

# NEWS

Issue 10 Summer 2008

**A better future for ageing**

**ERA AGE**

European  
Research  
Area in  
Ageing



## Building the European Research Area in Ageing

ERA-AGE continues to produce the building blocks for the development of the European Research Area. The most important step in this direction is Europe's first joint ageing research programme the 'Future Leaders of Ageing Research in Europe' (FLARE) which resulted in the award of 18 post-doctoral grants to researchers whose work reflects the whole range of ageing research from the biological to social sciences. FLARE fellows attended the first dedicated FLARE Summer School which took place on 22<sup>nd</sup> – 27<sup>th</sup> June 2008 in Sweden. The interactive summer school programme enabled participants to share their interdisciplinary experiences with a number of European expert scientists.

ERA-AGE also continues to identify key European research priorities and good practices with funders, policy makers, scientists, non-governmental organisations and other end users. A report from the fifth highly successful ERA-AGE Forum meeting in Paris November 2007, focusing on the important issue of Ageing and Migration, is now accessible via the ERA-AGE website ([www.shef.ac.uk/era-age](http://www.shef.ac.uk/era-age)).

This newsletter primarily focuses on multi- and inter-disciplinary approaches to ageing research with an editorial and an overview of the FLARE Fellows' interdisciplinary ageing research. It also contains the key recommendations from the ERA-AGE Forum meeting and Good Practice Workshop on Ageing and Migration.

# The Need for a Multi-disciplinary Approach to Ageing Research

A core principle that unites all of the ERA-AGE consortium members is the importance of multi-disciplinary approaches to ageing research. This principle was built into the foundations of ERA-AGE and was a key element passed on to it from the European FORUM project, which involved many of the present participants in ERA-AGE. Why is multi-disciplinarity regarded as so crucial in this field? There are two main reasons.

First of all there is the complexity of the ageing process. It is self-evident that ageing does not take place in a series of disciplinary boxes. No single discipline can provide all of the knowledge and evidence necessary to either understand the ageing process or to develop responses to it, be they policies, practices or products. This is clear when we consider that the causes of morbidity and mortality in later life split roughly 25/75 between the genetic and the environmental. Thus, it is only by working in collaboration, that the various disciplines can provide a holistic picture of the ageing process, including its behavioural, biological, clinical, cultural, historical, social and technological dimensions. This is not to suggest that *all* ageing research questions must be the subject of multi-disciplinary inquiry. Where multi-disciplinarity is required and which disciplines are involved must be a matter for scientists and the particular research questions involved. In the ageing field, sooner or later, scientists encounter problems and questions that are not confined to a single discipline. This should be expected because, to paraphrase Karl Popper, scientists are not primarily students of disciplines but of problems and problems may span several disciplines.

Secondly, multi-disciplinarity is crucial when confronting major social issues such as ageing. If Europe is to respond to this grand challenge of ageing which faces the continent it must quickly develop a portfolio of policies, practices and products aimed at its ageing societies. Clearly no single discipline can produce this portfolio. Moreover, if disciplines work in isolation on it, they may miss entirely the vital cross-over issues, such as the cultural and behavioural aspects of nutrition or the social and economic dimensions of ICT applications.

In addition, particularly in a European context, there is a need for a substantial critical mass of research expertise to address the rapidly changing dynamics of population and individual ageing. Some countries lack the resources to support, in-depth, a wide range of research and, therefore, multi-disciplinary collaborations may be the most cost-effective. If Europe as a whole is to rival the massive resources devoted to ageing research by the National Institute for Ageing in the US it needs to act more often in unison by combining disciplines across national boundaries. This means, among other things, that the tendency of the current Framework Programme to favour disciplinary research must become more open. Barriers, to multi-disciplinary research such as this, exist at the national as well as European levels. They also include institutional divisions, for example between research councils; lack of designated funding; the low scientific status of multi-disciplinary research; ideological differences between disciplines; disciplinary introspection; lack of appropriate journals and inadequacy of disciplinary-based peer review systems.

What precise forms multi-disciplinary collaborations take, again, is a function of the research questions involved. At present though, Europe lacks scientists with the experience of working in multi-disciplinary teams or who have practiced the breaking down of subject boundaries via inter-disciplinary or trans-disciplinary research. This is precisely why the Future Leaders of Ageing Research in Europe (FLARE) Programme instigated both cross-national and cross-disciplinary mobility for its post-doctoral researchers.

This programme is intended to lay the foundations for multi-disciplinary ageing research in Europe by training the next generation of gerontologists. In addition there are several national models that may be used as exemplars in the development of multi-disciplinary ageing research initiatives, such as the Academy of Finland ([www.aka.fi/en-gb/A/Academy-of-Finland/Academy-publications/Publication-series](http://www.aka.fi/en-gb/A/Academy-of-Finland/Academy-publications/Publication-series)) and the UK's New Dynamics of Ageing Programme ([www.newdynamics.group.shef.ac.uk](http://www.newdynamics.group.shef.ac.uk)). Further afield the US National Academies of Sciences produced a valuable report in 2004 *Facilitating Interdisciplinary Research* ([www.nasonline.org](http://www.nasonline.org)). In planning future initiatives in ageing research ERA-AGE will continue to emphasise the importance of multi-disciplinarity.

**Alan Walker**

**Professor of Social Policy and Social Gerontology**

**Director, ERA-AGE**

# FLARE Fellows: Interdisciplinary Ageing Research

## **Mechanisms of strategic elaboration and associate binding in episodic memory: A lifespan developmental approach**

Yvonne Brehmer

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Episodic memory (EM) efficacy increases from childhood to adulthood and decreases in old age. This lifespan trajectory may suggest similar mechanisms underlying child development and ageing in EM performance. However, maturational and senescence-related changes of memory performance may reflect different processes since EM is not a unitary ability but involves different components.

The research project will assess the relative importance of two components (e.g., strategic and associative) in affecting age differences in EM performance, using children, younger adults and older adults. Functional magnetic resonance imaging (fMRI) will be applied to delineate neural correlates of age-related memory changes across the lifespan. The investigation of the underlying neural correlates of different EM components and their potentially different lifespan trends will facilitate for clear predictions on unique and shared maturational and senescence-related changes across the lifespan.

Currently, I am finalising the study design in collaboration with my home and receiving institutions. The fMRI data collection will commence in autumn 2008.

## **Economics of formal and informal care for an ageing population**

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Long-term care raises challenging financing and management issues. The research aims at improving the knowledge of living conditions of disabled elderly from both an economic and a sociologic point of view. The need for personal assistance with activities of daily living will be assessed and compared to care received from relatives and/or formal caregivers which may help to measure the extent of unmet needs and social inequalities. The research also focuses on informal caregivers' motivations to provide care and medical and socioeconomic consequences resulting from their provision of care. Costs of care will be evaluated for different health care systems in France, Ireland, and Sweden in regard to the role played by the family, state and market. Recent dataset and relevant econometric tools will be used. Results may therefore provide useful information for public policies.

The research focuses on methodological and bibliographical concerns at present. I will engage with colleagues who develop and monitor forthcoming national surveys on disability, health and informal caregivers. Following this, I will investigate the econometric area and the appropriateness of the models that I intend to use. I will subsequently examine economic and sociological literature in regard to the themes described above.

## **A normative frame for the evaluation and regulation of age-related biomedical innovative interventions: Individual, social, and justice aspects**

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The project will develop a normative framework for the consequences of age-related innovation on the individual and on the social level. First, the general aim of life-prolongation will be examined according to its ethical desirability on the individual and social level. Secondly, a normative model for the just allocation of resources in the context of age-related interventions will be developed. Philosophical theories of the good and social justice will be applied to the theories of just health care, categories of goods created by age-related innovations, and concrete goods represented by such interventions.

The research commenced in February 2008. A normative analysis and reconstruction of arguments relating to the rational desirability of extending the human life-span on the individual level is underway.

## **Age-related changes in the use of linguistic cues for speech intelligibility in background noise**

Antje Heinrich

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I am interested in the effects of ageing and hearing loss on the use of linguistic cues for speech understanding. In the first part of the project I will examine the effect of fine phonetic detail (FPD), such as resonances, on speech perception. I will subsequently compare the effect of FPD with that of other linguistic cues such as semantic context and, possibly, speech rhythm. The goal of the research is to further our understanding of why older listeners can find it difficult to follow a conversation in noisy backgrounds under



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some circumstances on the one hand, but manage as well as, or even better, than young adults in other situations. The broader aim is to understand which cognitive and perceptual factors influence speech perception and how their contribution changes with age.

I am currently working to build up a collection of speech material containing various combinations of speech cues.

## Impact of metabolic control on cognitive function and quality of life in elderly diabetic patients

Anna Marie Herghelegiu

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Life expectancy and prevalence of Diabetes Mellitus are both rising, therefore growing numbers of older people will live and suffer from complications of this disease. Increasing evidence suggests that diabetes contributes to cognitive impairment in the elderly which in turn affects their ability to manage diet and therapy that subsequently affects their quality of life. The research aims to correlate metabolic parameters in Diabetes Mellitus with the risk of developing mild cognitive impairment and dementia in the elderly, correlate the therapeutic management of diabetes with patients' cognitive function and quality of life and set up new methods of maintaining a good quality of life for the diabetic elderly population.

So far, the randomisation of subjects, database organisation and necessary administrative and financial procedures have commenced.

## Effect of interleukin 6 on T cell subsets in old age: A search for new markers of immunological competence and frailty

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With respect to the current demographic development in many countries, infectious diseases in elderly persons are becoming an increasingly important issue. A key player involved in the regulation of inflammatory and immunologic responses is the cytokine interleukin (IL)-6, which increases with age and may contribute to a chronic inflammatory state in elderly persons ("inflamm-ageing"). The research therefore aims to identify molecules involved in IL-6 signaling that predict T cell function or dysfunction and that may be used

as new diagnostic markers for immunological competence in old age and in patients under stress situation (e.g. hip fracture). First results demonstrate that the IL-6 receptor is expressed only on specific T cell subsets and that IL-6 influences the proliferation and the survival of these T cell subsets. Further experiments aim to elucidate the effect of IL-6 on the differentiation and function of these T cell subsets and to uncover the underlying molecular mechanisms.

## Role of mitochondrial dysfunction in astrocytes in brain ageing

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The cellular and molecular mechanisms underlying age-related dysfunction of the brain are not fully understood. Impairment of mitochondrial function is a factor for ageing in many tissues including the brain. Astrocytes play roles in synaptic plasticity, survival and adult neurogenesis. Given their role in brain physiology, astrocytic dysfunction might be an important contributor to neuronal dysfunction and cognitive decline associated with ageing. To this end astrocytes in the aged human brain will be examined for impairment of mitochondrial function. The studies will be combined with studies in mice, in which we induce mitochondrial dysfunction specifically in adult astrocytes and examine consequence on cognition, neurogenesis and gene expression. The research will provide new insights into the role of astrocytes in the process of brain ageing.

This work will commence in June 2008. Currently, mice are being bred to generate the mouse model of aged astrocytes.

## Degeneration and ageing – the effect of pathogenic mitochondrial mutations

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The project addresses the fundamental question of stochastic ageing due to mitochondrial deoxyribonucleic acid (mtDNA) mutations, and whether ROS are involved in the process. Even though mitochondria have been shown to be a major site of radical oxygen species (ROS) production and mitochondrial damage has strong association with ageing, no convincing evidence exists about the causal relationship of mtDNA mutations provoking ROS production,

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leading into deoxyribonucleic acid (DNA) and protein damage and thus producing cellular dysfunction and further ageing.

The main hypothesis is that the human pathogenic mtDNA mutations affecting mitochondrial complex I enzyme resulting in different clinical phenotypes cause divergent consequences in mitochondrial metabolism. To elucidate these changes, the functional genetics approach will be used to reveal the effects of biochemically characterised mitochondrial complex I mutations, modelled in *Escherichia coli* enzyme.

We have already shown that MELAS-disease associated mutations decrease the amount of assembled enzyme and that the activity of the assembled enzyme is decreased. On the contrary, Leber hereditary optic neuropathy – mutations were found to perturb the interaction of the enzyme with its substrate. We are currently exploring the further consequences of these mutations.

## **The urokinase receptor in vascular ageing: regulatory mechanisms and clinical perspectives.**

Julia Kiyan

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Even in the absence of recognised risk factors, ageing induces arterial wall thickening due to the alteration in the control mechanisms of vascular smooth muscle cells (VSMC) phenotypic modulations and functional behaviour. This, in turn, leads to increased age-associated susceptibility to vascular diseases such as arteriosclerosis and restenosis. The research addresses molecular mechanisms of ageing-related vascular diseases. Our recent findings revealed potential activity of the urokinase receptor (uPAR) in regulation of VSMC phenotype and functions. The aim is to (i) elucidate uPAR function in ageing-related VSMC phenotypic changes and functional consequences, which are of clinical relevance and (ii) develop in vitro model of VSMC phenotypic regulation by substrate topography applying methods of laser material processing as a new interdisciplinary approach to control vascular ageing.

Current research aims to identify target VSMC proteins and genes regulated by uPAR using in vitro model reflecting vascular ageing. Further evaluation of the obtained results in vivo will provide new cues for developing new therapeutic approaches.

## **Forms of ageing, dependency and responsibility; from public policies to the informal sector – Configurations of care and intrafamilial solidarity in France, Great Britain and Greece**

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The object of the interdisciplinary research is to study the structuring role of the State, by looking at policies and social/health structures in three European countries: Great Britain, France and Greece. Alongside the macrosocial level concerning broad governmental policies, the aim is to understand the rationalities and strategies between actors in both the formal and informal sectors. Experiences of ageing effectively evolve in 'correlation with' but also 'alongside' the norms created by policies of dependence, when it is not 'in spite of them'. This raises the question of the differentiating distribution of responsibility concerning care for elderly people who are experiencing loss of autonomy. Such care involves various participants: how is care, arbitrated by the State, constructed around the elderly person, their entourage and professional workers? How does the distribution of responsibility amongst these different protagonists operate?

In attempt to address these questions, 90 monographies are in progress with a sample based on thirty or so households located in each of the three countries. Supported by a gerontological approach involving geriatrists, epidemiologists, public health teachers and sociologists, this study will consider statistical data gathered since 2002 amongst an ageing population experiencing loss of autonomy, the majority suffering from Alzheimer's disease and cared for by hospital structures in the three countries. In this way, a qualitative method based on a microsociological, comprehensive and contextual approach is articulated around a biomedical perspective thanks to data collected in the framework of epidemiological studies, and a macrosociological analysis of policies in the three sociocultural and economic contexts, thus shedding light on the three systems of social protection.

# FLARE Fellows: Interdisciplinary Ageing Research

## The role of lifestyle factors in the prevention of dementia: A life course approach

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Lifestyle and health behaviour (e.g. exercise, smoking, and diet) have been linked to cardiovascular disease. Recent studies suggest that these factors also may lead to dementia and Alzheimer's disease but findings are controversial depending on timing of factor assessments.

Lifestyle factors in midlife are more consistently reported than in later life to be associated with dementia. It is hypothesised that there may be a "time window" during which having these risk factors may play a more relevant role in dementia. In this project, we integrate two databases from the Swedish SNAC-Kungsholmen Population Study and the Finnish CAIDE Project, in which data on health behaviour, lifestyles, and nutritional factors over the lifespan were available. Dementia and subtype dementia in both projects were diagnosed following the international criteria. By integrating the two well-established databases, we are able to investigate the role of lifestyle factors in dementia from the life-course perspective, and further to formalise the preventative strategy against dementia by targeting these lifestyle factors.

As planned, the data from the two projects are currently being prepared for integration.

## Dependency: The emergence and legal construction of a social risk in Europe

Katarzyna Rubel

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The dependency of elderly people is a problem for all the European countries facing an ageing population. Given the definition of social security law, the first aim of the research project is to measure to what extent dependency is recognised as a "social risk" and how it is acknowledged by European member states social systems. In most affected countries, single public services fail to cover all the needs of long-term care. Consequently, different issues are raised. From a methodological perspective, the research aims to implement a comparative legal approach which will analyse the main characteristics of recent legal reforms of different countries.

I am currently engaged in the first phase of my research which aims to identify concept(s) that individual European

member state use and to establish relevant areas and modalities that deal with the issue of elderly dependent people in those countries be it partly or fully.

One key aspect currently emerging from the research concerns the recognition of individuals' right to long-term care and the preservation of various family and intergenerational forms of solidarity.

## An integrated investigation of vascular cognitive impairment in population based studies across Europe

Blossom Stephan

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As the population ages the prevalence of cognitive decline and dementia will increase markedly. However, the etiology, pathophysiology and risk factors linked to dementia are not fully understood. Apart from age, vascular disease (VD) is the second largest single identifiable risk factor for cognitive decline and dementia and the only one currently treatable. Earlier diagnosis and identification of preventable or modifiable risk factors for dementia have become major public health priorities. The research project will explore the interrelationship between VD, cognitive decline and dementia to determine the mechanisms by which individuals become susceptible to cognitive decline secondary to VD. The aim is to better elucidate vascular related markers that are diagnostically sensitive and specific in identifying those individuals who are likely to progress quickly to dementia. This is relevant as vascular related cognitive impairment is potentially treatable and preventative action may avoid progression to dementia.

I have completed the literature review covering Mild Cognitive Impairment (MCI), Vascular Cognitive Impairment (VCI), vascular risk and dementia (AD, VaD and mixed dementia). I am writing a discussion paper linking MCI and VCI. Using data from the MRC Cognitive Function and Ageing Study, the prevalence of vascular disease in the normal, MCI and dementia groups has been calculated. This was completed using data from the first assessment and two-year follow up. I have also begun working with EPIC-Norfolk to clean their cognitive data. It is anticipated that within the next two months MCI/VCI will be mapped in EPIC-Norfolk dataset. From this we will investigate lifestyle/disease interactions to help identify modifiable vascular risk factors that initiate cognitive impairment and contribute to its progression.



# FLARE Fellows: Interdisciplinary Ageing Research

## **Inflammation, muscle weakness and disability in older people**

Kristina Tiainen

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Although the recent studies have suggested that inflammation may play an essential role in the process of ageing and the development of disabilities, the pathway from inflammation to functional limitation and disability is not fully understood.

The purpose of this study is to examine associations of the inflammatory markers with muscle weakness, functional limitation and disability and if genetic factors account for these associations. In addition, the aim is to investigate to what extent gene polymorphisms that regulate the inflammatory markers are associated with muscle weakness, functional limitations and disability among old (aged 65 years and over) and the oldest-old (aged 90 years and over) men and women.

The systematic analysing has been started to examine longitudinal changes in the contributions of genetic and environmental effects to isometric muscle strength among older twins. The results of the project will provide new insight to the explanation of the individual differences in the development of muscle weakness and functional limitations. Results will also help to understand why some persons can live without functional disabilities to very old age whereas others suffer from mobility limitations even at younger ages.

## **Elderly care in a globalised world: a study of cross-cultural interaction in the context of Swedish elderly care**

Sandra Torres

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Globalisation is challenging the planning and provision of elderly care services across Europe. Multicultural societies who want to plan and deliver high-quality and user-friendly care to their older population have begun to understand that assumptions and understandings regarding ethically/culturally different 'Others' have implications for the daily interactions that take place across ethnic/cultural boundaries in different welfare contexts. The project aims to shed light on how elderly care providers and recipients - in Sweden - perceive and relate to those that are ethnically/culturally different from them and how the perceptions and behaviours in question affect the planning and provision of elderly care.

The project's empirical point of departure is comprised of ethnographic data. A little over 330 hours of participant observation and a total of 37 semi-structured interviews have been compiled through field work undertaken in two nursing homes over a period of 12 weeks. The data, which is being transcribed at the moment, will be ready for analysis in the summer of 2008. This project will expand our knowledge of the challenges that cultural heterogeneity poses to the planning and provision of elderly care and will further our understanding of what lies at the core of the cultural conflict that is often taken for granted when culture-appropriate care initiatives are being discussed.

The research begins in July 2008.

## **Quality of social care for the elderly – The effects of public funding on social care systems & social care provision**

Birgit Trukeschitz

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Quality of social care for people in later life is a topic of perennial interest. In European welfare states, private funds and public monies are essential for covering the needs of frail elderly people. However, it is not only the level of public funding devoted to the necessities of greying societies it is also how the money is spent that is important.

The research objectives are: (i) integration of disconnected concepts of quality of social care for the elderly (ii) development/redesign of a typology of social care (funding) systems and (iii) analyses of the performance of different regimes of public funding with regard to access to, mix of social care and service quality aspects.

Empirical analyses are based on combining qualitative and quantitative methods of research.

Work on this project commenced in April 2008.

# FLARE Fellows: Interdisciplinary Ageing Research

## The impact of PPAR signalling on Alzheimer's disease

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Epidemiological studies have demonstrated that long-term intake of non-steroidal anti-inflammatory drugs (NSAIDs) decrease the risk for developing Alzheimer's disease (AD). However, the mechanism behind these NSAIDs is still controversial. A subset of NSAIDs activate the peroxisome proliferator-activated receptor-g (PPARg). PPARg is a ligand-activated transcription factor that belongs to the super family of nuclear receptors. The activation of PPARg has been associated with potent anti-inflammatory as well as anti-amyloidogenic effects in cell culture and AD animal models. Unfortunately, very little is known about the molecular mechanisms that sub-serve these effects. The research project tries to identify and characterise primary PPAR target genes in microglia and neuronal cells which is considered to be important for the development of new therapeutic strategies and targets for the treatment of AD.

Microglia cells in brains of AD patients display markers of inflammation and are defective in clearance of amyloid- $\beta$  in neuritic plaques. We believe that therapeutic strategies helping brain macrophages to adopt an M2 anti-inflammatory phenotype should enrich the brain parenchyma with cells able to actively dampen inflammation, reduce amyloid production and sustain its clearance, thus promoting tissue repair. Therefore we are currently evaluating whether PPARg could favour the differentiation of monocytes toward an anti-inflammatory M2 phenotype. Our preliminary results suggest that PPARg activation could, besides its inhibitory effect on several pro-inflammatory mediators, influence the expression of anti-inflammatory genes.

## Fostering lifelong autonomy and resources in Europe: Behaviour and successful ageing (FLARE-BSA)

Jochen Philipp Ziegelmann

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FLARE-BSA aims to give a solution for the problems of the ageing society by advancing theory development and intervention design in self-regulation and successful ageing. A key aim is to derive and to evaluate age-sensitive health behaviour change interventions from the Theories of Selection, Optimisation and Compensation and Socioemotional Selectivity Theory. A closely related aim is to study the interplay between health behaviours and objectives as well as subjective indicators of successful ageing (key topics: motivational and volitional resources; health behaviours; objective and subjective health; designing age-sensitive interventions). Based on new intervention studies as well as on the analysis of existing databases, an innovative approach to foster health behaviour change across the lifespan and relationship between health behaviours and successful ageing will be established ([www.health-and-aging.de](http://www.health-and-aging.de)).

So far there have been successful preparatory meetings between the participating institutions (University of Zurich, Vrije Universiteit Amsterdam, German Centre of Gerontology, Freie Universitaet Berlin) of this multidisciplinary project which combines the fields of Psychology, Gerontology, Epidemiology and Biomedicine. Currently new longitudinal intervention studies on health behaviour change are prepared. Also new suggestions for additional measures to extend and to continue existing multidisciplinary ageing studies are being developed.



# European Forum Meeting Fifth European Meeting



The fifth highly productive ERA-AGE forum meeting was hosted by the Caisse Nationale D'Assurance Vieillesse on 26th to 27th November 2007 in Paris. The meeting brought together the ERA-AGE partners, associate members and the other European ageing research scientists, funders, policy makers and other end users from 16 European countries. The European Forum meeting aimed to promote the exchange of ideas and discussion between key stakeholders with a view to share knowledge, identify research gaps and make recommendations for future research in ageing and migration.

The Forum commenced with a short welcome and introductions from Patrick Hermage, Director of CNAV, Michele Kail (Deputy Director of CNRS) which was followed by a series of presentations.

Key recommendations from the meeting include the following actions:

On the key needs of older migrants, acknowledge diverse migrant situations, biographies and backgrounds and:

- Develop (i) an EU vision on health and migration which can be shared and promoted, (ii) an integrated health and social care strategy which considers migrants, states, labour markets, employers and families and (iii) broader universal access to health and social care services with an emphasis on health promotion, prevention, treatment, rehabilitation and welfare.
- Involve non-governmental organisations in developing culturally sensitive and non discriminatory services.
- Promote international cooperation between countries of origin and destination to prevent the 'brain drain' of health and other professionals.
- Endorse and promote good practice across all sectors in the field of ageing and migration.

On the key priorities for comparative research:

- Develop a European Platform focusing on how comparative research is managed and shared between countries – this may be undertaken by an experienced partnership such as ERA-AGE.
- Carry out consistent comparative quantitative data for older migrants in Europe broken down by age, country of origin, gender and return migration.
- Evaluate how European countries' migration, migrant and welfare policies affect family and intergenerational relationships.
- Promote basic research to develop rigorous theoretical concepts and internationally standardised terminology relating to older people in different European contexts.

# European Forum Meeting

## Fifth European Meeting

- Carry out comparative research focussing on various 'care' related issues including the relationship between institutional and home-based care; the assumption made by health and elderly care workers about older migrants and how these assumptions impact on the quality and user-friendliness of service provision and, on the subject of 'care drain' and 'brain drain', analyse how the competing needs of different nation states for migrant provision can be balanced.
- Analyse factors motivating migration and the impact of migration (including seasonal migration) on migrants and families left behind.

On the key policy priorities and good practice for meeting the needs of older migrants:

- Develop concrete policies and measures that are especially tailored to older migrant's health and social care needs.
- Identify and remove barriers affecting utilisation of existing care services and delivery of care that meets cultural and language needs. Freedom from discrimination on all levels.
- Increase collaboration between researchers, policy makers, practitioners, non-governmental organisations (NGOs) and representatives from older migrant organisations to encourage older migrants to inform research, policies and practice.
- Good practice approaches should be investigated to identify examples of inclusion of migrant representatives in the formulation, shaping and evaluation of policies and services; provision of clear concise information on individual rights in using care services which is translated in different languages; and implementation of race and age equality policies.

On facilitating improved links between research, policy and practice:

- Develop a European Platform to promote knowledge transfer.
- Culturally sensitive care services should regularly involve policy makers, researchers and older migrants when promoting contacts, exchanging information, improving system sensitivity and monitoring impact.
- Develop a database providing information on policy makers who specialise in ageing and migration.
- Target policy bodies to disseminate research data as it emerges.
- Establish a special interest group of stakeholders across Europe.
- Develop adequate and flexible funding calls to finance linkages between research, policy, practices and countries.

For more details, please visit the ERA-AGE website to access the Forum meeting report ([www.shef.ac.uk/era-age](http://www.shef.ac.uk/era-age)).



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## Forthcoming Events

**Final Forum / conference**

The final ERA-AGE Forum will take place in 2009. Details of this important event will be made available via forthcoming newsletters and the ERA-AGE website in the near future.



The ERA-AGE Consortium



**ERA AGE**

**European  
Research  
Area in  
Ageing**

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**SIXTH FRAMEWORK  
PROGRAMME**

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