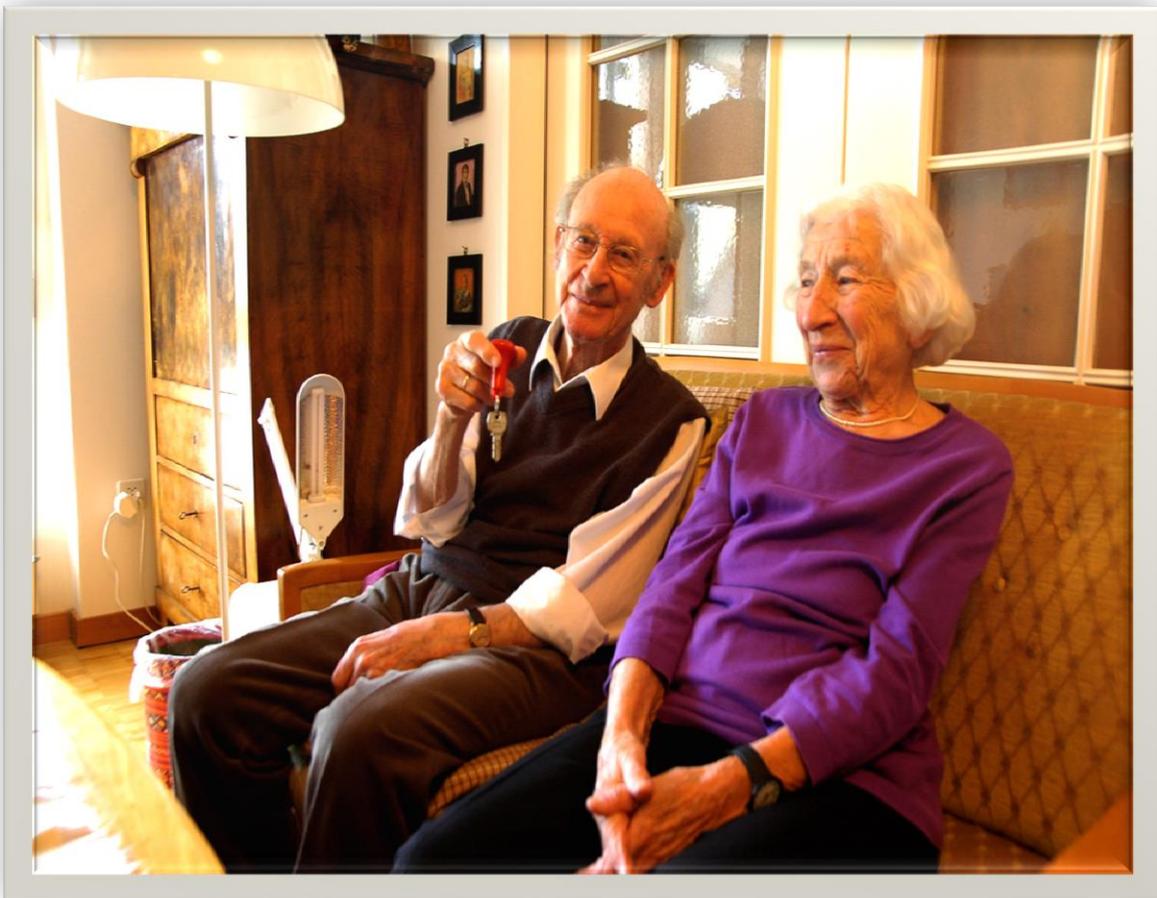
Surrounded by people who aren't necessarily integrated into the care service, Regina enjoys meeting neighbours in the lift just as much as

having the choice of what she does with her time, that is real autonomy for her. A busy bee, she is constantly reminded by doctors and loved ones to slow down. Regina loves helping out at her daughter-in-law's veterinary practice twice a week, goes to the gym and attends creative workshops in the local village where she goes by bus. This allows her to meet other people and satisfies her need for social contact.

The object she chose is a **Christmas wreath** which she made herself. Proud to develop unexpected creative skills later on in life, she has also discovered the internet. "I love my life, I feel good" she says.

Sonia and Hans SULSER – Switzerland - March 2014

Husband and wife, both 94 years old, Sonia and Hans have been married 70 years and are great grandparents. They lead a full and active life in a nursing home they co-founded in Bern and have been living in since 2012. Both pastors from the Reformed Germanic Church, they had regular contact with a range of social workers who attended church, and together they fought to provide a decent response to the rising demand for spaces in care homes in their area.



The trigger to leave their own apartment was that it was too spacious to upkeep, and being located on the outskirts of town, it became too tiring to travel in and out. For Hans and Sonia, autonomy is linked to dependency, and we are all to some extent dependent on people, on the outside world and on our health.

With age, health complications require adequate attention and the couple stresses the importance of finding an environment where they

feel secure, in turn allowing for greater autonomy. The **key** symbolize their freedom to go as they please, but also to return to a comfortable and secure care setting, where help is only a call away. They have the freedom to enjoy their intimacy in their own private space, and also to relate to the outside world as they choose to.

Sonia and Hans greatly appreciate the cultural and sports activities on offer in this particular facility, helping them to keep their minds and bodies active. They comment on the importance of relieving stress on nursing homes in general, and encourage the elderly to remain independent in their own homes with the help of carers, for as long as possible.

Afra Maria TOMARKIN – Switzerland – March 2014

Although she initially worked as a librarian in a university hospital for 14 years, Afra gradually tuned in to her calling to accompany the elderly in the final stages of their lives, and has been working as a geriatric aide for 6 years. Fascinated by the nature of death since she was an infant, Afra experienced a sudden revelation about the impermanence of life aged 5, a turning point in her life when she felt "childhood was over". Feeling independent was also an issue for her : she started walking when she was 9 months old, successfully reaching the top of a mountain aged one and a half, refusing to be carried.

To face the reality that old age is a time when people can lose their autonomy represents a great challenge for her, pushed to confront her fear of losing her own independence one day. She feels compassionate towards the elderly, respects and values their experience, relating to them as a human being above all. The **image of the bird**, an animal which represents freedom, **in the palm of a hand**, represents this need for security and support one can experience in old age, and the need to be free from pain as one faces death. Yet the palm remains open, the bird is free to fly away should he choose to, he isn't caged in.

Afra expresses her gratitude for working in this particular institution where management is conscientious and makes great efforts to accommodate patients' needs for autonomy despite very real time, administrative, legal and financial constraints, which so often curtail a person's autonomy in today's society. Patients are treated with respect here, decision-making processes are transparent, a patient's family is always consulted prior to any decisions affecting their daily lives are taken and an Ethics Committee ensures delicate questions can be discussed internally as well. Afra recognizes the great value of accompanying the elderly towards death, in her eyes, life's most intense experience.



Jessie BOWEN – Ireland – October 2014

With a strong motivation to fight for justice and for the rights of vulnerable people to be upheld, Jessie has become an advocate, supporting people with disabilities, mental health issues as well as the elderly through her work. She has been trained to facilitate well-being and empowerment amongst older adults, and has been conducting a project in a residential care unit, meeting the management team, as well as patients and carers, with the aim of identifying any concerns and advocacy issues there may be. This project is a response to reports of abuse in nursing homes in Ireland, and seeks to give a voice to vulnerable people, supporting them to speak up.



Jessie sees autonomy as the capacity to make one's own decisions about one's life, and feels it is crucial to help more vulnerable people

make informed decisions based on their rights and entitlements. It is therefore very helpful to provide access to this information, as it can give elderly people more choice, and more autonomy.

The image of the **speaker** chosen by Jessie is a symbol of advocacy and the process of empowering people to stand up for themselves. The new Health Information Quality Authority (HIQA) set up by the government has issued guidelines for nursing homes, which advocates such as Jessie ensure are met. One of the guidelines upholds the right for everyone to call on an advocate, but Jessie explains it takes time for legislation to be enforced and believes a legal standing will further empower advocates to carry out their work.

Louise STALPAERT – Belgium – June 2014

Louise, 61 years old, started working as a geriatric aide aged 49. From a modest background, she was persuaded at a young age to give up on her ambition to become a nurse. After having married and raised 5 children, she returned to her lifelong calling for care work, training as a geriatric aide and carrying out her work experience in an institution where she still works today, 12 years later.

Louise expresses her fondness for taking care of the elderly, respecting each person's needs according to their personality and life experience. She explains patients' need for autonomy can change as they age and fatigue: depending also on the strength of their character, some patients will spontaneously assert themselves whilst others will naturally seek to be pampered. Her vision of empowerment is based on a natural refusal to infantilize the elderly, insisting on the importance of being empathetic and respecting their intrinsic worth, meeting their needs as best she can, given the tight schedules care staff operate under.

This explains why she picked a **watch** as her object: autonomy can be compromised by a lack of time. She expresses some frustration around not being able to give as much attention to each patient as she would like to, given the constraints of the institutional framework and the way tasks are allocated to staff. Yet, she maintains structure is an important factor in patients' daily life, and that there is enough room for personal attention when one is attentive to detail and remains flexible.



Sezer OZTURK – Turkey – June 2014

Sezer explains that in Turkey it is customary to look after the elderly, and she is proud to have trained as a healthcare worker to accompany them. She is also certified to work in emergency services and as a medical secretary. Sezer has been in this particular facility for 5 years, and her daily job consists in bathing people, serving them food, accompanying them to medical appointments outside of the residential care unit and keeping a constant eye on everyone's specific needs.

Autonomy as far as Sezer is concerned is symbolised by the **bleeper**, a tool which allows her to go about her work while remaining available to respond to residents' calls at any point. All residents have access to beepers throughout the building, and any patient who is particularly unwell can benefit from the use of one of four necklace beepers. In her eyes, this device enables residents to feel secure, reassured that help is available at the press of a button.

In this particular care setting, carers have the responsibility of accompanying residents to medical appointments outside of the facility and in this situation, they are expected to take decisions concerning residents' health on their behalf. As Sezer gains more and more experience and understands the elderly's needs better, she feels she is increasingly more trusted by the residents, which in turn feeds their sense of autonomy. Trust is directly linked to preserving confidentiality, and carers are not to divulge any personal information concerning a person to any other nosy residents!

By making a point of treating residents with respect and carrying out the most difficult tasks with a smile, Sezer receives positive returns from the resident community.



CLOSING COMMENTS

The proportion of elderly people is rising across Europe. They live longer and they want to stay active and healthy. At the same time, when it comes to decision-making, carers are being encouraged to consider elderly people as spokespersons. This process is not always obvious. Empowerment involves self-determination, the capacity and the freedom of each person to take responsibility for themselves, to express ideas and to take decisions.

At the end of this project, we think that empowerment is more than a concept! It is a process in which carers and elderly are encouraged to broaden their horizons. It involves a shift of power from the carers towards the elderly people, along with a consciousness that this change will be helpful for both of them. Said like this, it can appear logical but it is not always that easy to recognize and to respect elderly people's decisions and opinions.

After meeting all these carers and elderly persons, we think that this process doesn't need big changes or huge initiatives. It can be manifested in small things in everyday life. Empowerment goes together with the notion of choice. To choose, we need to be informed. For elderly people, a key to empowerment it is to give information about available help networks, to propose activities and trainings to develop or to maintain their capacities and to make space in society for those of widely differing capacities.

We warmly thank each elderly person, each carer we met in Ireland, Belgium, UK, Turkey, Germany and Switzerland. Each of them, with their own reality and their own cultural context, remind us that empowerment is a process that builds step by step.

Thanks to :

Brendan (Ireland), Clotilde (Belgium), Dennis (UK), Diane (UK), Fikri (Turkey), Fernande (Belgium), Gerhard (Germany), Guzin (Turkey), Regina (Germany), Sonia and Hans (Switzerland), Afra Maria (Switzerland), Jessie (Ireland), Louise (Belgium) and Sezer (Turkey)

