



Report of the First Meeting of the European Forum Meeting & Good Practice Workshop

16th and 17th February 2005
Organised in partnership with
The Academy Of Finland, Helsinki

Held at the Academy of Finland



European Commission
6th Framework Programme
ERA-NET/1/CA-SSA No. 510177

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EXECUTIVE SUMMARY OF WORKSHOP RECOMMENDATIONS

The First ERA-AGE European Forum Meeting and Good Practice Workshop noted that research funders need to know more how ageing research is funded in different European countries. The participants at the meetings represented a diversity of research funders, representatives of research institutes, councils and funding agencies, policy makers and researchers across Europe.

Coordination and collaboration of ageing research

- Ageing research in all ERA-AGE partner countries seems to be well established though not nationally coordinated.
- Ageing research on the European landscape is fragmented and there is an urgent need to plan and coordinate it strategically at the national as well as the European level.
- The European landscape represents very different structures and contexts which need to be better understood to enable collaboration.
- It is evident that international collaboration between researchers and research institutions is beneficial and vitally needed in ageing research and collaboration between research funders already underway should be further strengthened.
- The National Forums of Research Funders are a useful tool to bring national funders, policy makers together and to share the knowledge and coordinate ageing research at national levels.
- Multidisciplinary collaboration in ageing research is lacking and it is difficult to obtain funding for it.

The key challenges on the research level

- Changes in the demographic profile in Europe are resulting in increases in the ageing population, therefore ageing should become a priority for research.
- Public awareness needs to be raised. The public needs to be aware of the importance of ageing research and this should begin with informing them about demographic changes in the population and developing a greater awareness of what ageing means.
- It is important to stimulate interest in ageing research generally as well as to find out the means how to make ageing research more attractive for medical scientists.
- The ageing field should become a more secure career for the younger researchers so that the talent is retained.
- There is a lack of specialization in ageing research. In many European countries ageing research is one theme in biomedical or social science research and there are some projects on ageing under these themes but there is a lack of overall planning on ageing research.
- The research findings need to be disseminated to the whole society nationally and internationally.

The key challenges on the research policy level

- There is a shortage of funding for ageing research across the countries therefore it could be fruitful to work closely with politicians to convince them that ageing research is important and needs to be stimulated and prioritised.

- There should be a dialogue initiated between researchers and politicians so ageing becomes a priority on the political agenda. Collaboration with policy makers should be established on the national level.
- Private organizations should be motivated to invest resources into ageing research.
- It was indicated that only the most established or largest funders have the capacity to create programmes and undertake international joint funding.

Funding issues

- Lack of funding is a common problem across the countries represented at the meetings. In some of the countries there is no tradition in funding ageing research.
- There is a lack of continuity in funding across the countries in Europe. If there is no continuity in funding in a research area there is a high risk of losing expertise once the funding expires.
- The timescale for programmes is not long enough, the programmes only run for short periods of time, giving too little time to reap real gains from these investments.
- In some countries there is a lack of money to implement the research results and data is not used to its full value.

Differences between existing and new EU members

- In new EU members countries and candidate countries in recent years pension reforms, high level of unemployment and a lack of social insurance caused an increase in poverty among the older people which consequently resulted in increased morbidity and mortality.
- Older workers are considered to be a priority particularly Finland and Sweden. There is a difference among countries, in some older people are not allowed to stay in the labour market whereas other countries are experiencing difficulties in persuading them to stay economically active for longer.
- The availability, access to and organisation of health and social care services for older people is a strategic research issue in many countries. In the new EU member countries the recent reforms and the reorganisation of health care and social care services have resulted in the situation in which many older people are being excluded from such services.
- Many European countries may have sufficient levels of health and social care services at the present but increases in future demands on informal care by family members may change his situation.

Some possible avenues for ERA-AGE

- ERA-AGE should undertake a coordination role for ageing research on the European level. Ageing research activities are difficult to register systematically given their diverse and multidisciplinary nature, therefore ERA-AGE should build its strength on coordinating this diversity rather than trying to standardise complicated established systems.
- ERA-AGE should remain open for new partners. ERA-AGE has a system of Associate Membership for the countries that do not have ageing research programmes.
- Knowledge sharing and comparative research may be an important workshop to run for ERA-AGE. Looking thematically at databases on ageing across countries and disciplinary areas. The issues will be very complex but finding a way to share and compare this data would be of great benefit and bring real added value from existing research.

- ERA-AGE could help to develop common research languages, tools and databases which should be looked at thematically. This would be of a great benefit and will bring a real added value from existing research.
- ERA-AGE could undertake a role of developing collaboration between old and new members of the EU.
- ERA-AGE should collaborate on inputs to the EC 7th framework programme.

PROGRAMME

European Forum Meeting Wednesday 16th February 2005 Day 1

Welcome and Introductions
Opening plenary chaired by

- **Kalervo Väänänen** (Chair of the Research Council for Health)

Introduction to the ERA-AGE
Project and its relationship to the
FORUM project

- **Alan Walker** (Coordinator, University of Sheffield)

Presentations

Norwegian research programmes
on ageing

- **Steinar Kristiansen** (The Research Council of Norway)

European database of research
programmes

- **Kirsi Lumme-Sandt** (University of Tampere, Finland)

Framework Six Programme ERA-
NETS

- **Marc Van Achter** (DG Research, European Commission)

Working Groups

First session of the working groups on managing and funding ageing research - knowledge sharing and making links

Good Practice Workshop Thursday 17th February 2005 Day 2

Plenary Presentations

Welcome from the chair

- **Claudine Attias-Donfut** (Caisse National D'Assurance Vieillesse, France)

Presentations

Dutch research programmes on
ageing

- **Lucienne Willems and Inesz van Benten** (ZonMw, The Netherlands)

Academy of Finland's inter-
disciplinary research programme
on ageing

- **Marja Jylhä** (Professor of the University of Tampere, Finland)

Working Groups

Second session of the working groups on managing and funding ageing research - knowledge sharing and making links

Closing Plenary

- Feedback from the breakout groups and discussion

AIMS OF THE EUROPEAN FORUM MEETING AND GOOD PRACTICE WORKSHOP

This was the first European Forum meeting and Good Practice Workshop of the ERA-AGE project and it took place over two half-days.

The First ERA-AGE meeting brought together the ERA-AGE partners, associate members and other European ageing research funders and policy makers with the aim of exploring ways of working together. The meeting focused on an information exchange about research programmes on ageing, on sharing examples of good practice in programme management, on dissemination of knowledge and discussion of the issues of funding ageing research in Europe.

Short presentations by the ERA-AGE consortium on both days were followed by working group discussions, the recommendations of these working groups were presented in the plenary on the second day.

One of the tasks of the ERA-AGE project is to establish a European database of research programmes on ageing. The database represents stage one of the data gathering which was completed in December 2004. The completed database will be available online in September 2005. The information provided will be used to develop knowledge sharing and collaboration in ageing field.

Before the meeting the participants were asked to provide a one page summary on how ageing research is funded in their country. This information was used to develop a background document for the meeting booklet 'How Ageing Research is Funded in your Country'. This booklet will be further developed for next European Forum meeting.

Four further meetings of the European Forum will take place over the next three years. The next meeting will be held on the 9th September 2005 in The Hague.

SUMMARY OF PAPERS

The European Forum on Population Ageing Research Introduction to ERA-AGE Professor Alan Walker, the University of Sheffield

The European Research Area in Ageing - ERA-AGE

- Background
- ERA-AGE
- The Role of the European Forum

Background to ERA-AGE

- Origins: three drivers of change
- Building blocks towards the Europeanisation of ageing research
- The need to 'join-up' initiatives

Building Blocks in the Europeanisation of Ageing Research

1991	European Observatory on Ageing and Older People
1992	Eurobarometer on Older People
1993	European Year of Older People and Solidarity Between Generations
1999	UN Year of Older People (the society for all ages)
1998-2002	FP5 Key Action 6
2000	First European Forum on Population Ageing Research
2001	FORUM
2004	ERA-AGE

FORUM: Realising the Benefits of Ageing Research

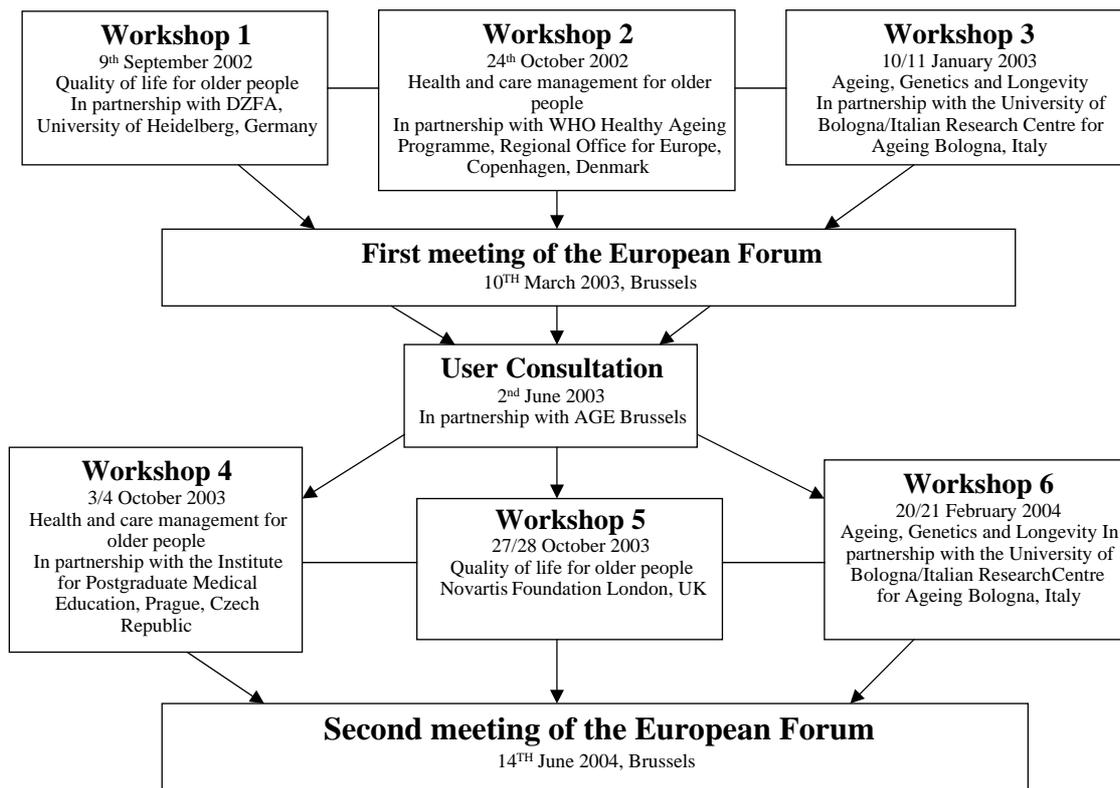
- To promote European co-operation in ageing research
- To develop synergies between national and international programmes
- To improve channels of communication. To stimulate interdisciplinary research
- To promote improved public awareness

Coordinating European Research on Ageing

Methods:

- Forum on population ageing research
- Workshops on priority topics
- User consultation conference
- Steering group
- Dissemination

Forum: Timetable of Events



European Forum on Population Ageing Research: Knowledge Gaps and Research Priorities

	INSTRUMENTS	STRUCTURAL LIMITATIONS	METHODOLOGICAL ISSUES	RESEARCH PRIORITIES
QUALITY OF LIFE	1) Consensus on how to understand, measure and define QoL – both standardised and culture specific. 2) Predictors of active ageing. 3) Assess environmental measures to understand how to improve the lives of older people.	1) Developing gerontology researcher capacity in quantitative and financial expertise. 2) Health issues have taken priority to the detriment of other aspects.	1) Biographical and older person centred perspectives. 2) Involving older people in research. 3) Theoretical development that integrates findings across the domains of QoL. 4) Examination of societal level as well as the individual – including provision, providers and recipients. 5) Targeting of research on 50-67 year olds – ‘tomorrow’s older people’.	1) Data on wealth and goods in kind and individual as a unit as well as household. 2) Little is known about the causal factors of inequalities between countries and social groups. 3) How income needs and perceptions of older people change as they age. 4) Investigate expectations and normative belief systems of older people. 5) Investigate cross-cultural definitions of QoL.
HEALTH AND SOCIAL CARE MANAGEMENT	1) More effective quality assurance of e-health and e-care services. 2) All interventions should be tested amongst the ‘oldest old’.	1) Expand research beyond the dominant perspectives and the limitations created by commercial priorities. 2) Fund more research into non-medical interventions.	1) Methodologies need to keep up with the rapid evolution of knowledge – i.e technology, modelling, representativeness, culture. 2) User involvement is underdeveloped and under-utilised. Need for more flexibility and clarity about how and why to involve users.	1) What e-health and e-care services are available, what services do older people want & how do these services interact with others? 2) How to get people on low income and with low education to use these services – greater accessibility. 3) Extensive European longitudinal study that begins by reviewing existing longitudinal studies and their methodologies and variables.
GENETICS LONGEVITY DEMOGRAPHY	1) No international standard co-morbidity index 2) how to measure and define health and frailty in the oldest old is controversial.	1) The challenge is how to identify bridges between disciplines and integrate their understandings of longevity and ageing.	1) Nonagenarians are under-researched in longevity studies. 2) Co-ordinated approach regarding what biological samples and data should be gathered. Statistics should help define this.	1) Better define the phenotype ‘longevity’ from a biochemical and physiological perspective. 2) Investigate relationship between diseases and longevity to define which genes to study. 3) Focus on what happens before mortality, why people survive with co-morbidity and what can be changed by what interventions. 4) Researchers should try to answer: a) can we attain a robust common measure of individual biographical frailty? b) Can we use this measure to identify genetic, lifestyle, psychological, social and environmental factors that influence the onset of critical frailty?

The European Research Area in Ageing (ERA-AGE)

April 2004-March 2008 Objectives:

- To facilitate coordination of existing ageing research programmes
- To promote interdisciplinary research activities between countries
- To share good practice in coordination and management of ageing programmes
- To support the production of European priorities for ageing research programmes
- To help break down the barriers between ageing research programmes and policy and practice

The European Research Area in Ageing (ERA-AGE) Partner countries:

Austria, Finland, France, Germany, Israel, Italy, Luxembourg, Netherlands, Norway, Romania, Sweden, UK (coordinator)

Associate Partner Countries: Latvia, Spain

The European Research Area in Ageing (ERA-AGE)

Methods:

- Systematic exchange of information and good practice eg. Databases, workshops
- Strategic activities eg. European Forum, expert meetings
- Joint activities eg. Website links, open calls for research
- Transnational collaboration eg. Draft cooperation agreement

The Strategic Role of the European Forum

- Potential synergies between national programmes
- Share information
- Identify knowledge gaps
- Disseminate information

Recent Ageing Research in Norway Steinar Kristiansen, The Research Council of Norway

State of the Art and the Future of Norwegian Research of Ageing

- Point of departure: 1998
- Proposal from Norwegian Social Research to the Ministry of Health and Social Affairs
- Commission from the Ministry to the Research Council: A report on the State of the Art
- Commission to NOVA in 1999
- Report presented in Dec 2000

Four featured conclusions of weaknesses:

- Too narrow profile
- Too weak on data for research
- Too weak international orientation
- Too weak recruitment

2002

- Commission from the Ministry to the Research Council

- Call for proposals for 2003-2007
- Budget: NOK 100 M over 10 years (circa 12 million Euro)
- Response: 14 proposals

The key aims for the call

- To develop a broader and *multidisciplinary* research effort on a long term basis.
- The main fields of research:
 - Ageing and Society, including issues within policy for the elderly, consequences of an ageing population for society, changes in family patterns, labour market, elderly as consumers, and attitudes and images of ageing.
 - Medicine and health research focused on clinical and basic issues related to ageing, geriatrics and ageing psychiatrics.
 - Health and caring services, including the economics of housing and organising models of services, general health economics, quality of services, recruitment of personnel and the balance between public and private care solutions.
 - Ageing, coping and quality of life, including differentiation and adoption of social and cultural capital among the elderly, risk of marginalization, welfare deficit and mental problems.

Strategic priorities

- Research
- Recruitment and competence development, including doctoral students
- International cooperation and network building
- Dissemination to users, authorities and the public, plans for publication

Projects

- *Ageing and senior life in a life course perspective. The NOVA strategic research plan 2002-2007*
Responsible Project Institution: Norwegian Social Research (NOVA)
- *Working life and welfare of the elderly*
Responsible Project Institution: Ragnar Frisch Centre for Economic Research
- *Role of scavenger cells in the ageing process*
Responsible Project Institution: Institute for Medical Biology, Tromsø University
- *Course and neurobiology of neuropsychiatric symptoms in Parkinson's disease; and Intervention to prevent use of restraint and behavior problems in nursing homes*
Responsible Project Institution: Health Stavanger HF

- *Genetic and metabolic studies of dementias*
Responsible Project Institution: Medical Faculty, The Norwegian University of Science and Technology

Spring 2005

- Call for supplementary projects

2006

- New call for remaining period

Dissemination

- Contact group for the NOVA and Frisch Centre (requested by the Ministry):
 - Twice a year from late 2003
- September 2004:
 - Meeting for all projects, central authorities and NGOs
 - Basis for a *National Ageing Forum*
- June 2005:
 - National Ageing Forum: First regular meeting

ERA-NET

Cooperation and Coordination of National or Regional Research and Innovation Activities (i.e. programmes) Marc van Achter, European Commission, Research DG

Coordination of Research

- Policy level
 - open method of coordination
 - mapping, benchmarking, score boards
- Programme level
 - ERA-NET
 - Article 169
- Project level
 - New Instruments
 - Traditional Instruments

Overview – Information (1)

New very innovative scheme under FP6:

- Networking of national/regional programmes
- Ambitious goals: Joint calls and joint programmes
- Public programmes or parts thereof

- Exclusively for public authorities and implementing agencies
- Any field in science and technology - “bottom up”
- Open call 148 M€- Only for Coordination NO research

Overview – Information (2)

Objectives: To step up the cooperation and coordination of national or regional research activities through networking of programmes including their mutual opening and the development and implementation of joint activities.

“Programmes” should be understood as entire research and innovation programmes, or parts of such programmes, or similar initiatives having the following characteristics:

- be strategically planned
- be carried out at national or regional level
- either be financed and managed directly by national or regional public bodies, or by structures closely related to or mandated by public authorities (e.g. agencies).

Participants

The Partnership composition allows as eligible participants:

- Legal entities from at least 3 MS or AS of which at least two are MS or candidate AS with the following characteristics:
 - public bodies responsible for financing or managing research activities carried out at national or regional level
 - other national or regional organisations that finance or manage such research activities
 - bodies operating at European level that include as part of their mission the pan-European coordination of nationally-funded research
- A sole participant, being a grouping of public bodies (EEIG or any similar structures)

In addition to the minimum number of participants other legal entities (e.g. charities) managing such research programmes, may participate. The partnership can be gradually increased.

Activities

A step by step approach....but ambitious

ERA-NET may include the following activities to foster coordination and cooperation between programmes:

- 1 - Systematic exchange of information & best practices
- 2 - Common strategic issues
- 3 - Development of joint activities
- 4 - Implementation of transnational research activities

- 1 - Systematic exchange of information and best practices

Information exchange between programme managers on:
(possible examples)

- Actual running projects in the respective programmes
- National or regional research priorities
- Existing evaluation practices
- Programme management practices

2 - Common strategic issues

Identification and analysis of:
(possible examples)

- Research activities that could lead to multinational schemes between ERA-NET partners
- Practical networking activities and mutual opening mechanisms
- Administrative or legal barriers that hinder transnational cooperation
- New opportunities and gaps in research and stimulation of new interdisciplinary work
- Common evaluation systems

3 - Development of joint activities

Concrete joint activities could cover:
(possible examples)

- A posteriori clustering of research projects
- Development of multinational evaluation procedures
- Schemes for joint training activities
- Mutual opening of facilities or laboratories
- Common programme monitoring and evaluation
- Personnel exchange at programme manager level
- Specific co-operation agreements or arrangements
- Action plan to implement a joint strategy

4 - Implementation of transnational research activities

Implementation of transnational research activities could include:
(possible examples)

- Common or joint calls for proposals
- Setting up of a joint work programme
- Transnational evaluation and dissemination
- Funding of research activities based on a joint programme of transnational research activities

Coordination Actions

Activities related to networking and mutual opening of national or regional programmes are eligible for financial support. These activities may cover the indicated steps for coordination and cooperation and the overall coordination of the networking activities.

No research activities will be financed by ERA-NET (CA).

Financial aspects and duration:

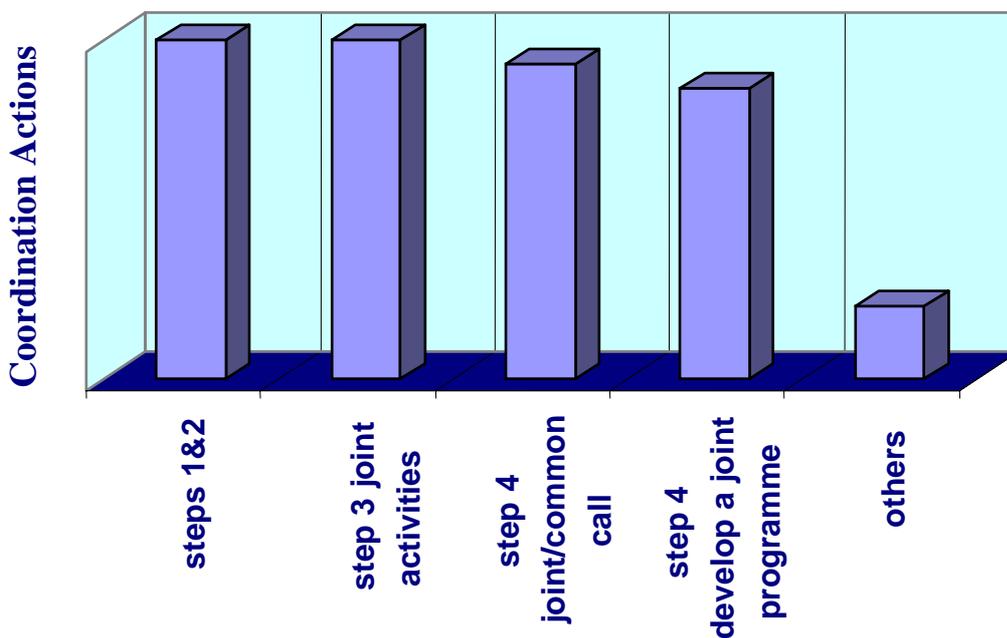
- 3 M€max. funding for :
 - all eligible networking costs (100%)
 - indirect costs (20% of direct costs minus subcontracts)
 - consortium management (100% up to max. 7% of the EU contribution)

- 5 years max.

Lessons learned from the first 2 cut-offs

- An excellent response through 117 proposals with over 800 proposers
- Overall success rate of 44% (healthy over-subscription)
- Strong participation from ministries, funding agencies and national research councils in the successful proposals (69%) involving all MS and Associated States
- Wide distribution of submitted ERA-NETs across many fields of science and research

Ambitions of the selected ERA-NETs



Examples of Joint/Common Calls envisaged

Extracts from 5 different CA contracts (ANNEX I):

- Example 1: Options might include a Joint Call related to existing national programmes...
- Example 2: establishing joint calls and evaluation procedures...
- Example 3: a joint call will be launched...
- Example 4: to publicize common calls for proposals...
- Example 5: the steering group will take the strategic decision on how to incorporate a pilot for a common call...

Examples of Joint Programmes envisaged

Extracts from 5 different CA contracts (ANNEX I):

- Example 1: options might include the development of a futuristic joint programme...
- Example 2: the highest level of co-operation, namely establishing common programmes is defined as the ultimate ambition...
- Example 3: implementation of a transnational research programme...
- Example 4: an experimental joint programme, relatively small and focussed, to test joint design and implementation of programmes with shared or pooled funding...
- Example 5: Framework document for a Joint Programme (JP) including details of common working programme, and standards for a JP-evaluation and JP-monitoring system...

Benefits: “What’s in it for you”

National/regional research programmes and their managers will benefit through:

- increased and close cooperation with European colleagues:
 - exchange of best practices
 - identification of who is doing what
 - exchange of programme management approaches
- Common platform dealing with “horizontal” issues (i.e. ethics, international cooperation)
- Joint strategies and transnational action plan for implementation
- Reflection on intensified transnational RTD co-operation
- Enable programme users to do international research cooperation through national programmes

Implementation of the ERA-NET scheme

Commission services will:

- Foster a wide awareness on the “ERA- NETs” and its pilot experiences
- Encourage the cooperation between research and innovation programmes as major contribution to the development of ERA
- Encourage sustained cooperation beyond the ERA- NET contract
- Ensure the dissemination of experiences on joint calls and transnational “pilot programmes”
- Ensure the coordination with other relevant Commission services (inside and outside DG Research)
- Ensure the coordination with EUREKA and COST

Coordination of nat. programmes in FP7

Objectives

- Maintain the type of participants in ERA-NET (programme owners);
- Underline the need for “ambitious goals” to achieve more “hard” coordination of programmes;
- “Deepen” the existing ERA-NETs (activities, countries, regions);
- Activities in-between networking of programmes and Art. 169 (flexible instrument) ERA-NET-*Plus...*

ERA-NET “*Plus*”

Outlook FP7

“Deepening” of the action:

To cope with a wider range of activities:

- *Coordination* (Networking of public authorities incl. new MS)
- *Collaboration* (Joint activities, strategies and programming)
- *Co-funding* (trans-national research through Joint calls - topped up by EU funding)

Apply variable geometry e.g. Joint Calls depending:

- on the participants (rules, legal basis)
- the timing of participating national programmes
- the selected call topics

Bridging between ERA-NET and Article 169

INFORMATION & ASSISTANCE

Infopack: <http://www.cordis.lu/fp6/calls.cfm>
NCPs: <http://www.cordis.lu/fp6/ncp.htm>
Website: <http://www.cordis.lu/fp6/coordination.htm>
Helpdesk: rtd-coordination@cec.eu.int
Evaluators: <http://www.cordis.lu/experts>

Funding Ageing Research in the Netherlands
Lucienne Willems and Inesz van Benten, The Netherlands Organisation for
Health Research & Development (ZonMw)

The content of this presentation:

- Funding Ageing Research at ZonMw
- Characteristics of ZonMw
- The method of working at ZonMw
- Knowledge transfer and implementation
- Ageing Programmes at ZonMw
- Two programmes in particular
- Research on Care in Nursing Homes
- Research Institute of Diseases for the Elderly

The two main goals of ZonMw are:

- Taking care of the scientific quality of research
- Knowledge transfer and implementation: ensuring that knowledge is exchanged between all relevant stakeholders (health researchers, health professionals, patients/consumers and the general public).

The method of working at ZonMw

- VWS/NWO commission
- a programme-document
- call for proposals
- a board of experts
- peer reviewers
- funding of projects

Knowledge transfer and implementation

- what kind of results/products will be produced?
- for what kind of organisation or target group will the results be relevant?
- what are the opportunities and threats the target group will use the results?
- what kind of strategies are needed to make the results will be disseminated or implemented?

Ageing programmes in ZonMw

ZonMw coordinates about 80 programmes.

About 200 projects are aimed at the elderly.

10 programmes are directly aimed at research on the elderly:

- Successful ageing
- Memory processes and dementia
- Psychiatry of the elderly
- Research on care in nursing homes
- Research Institute on Diseases of the Elderly (2000 – 2004)
- Programme Prevention I, 1998 – 2002
- Programme Prevention II, 2003 - 2007
- Healthy living
- Homecare technology
- Rehabilitation, Elderly

Two programmes in particular:

Research on Care in Nursing Homes (applied research)

Research Institute of Diseases in the Elderly (RIDE) (Fundamental research)

Research on Care in Nursing Homes

- a small programme (€1.200.000)
- two aims:
 - improve quality and efficiency of *care* in nursing homes
 - improve quality of the *research* on care in nursing homes
- nine projects
- the projects
- clinical studies (8)
- topics
- effectiveness of a kind of therapy
- constructing and validating indexes for co-morbidity
- developing and examining measurement instruments for quality of life / quality of care
- communication and implementation-methods

- teaching the researchers about dissemination and implementation
- asking for dissemination and implementation plans
- giving the opportunity to get some extra money
- communication and implementation plan for the total programme

Good practices

The board

- scientific expertise and experience in practice
- multidisciplinary
- an older person representing the elderly
- The emphasis on knowledge transfer and implementation

Challenges

- obtaining more funding
- obtaining more coherence between the projects

Research Institute of diseases in the Elderly

1999-2004	€3.000.000	20 projects
2004-2008	€3.600.000	21 projects

Main aims

- facilitate biomedical research into the etiology of diseases in the elderly and ageing
- stimulate embedding of ageing research in the Netherlands
- stimulate dissemination and implementation of the results

Research topics

- neurological diseases (Alzheimer's disease)
- cardiovascular diseases (atherosclerosis)
- endocrinology (diabetes)
- genome stability and ageing

Embedding of the research

- establish an open and *national network* and *forum for discussion* on ageing research
- direct leading research groups to ageing research
- stimulate collaboration and a multidisciplinary approach
- link fundamental and clinical research
- stimulate the use of one population of elderly: the ERGO cohort

Implementation and dissemination

- scientific meetings and discussion groups (twice a year)
- open symposium (every other year)
- scientific publications
- dissemination and implementation protocols

Research Programme on Ageing in Finland 2000-2002
Professor Marja Jylhä, School of Public Health, University of Tampere

Main objectives

- To help the society contain the problems and challenges presented by the ageing of the population
- To activate innovative basic and applied research into ageing issues
- To promote cooperation and dialogue between different disciplines and fields of inquiry within ageing research
- To strengthen the involvement of the academic community in the ongoing public debate on ageing

History and background

- First multidisciplinary research programme (incl. research training programme) in 1986- 1989
- Decision to start a new programme in 1998
- A working group, a programme memorandum
- Coordination through competition: a Programme Manager and Executive Coordinator (60% of working time)

All fields of research eligible. Relevant themes include:

- The study of ageing process
- Social and cultural dimensions of ageing
- Functional capacity
- Biological mechanisms of ageing

Challenges presented by the ageing of individuals and the population

- Ageing, working life, life-long learning
- Living environment
- Ageing and technology
- Old-age policy and services
- Ageing and market

A two-phase call

- 100 plans of intent
- 50 for the second round
- 21 projects selected for funding

Criteria:

- scientific quality, originality, innovativeness
- relevance for the Programme
- scientific competence of the applicant & the group
- organization and co-operation

An international panel met in Helsinki and collectively rated the applications

- Dr Svein-Olav Daatland, NOVA, Norway
- Professor Konrad Beyreuther, University of Heidelberg, Germany
- Professor Dorly Deeg, Free University of Amsterdam, The Netherlands
- Professor Claudio Franceschi, INRCA, Italy
- Professor Jaber F Gubrium, University of Florida, USA
- Dr Fred van Leeuwen, Netherlands Institute for Brain Research
- Dr Chris Phillipson, University of Keele, UK
- Dr Heidrun Mollenkopf, University of Heidelberg, Germany
- Professor Alan Walker, University of Sheffield, UK

Final funding decisions made by the sub-committee of Academy of Finland, in collaboration with other funding agencies.

Financing of the Programme

- Academy of Finland (2.522.819 €)
- Social Insurance Institution (266.914 €)
- Finnish Work Environment Fund (302.738 €)
- Ministry of Social Affairs and Health (252.282 €)
- Ministry of Education (100.913 €)
- Ministry of the Environment (67.275 €)
- Association of Finnish Local Authorities (16.819 €)

Extent and Scope of the Programme

- 12 universities and research institutes involved
- 21 projects
- More than 100 researchers
- A budget of EUR 3.4 million

The projects - Biological Ageing

- Normal and pathological aging of the brain (Prof. Matti Haltia, University of Helsinki)
- Advantages and disadvantages of postmenopausal hormone therapy: A preventive trial (Prof. Elina Hemminki, STAKES)
- Andropause – The age related decline of testicular function (Prof. Ilpo Huhtaniemi, University of Turku)
- Mild cognitive impairment as a predictor of Alzheimer disease (Prof. Hilikka Soininen, University of Kuopio)

The projects - Functional Capacity and Well-being

- The process of frailty and disability in older women (PhD Taina Rantanen, University of Jyväskylä)
- Lifestyle and functional capacity of elderly Finns (Head of laboratory, Antti Reunanen, national Institute of Public Health)
- Patina of Time 1973 –2000 - On well-being and longevity in an ageing cohort (Senior researcher Päivi Leino-Arjas, Finnish Institute of Occupational Health)
- Health, functioning and well-being among ageing employees - The Helsinki health study (Prof. Eero Lahelma, University of Helsinki)

The projects - Ageing, Work and Economy

- The labour market challenge of workforce ageing (Research director Rita Asplund, The Research Institute of the Finnish Economy)
- Age, work and gender: Management of ageing in the later working life (Prof. Raija Julkunen, University of Jyväskylä)
- Economic effects of ageing in Finland (Research director Jukka Lassila, The Research Institute of the Finnish Economy)
- Life strategies of ageing women: Subsistence alternatives of women past forty, ca 1800-2000 (Senior researcher Marjatta Rahikainen, University of Helsinki)
- Towards a successful old age: From a full working career to an active retirement (Prof. Risto Rinne, University of Turku)

The projects - Everyday Life and Services

- Older women – Invisible road users (Prof. Liisa Hakamies-Blomqvist, University of Helsinki)
- The village community as a resource for the aged in the sparsely populated areas of Lapland (Prof. Simo Koskinen, University of Lapland)
- Constructing age, health and competence: Argumentation and rhetoric in institutional and personal discourse (Prof. Anssi peräkylä, University of Tampere)
- Ageing and independent living – Smart medicines for the physical environment (Prof. Tuomo Siitonen, Helsinki University of Technology)
- Assessment of and ethical guidelines for enabling technologies in old age (PhD Päivi Topo, STAKES)
- Future home of elderly people (Prof. Anna-Maija Ylimaula, University of Art and Design Helsinki)
- Encounters in the local welfare-mix for the older people (Prof. Juhani Lehto, University of Tampere)
- Towards an integrated evaluation system for the long-term care of the elderly (Research professor Unto Häkkinen and research professor Marja Vaarama, STAKES)

The forms of cooperation

- Seminars and workshops
- Informal research networks
- A web site
- Research training
- Joint publications

Why multidisciplinary ageing research?

- The problems and challenges of aging societies are not properly met without a holistic approach
- Knowledge from several disciplines is needed and used by individual practitioners in the field of aging
- The decision-making in the societies should ideally be based on the widest possible knowledge base
- The results of different disciplines may point to contradictory directions in practical decision-making

Obstacles for multidisciplinary cooperation

- Diversity of scientific paradigms, cultures and languages across different disciplines - Differences in
 - Object of the study
 - Ways to define the object
 - Concepts, thematizations
 - Understanding of the method and the role of the researcher
 - Criteria of the quality
 - Dissemination of the results, publishing traditions

Examples of multidisciplinary cooperation (In a single project)

The village community as a resource for the aged in the sparsely populated areas of Lapland

- Architecture, cultural anthropology, education, industrial design and social sciences
- Objective: To develop the activities of the village community to support the aged population
- Methods: Interviews, active observation, photography, documents
- Interventions are developed, monitored and evaluated through participatory planning

Examples of multidisciplinary cooperation (between projects)

Collaboration between the projects aiming at better environments for the elderly

- Researchers working together for a better understanding of their objects of research, concepts and methods
- Clarifying basic concepts from the perspectives of different disciplines: home, independent living, autonomy, adaptation and coping, quality of life ...
- Researcher training seminars, thematic workshops, contacts with the practitioners

Examples of multidisciplinary collaboration (At the program level)

- Annual seminars – encourage networking and strengthening gerontological expertise
- Thematic workshops and informal research networks – facilitate real dialogue between different disciplines
- A web site
- Researcher training
- Joint publications and sessions in the national and international conferences

Evaluation of the Programme

Scientific evaluation

- an international panel met in Helsinki in 2003

Evaluation of the relevance

- a Finnish panel

Ageing Research Programmes in Finland - Past, present, future

- Ageing Research Programme 1986-1989
- Ageing Research Programme 2000-2003

- Targeted funding for Internationalization of Ageing Research 2005
- ERA-AGE and National Forum on Ageing Research 2004

Working Group Themes and Recommendations

Participants of the meetings were organised into four working groups. The discussion took place over two days. Each group had a chair and a rapporteur.

- Group 1 was chaired by Adrian Curaj (The Executive Agency for Higher Education and Research Funding, Romania) and rapporteur was Gerda Geyer (The Austrian Academy of Sciences, Austria).
- Group 2 was chaired by Benny Leshem (The Israeli Ministry of Health, Israel) and rapporteur was Lubica Strakova (The University of Sheffield, UK).
- Group 3 was chaired by Ulrike Kohl (Fond National de la Recherche, Luxemburg) and rapporteur was Joanne Cook (The University of Sheffield, UK).
- Group 4 was chaired by Kenneth Abrahamsson (Swedish Council for Working Life and Social Sciences, Sweden) and rapporteur was Kerstin Carsjo (Swedish Council for Working Life and Social Sciences, Sweden).

The working groups discussed the following questions and the outcomes of discussions were presented to the closing plenary.

Working Group Questions:

Session 1

- 1) How is ageing research funded in your countries?
- 2) What are the strategic priorities for ageing research in your countries?
- 3) What challenges have you encountered – both in terms of obtaining funding and in managing ageing research programmes/projects?
- 4) What strategies have been used to overcome the challenges?

Session 2

- 5) What similarities, connections and differences can you identify between the ways that ageing research is funded in your countries?
- 6) Can examples of good practice be identified?
- 7) What useful steps could ERA-AGE take in enabling more cooperation on ageing research amongst research funders, policy makers and managers?

The working groups were not homogenous and represented a diversity of research funders, researchers, representatives of research institutes, research councils, other funding agencies and policy makers from 17 European countries. Because of the diversity of organizations and national structures for ageing research, it was difficult to get a clear picture of how ageing research was funded in the different countries represented. Diversity of experience also meant that in some cases it was difficult to follow the precise guidelines for the group discussions and a broader approach was adopted instead. As the result of this diversity in the working groups not all the questions were covered in the time given and the summary of the questions are organized as follows:

- The funding of ageing research in participants' countries
- Strategic priorities for ageing research in participants' countries

- Challenges and problems encountered – both in terms of obtaining funding and in managing ageing research programmes/projects and strategies used to overcome the challenges
- Identification of examples of good practice/milestones
- Useful steps for ERA-AGE to take to enable more collaboration among research funders, policy makers and managers

1) Funding of the ageing research in participants' countries

In all countries ageing research is funded by national governments via different ministries. The other important funders are research councils and the private sector. Usually funding from the ministries is not fixed and it often depends on whether the government decides to promote research on ageing at that time. Ageing research in all the ERA-AGE partner countries is well established, although not always nationally coordinated. The summaries of funding ageing research are not intended to be extensive and some gaps will inevitably be present. This information is expanded in the background booklet for the meeting 'How Ageing Research is Funded in Participants' Countries'. Copies can be downloaded from the project website.

In Austria there is a long tradition in ageing research and there are several research institutes that specialize in ageing research. The Institute for Biomedical Ageing Research, funded by the Academy of Sciences is the largest one. The Austrian Academy of Science is the major funder of ageing research with respect to institutes. The funds come also from various ministries and the private sector.

In Belgium ageing is interpreted as a personal issue therefore it receives funding only at the community level and not at the national level. It is funded separately in the three different communities (Flemish, French and German). Therefore, there is no federal or national programme on ageing, only community level projects.

In Finland ageing research is funded mostly from public funds. The Ministry of Education allocates funds to the Academy of Finland, the major funding agency for basic research. The Academy provides funding based on competition and international peer review for research programmes and research projects carried out at universities and research institutes. The Ministry of Social Affairs and Health allocates annual budgets for governmental research institutes like the Finnish Institute of Occupational Health, the National Research and Development Centre for Welfare and Health (STAKES) and the National Public Health Institute. Among their basic tasks of research, such as development and monitoring, they support also research projects on ageing. Other ministries and public organisations (i.e. Finnish Work Environment Fund) also occasionally support ageing research. For example the Ministry of Trade and Industry allocates funds to the National Technology Agency of Finland (TEKES) which supports applied research and industrial projects and has funded a programme of ageing technology. Ageing research has a long tradition in Finland. Several mainly multidisciplinary programmes have been supported but they have been relatively small. There are many research groups organised as institutes, units or teams at the universities and government research institutes as well as a small national graduate school, however ageing research is not coordinated at the national level.

Ageing research in France is almost entirely funded from public funds which are allocated to public research institutions, universities and individual researchers within these institutions. National Science Fund (FNS) provides funds for basic research concerning priority areas. Funds are awarded to particular projects on the basis of competitive peer review. Ageing research is financed via FNS through national programmes on specific areas. Institute of Longevity promotes and finances research into all aspects of ageing. Other public bodies that finance occasional projects on ageing are: the Ministry of Employment, Labour and Social

Cohesion and the Ministry of Health. Private organizations also finance ageing research, for example the French National Pension Scheme.

In Germany the German Federal Ministry for Senior Citizens, Family Affairs and Health has recently developed a national plan of action on ageing, in line with the Madrid UN plan of action. The ministry funds sociological research for older people, including conditions of ageing and life in older age, new lifestyles and use of time in older age. Since 1993 national reports on senior citizens and their lives have been produced. These reports deal with the potential of senior citizens in the economy and society and their contribution to the cohesion of generations. The Ministry funds also a longitudinal ageing survey on participation social security and health related behaviors. Every federal ministry has funds for research for example, the Ministry of Public Transport would fund research on mobility and ageing. Charité is currently looking to develop an academy of ageing and generational studies nationally and internationally. Ageing research is focused on three areas: the continuum of care long-term care management; quality of life, continuing medical case management and Biomedical issues. Charité's annual budget for ageing research is 100 million Euros and it seeks to develop its research on dimensions of ageing and national and international collaboration.

In Greece the funding for ageing research comes from the state. It is also possible to get money from the private sector and then the government will top it up. Sociology and demography are less attractive disciplines than biology or medicine, therefore it proves difficult to obtain funding. Ageing research is carried out at universities or institutes. There is no institute that specialises in ageing research.

The Ministry of Health is the main funder of ageing research in Israel. Its grants support relevant research institutes and individual research studies. Another key public funder is the Ministry of Science and Technology whose funding of ageing research is based on open competitive calls. The Ministry of Science and Technology provided initial funds for the establishment of the Israel Gerontological Data Centre, a national database of ageing research resources (publications, linked data and statistical tables), that is accessible online. The Israeli government invests about one million Euro per year into different frameworks (not all focusing strictly on ageing). Research centres at different Universities in Israel promote research in specialised areas. Such research is often funded by private donations.

Ageing research in Italy is funded directly by the Ministry of Health. The Italian National Institute of Health has a direct mandate from the Ministry to coordinate health related ageing research in Italy. Ageing research is conducted at universities, public research centers and by the private sector eg. agencies. Extensive research on ageing is also conducted at universities. Two-thirds of the funds for research come from government and the rest from private agencies.

Ageing research in Luxemburg is funded from public funds that come from different ministries. The National Research Fund (FNR) is an independent body which runs two major research programmes (BIOSAN and VIVRE) where ageing research is funded as a sub-theme. There is no real priority in ageing research but good individual research is being undertaken in the field of ageing. The National Research Fund tries to unite the different ministries and research centres and to have an overview of what issues need to be addressed in relation to ageing research in Luxembourg.

In the Netherlands programmes and projects on ageing are mostly funded by the Netherlands Organisation for Health Research and Development (ZonMw). ZonMw is a governmental organization funded by the Ministry of Health, Welfare and Sports and Netherlands Organisation for Scientific Research. Besides ZonMw there are many research institutes like

the Netherlands Institute of Mental Health and Addiction (Trimbos) and the Netherlands Institute for Health Services Research (NIVEL) which carry out a lot of ageing research but they are not funding agencies. There is a university based research on ageing and also many research centres focus on ageing, for example the Knowledge Centre on Ageing (KCO) which gathers, adapts and transfers knowledge on older people and ageing and applies it into policy and practice. The ageing research at ZonMw is multidisciplinary and the range of programmes is wide (80 programmes, 10 of which are on ageing, 3 programmes are fundamental and 7 programmes deal with preventive health care). The budget for ageing research is about 17 million Euro for a period of 7 years.

In Norway the Research Council of Norway is the only funding agency for ageing research. Money for ageing research comes from the public sector.

In Poland there is no nationally planned strategy on ageing research but some good research on ageing is taking place. There is a 40 year tradition of research in social aspects of ageing and demography studies. Projects include a longitudinal study on mortality and a study on quality of life. Projects can apply for funding twice a year to the national government fund. Poland does have a national programme for health which includes research on quality of life and there are some projects on ageing but only a few.

In Romania ageing research is funded by the Ministry of Education and Research (which funds the Executive Agency for Higher Education and Research). Ageing research is also funded by the Ministry of Health which runs the Geriatrics programme. The Romanian Academy funds research on quality of life and the Institute of Geriatrics, established in 1962, is funded by the Ministry of Health. Funding for ageing research is limited, further complicated by the lack of a long-term perspective and support for basic research. There is also an Institute of Quality of Life which is funded by the Ministry of Social Affairs. The funding budget for ageing research is very small, possibly a half million Euro per year.

In Slovakia there is no specific research programme on ageing. The priorities of ageing research are mainly concerned with pension and health care reform and employment of older people.. The current reforms in the health care system so far have not excluded the older people but on the other hand the reforms in social care system resulted in providing far lower standard of social care for older people. In last five years there have been only a few sociological studies carried out. Current ageing research is concerned mainly with long-term nursing care for older people. The funding for research comes from the state budget, insurance agencies and the EC.

In Sweden the main funders of ageing research are the Swedish Council for Working Life and Social Sciences (FAS) and the Swedish Research Council. FAS coordinate ageing research at the national level on the behalf of government. There are two national centres for ageing research; the Ageing Research Centre and the Institute for the Study of Ageing and Later Life.

In some countries like Switzerland new private foundations, for example Avenir Swiss, were established with the aim to invest money in ageing research and their ultimate goal is to prevent Switzerland from losing its international attraction and keep the country internationally competitive. The fundamental research is funded from the National Funds, ministries and non-profit organizations. There is no programme on ageing. Ageing forms part of Social Security research.

In the UK ageing research is funded by various government ministries, research councils and charities. There are four research councils (BBSRC, EPSRC, ESRC, MRC) which plan, fund and manage research in this area. The councils together with the Departments of Health and

the Department for Work and Pensions are the major players of ageing research funding. But charities such as Nuffield and Rowntree are significant funders as well. There are eight ageing research programmes in operation. The National Collaboration of Ageing Research (NCAR) initiative was set up to stimulate interdisciplinary research in the ageing field and it operated at the national as well as at the European level (via the European Forum). A new multi-disciplinary, cross council research programme New Dynamics on Ageing was launched in 2005 for the duration of 8 years with a budget of 18 million Euro. It replaces the NCAR.

National Institutes on Ageing

- In most of the participant's countries there are no national institutes on ageing as such but many countries have ageing research centers and institutes where ageing research is carried out.

National programmes on ageing

- No national programmes on ageing exist outside of the ERA-AGE consortium. The UK is the only country that has a cross-council multi-disciplinary programme on ageing - The New Dynamics of Ageing. Some other countries are discussing the possibility of developing a national ageing programme.

In order to ensure the funding for ageing research in the future participants stressed two key issues:

- *The importance of enhancing public awareness of the role and value of ageing research*
The public need to be aware of the importance of ageing research and this should begin with informing them about demographic changes in the population and developing a greater awareness of what ageing means. The emphasis needs to be placed on what are the changes in needs as a result of the population ageing and what kind of services are now required. This will enable the public to understand the implications of demographic change and the effect that this will have on their lives, for example in terms of health care, social care, pensions and so on. This aim can be enhanced by disseminating research findings to a wider, public audience and by emphasizing the importance of prioritizing ageing research and provoking public discussion. Furthermore ageing research is too broad subject and many people do not know what it includes how it applies to their lives and therefore it should be explained.
- *Private funding*
Private organizations should be motivated to invest money in ageing research.
- Participants further indicated that only the most established or largest funders have the capacity to create programmes and undertake international joint funding.
- Some planning of ageing research programmes does take place in the ERA-AGE partner countries and there are funded institutes on ageing that strategically plan ageing research. However the European landscape represents very different structures and contexts which need to be better understood to enable collaboration.

2) Strategic priorities for ageing research in participants' countries

The following strategic priorities were identified in the working groups:

- *Changes in the demographic profile in Europe are resulting in the ageing of the population;* therefore this topic should become a priority for research. In some countries, for example Belgium, politicians are asking for prognoses of future demands and costs for health and social services which researchers are trying to deliver through simulation models. The ageing population is being recognised as a priority issue by national governments. For example, in France this has led to establishment of the Institute of Longevity and Ageing. However, this recognition is not always translated into research funding.
- *The availability, access to and organisation of health and social care services* for older people is a strategic research issue in many countries. For example, in Slovakia and Poland recent reforms and the reorganisation of health care and social care services have resulted in the situation in which many older people are being excluded from such services. Other countries may have sufficient levels of health and social care services at the present but increases in future demands on informal care by family members may change his situation.
- *The economic conditions for older people, the lack of strategic priorities*
In new EU members countries and candidate countries in recent years pension reforms, high level of unemployment and a lack of social insurance caused an increase in poverty among the older people which consequently resulted in increased morbidity and mortality. A different situation is noted in other countries, for example Poland, where older people are in a stronger economic position and often have to help economically the younger generation.
- *Older workers are considered to be a priority* particularly Finland and Sweden. In Finland for example, the main task given to the Finnish Occupational Institute of Health is how to extend working life for two to three years (for example retirement at the age of 68). Pension reforms will not help if working is not made more attractive to older workers. There is a difference among countries: in some older people are not allowed to stay in the labour market whereas other countries are experiencing difficulties in persuading them to stay economically active for longer.
- *Studies of cognition and dementia* (including prevention of dementia, early diagnosis as well as care of older people with dementia) appear to be a strategic priority for example in France and Belgium. In Sweden the study of memory, cognition and dementia has a high priority. In one of the multidisciplinary research centres geriatricians, psychologists and sociologists work together on this research topic.
- *There should be a dialogue between researchers and politicians* initiated so that ageing research becomes a priority on the political agenda.

3) Challenges and problems encountered – both in terms of obtaining funding and in managing ageing research programmes/projects and strategies used to overcome the challenges

Strong points of ageing research:

- Well functioning organisations in some European countries.

- Researchers are competitive.
- Researchers are open to international collaboration.

Problems and challenges encountered:

Funding

- *Lack of funding* was a common problem across the countries represented at the meetings. For example in some of the countries like Luxemburg there is no tradition in funding ageing research as this topic is relatively new and ageing research has been established only in 1999. Large amounts of money go into medical research but not into social science. There is a question of how to obtain more money for ageing research.
- *Lack of continuity in funding*

If there is no continuity in funding in this research area, thus there is a high risk of losing expertise once the funding expires. In Sweden for example, successful multidisciplinary research environments have been built up but research councils can not continue funding such centers permanently and other sources of funding seem not to be available (for example universities).

Timescale

- *The timescale for programmes is not long enough*, they only run for short periods of time, giving too little time to reap real gains from these investments.

Scientific issues

- *There is no specialization in ageing research*

In many European countries ageing research is one topic in biomedical or social science research, there are some projects on ageing under these topics, but there is no planning on ageing research. However, ageing research is becoming more important in many European countries.

- There is lack of multidisciplinary collaboration in ageing research across Europe and it proves difficult to get the money for international collaboration.
- It is difficult to recruit medical scientists into ageing research. There is a high competition in the biomedical field, for example cardiology, endocrinology which partly overlaps with the ageing field but ageing seems to be less attractive than endocrinology.
- In some countries, for example Romania, it is not possible for social scientists to apply for research in the medical field, this should become more flexible.
- In some countries there is no money to implement of the research results and data is not used to its full value.

The fundamental issues that need addressing at the policy level:

- How to motivate policy makers?
- How to get politicians more interested in research results in general?
- How to establish collaboration with policy makers?
- How to convince politicians that ageing research is important and needs to be stimulated?
In some countries the main challenges are politicians and not policy makers. The challenge is to work with politicians to convince them about the importance of a common programme. A common call has to be prepared and the legal obstacles need to be taken into consideration.
- How to establish international collaboration? For example funds which come from the EU could be topped up from the national institutions.

The fundamental issues that need addressing at the research level:

- How to create larger research groups?
- How to stimulate more interest in ageing research generally and particularly how make research a more secure career for the younger researchers, so that the talent is retained?
- How to make better use of the large databases that are available in Europe?
- How to achieve better coordination of ageing research?
- For many European countries the challenge is to become an associate member of the ERA-AGE and to obtain comparative data from other European countries. In some cases, especially small countries are looking to find common grounds and possible cooperation in ageing field with another small country.
- In some countries like France researchers want to stay free and not to be attached to the institution, therefore a challenge is to look for ways to collaborate and cooperate. It is necessary to give researchers freedom.
- How to open dissemination to the whole society; to disseminate widely the findings of research nationally and internationally?
- Some countries, for example the Netherlands want to focus on establishing a virtual institute where the data from other cohorts will be included and make links between these cohorts and this will enable a flow of the information between cohorts and data comparison. A virtual institute will enable collaboration between all researchers, this is an issue that ERA-AGE could consider.
- How to motivate scientists to publish in general journals because they are keen to publish only in scientific journals? All findings should be publicised to the wider public and not only to policy makers.
- How to implement a training programme in gerontology?

- How to make ageing research attractive for medical scientists?
- How to enhance ERA-NET collaboration?
- How to devote more time to the discussion to build up new research programmes?
- How to build upon already existing collaboration that has already started between some institutions.
- Ageing research is competing with other research fields therefore it is important to get the research topic on the research agenda as well as on the political agenda.
- University researchers are relatively free in selecting their research topics, they may turn down propositions by politicians, whereas Government funded institutes may not be able to do so.

Strong points of ageing research:

- Well functioning organisations in some European countries.
- Researchers are competitive.
- Researchers are open to international collaboration.

4) Identification of Examples of Good Practice/Milestones

Preliminary examples of good practices were identified and shared with the participants. In some of the countries it was too early to identify examples of good practice as ageing research is not well established. In some cases milestones were quoted instead.

- *Good relationship between media and science*

Regular meetings with journalists have worked well in France. They take the form of informal morning meetings called “Petit Dejeune” where scientists and journalists meet regularly for informal discussion. The aim is to make the public aware of the ageing issues and the media is one of the channels used for disseminating the information. The media are interested in new research outcomes because the public is interested. It is therefore important to attract journalists and to discuss with them. In Luxembourg also a good relationship with the media is well established.

- *Coordination of national research*

In the UK the NCAR represented a good example of how national research could be coordinated. The NCAR initiative brought together scientists who work in ageing research from across the wide range of research fields. Its aim was to share knowledge and develop proposals for working together more effectively. NCAR also brought together the UK’s funders of ageing research and the initiative resulted in a cross council multidisciplinary programme *The New Dynamics of Ageing* which started in 2005 and replaced the NCAR.

A National Forum of Ageing in Finland was stimulated by the UK model via the ERA-AGE project and its aim is to bring together funders, researchers and other stakeholders of ageing research in Finland and to develop more efficient ways of working together in the future.

- *Strategies for coordination of ageing research*

The Netherlands organization ZonMw coordinates research in the ageing field and manages several ageing programmes. It represents an example of a strategy for coordinating ageing research, for example the Programme on Successful Ageing, RIDE project, KCO research institute.

- *Development of new research centers*

In Germany the following milestones were identified:

- Graduiertenkolleg (PhD Programme) – Multimobility in advanced age and selected problems of ageing
- The German Center of Gerontology, Berlin
- DZFA Centre in Heidelberg
- The National Institute of Population Research in Berlin (acts as an advisory body to politicians on ageing research issues)
- New Center of Gerontology, University of Erlangen (founded 2004 by Prof. Sieber, funded by Government of Bavaria)
- The Bureau of statistics and the long-standing ageing surveys running for over 20 years.
- The National Ageing Report (Altenbericht-Kommission) on the status of older people published every year (It was established in 1993).
- Charitè acts as a coordination activity on ageing and has four priority areas (comparative medical care, quality of life and attitudes, continuum of care, biomedical issues). It funds pilot programmes with an annual budget of three to four million Euros.

The Brookdale Institute on Gerontology and Human Development is an important milestone for Israel.

- *Good practice in multidisciplinary, national and international collaboration*

Finland represents a good example of conducting a multidisciplinary ageing programme. The research programme on ageing was considered as a significant milestone because it managed to bring together national research funders and it was a truly multi-disciplinary programme. It laid a sound foundation for ageing research in Finland.

In the Netherlands care researchers and general practitioners are involved in working together on the issues of care of older people and quality of life.

The link between fundamental/biomedical research and clinically applied research has been already established in the Netherlands by using the data of the ERGO cohort which is a longitudinal study conducted among more than 10 000 older people.

International European Collaboration on Ageing, led by the Tampere Group, Finland (Howard Jacobs) on 'Mitochondrial Biogenesis, Ageing and Disease' is a winner of the Descartes prize and could be considered as a milestone.

- *Databases for research*

The Israeli Gerontological Research Database Center has developed a common database for the research community which enables ageing research to be planned strategically. It is funded by the Israeli Ministry of Health and serves as an infrastructure for ageing research. This centre represents an important example of good practice in ageing research because this database includes gray research which is not included in other sources such as thesis research. The centre has developed a research search tool to enable the analysis of data that comes from different sources. If translated this would give great opportunities for comparative research on ageing and enable data sharing across Europe.

Good practice in ageing programmes

- *In the Netherlands user involvement in programmes for people with learning disabilities* can be example of good practice. The programme has a board of researchers and also a board of people with learning disabilities. This board judges the relevance of research proposals.
- The longitudinal programme for the National Research and Development Centre for Welfare and Health with 20 years follow up of older people can be considered as significant milestone for STAKES, Finland.

5) Useful steps for ERA-AGE to undertake to enable more collaboration amongst research funders, policy makers and managers

- Participants suggested that development of common research languages, tools and databases are issues that ERA-AGE could develop and run a specific good practice workshop, for example on involving scientists and funders. Issues raised by the FORUM project and by the working groups at this workshop would help to develop a background to this workshop.
- For example data sources and databases for collaboration. Knowledge sharing and comparative research may be an important workshop to run for ERA-AGE. Looking thematically at databases on ageing across countries and disciplinary areas. The issues will be very complex but finding a way to share and compare this data would be of great benefit and bring real added value from existing research.
- At some point we need to find clusters of how we group ourselves together otherwise if we try to bring too disparate areas together we will get lost.
- *Coordination role of the ERA-AGE*

Ageing research activities are difficult to register systematically given their diverse and multidisciplinary nature, therefore ERA-AGE should build its strength on coordinating this diversity instead of trying to standardise complicated established systems.

- *ERA-AGE should remain open for new partners*

There are countries such as Belgium and Poland who are not ERA-AGE partners and expressed the wish (willingness) to participate in ERA-AGE activities as participants. ERA-AGE has a system of Associate Membership for the countries that do not have ageing research programmes.

- *Cluster approach*

The diversity of research themes and disciplines in the field of ageing imposes a certain structural approach and a cluster approach could be a helpful way of handling this diversity. A cluster element could be added to the ERA-AGE database at a certain point.

- *The following* recommendations made by the Israel Gerontological Society to the Government could be fostered by ERA-AGE:
 - establish a fund or foundation specifically for research on ageing
 - establish a National Council on Ageing
 - introduce measures to promote young researchers into the field of ageing
 - introduce measures to promote multidisciplinary research
 - disseminate information about legislation related to ethical issues

It could be useful for ERA-AGE to gather data on the following:

- most important funders of ageing research together with their budgets per year and their major programmes
- important databases for research-thematically structured
- information pools including national ageing reports produced on a regular basis with scientific input,
- national strategies for coordination of ageing research,
- specific ageing institutes,
- major research projects (max. 5 per country),
- past or planned foresight activities on ageing,
- public-private partnerships in ageing research
- links to the most interesting websites.

Suggestions and strategies for the future of ageing research

- What kind of collaboration between existing and new members of EU could be fruitful?
- How could interaction between ageing researchers across Europe be increased?
- One fruitful area for joint funding could be comparative studies of living conditions in the different member countries.
- To identify data bases and joint research projects. This could be useful for comparative studies or collaboration on ageing research between the member countries. For instance there could be international collaboration in longitudinal research projects in the area of ageing research developed. Some of the studies are already being carried out in several EU member countries.
- To develop programmes for exchange, scholarships, postdoctoral and researcher positions. In France for example, there are many laboratories which would welcome post-doctoral students but there is a lack of such students. ERA-AGE could help by organising post-doctoral networks. In many countries, for example in Sweden a major problem is for post-docs to get funding and a permanent position.
- There is a need to create multidisciplinary structures within universities for ageing research. Sweden has experience in creating two such multidisciplinary centres for ageing research and would be willing to give advice to the other member countries.

- How to build bridges with practitioners and how to develop links with user organisations as well as training in dissemination. It was suggested to organise future meetings around these topics and to draw on experiences of the Dutch organisation ZonMw who hold an expertise in these areas.
- To collaborate on inputs into the EC 7th framework programme and to work towards the establishment of networks and partners which could constitute bases for applications for centres of excellence. Member countries could exchange experiences on how to manage EU-projects, help to identify researchers who work in same area of ageing research as the potential partners.

Appendix A

LIST OF PARTICIPANTS

	NAME	ORGANISATION	COUNTRY
1.	Abrahamsson, Kenneth Dr	Swedish Council for Working Life & Social Research	Sweden
2.	Attias-Donfut, Claudine	Caisse Nationale de, l'Assurance Vieillesse	France
3.	Baro, Franz Prof	WHO-Collaborating Centre on Health and Psychosocial Factors	Belgium
4.	Bednarik, Rastislav Ass Prof	Center for Labour & Family Studies	Slovakia
5.	Benten, van Inesz	Netherlands Organisation for Health Research and Development (ZonMw)	The Netherlands
6.	Carsjo, Kerstin Ms	Swedish Council for Working Life and Social Research (FAS)	Sweden
7.	Coculescu, Mihail Prof	Ministry of Health	Romania
8.	Cook, Joanne Dr	University of Sheffield	UK
9.	Curaj, Adrian Prof	Executive Agency for Higher Education & Research Funding	Romania
10.	Curaj, Aurelia Dr	Executive Agency for Higher Education & Research Funding	Romania
11.	Ferring, Dieter Prof	Université du Luxembourg	Luxembourg
12.	Gandin, Claudia	Instituto Superiore Di Sanita	Italy
13.	Geyer, Gerda	Austrian Academy of Science	Austria
14.	Globerson, Amiela Prof	Weizmann Institute of Science	Israel
15.	Gonos, S Efstathios Prof	National Hellenic Research Foundation	Greece
16.	Hanseler, Marie-France	Institut de la longévité et du vieillissement	France
17.	Heinisch, Renate Dr	European Economic & Social Committee (EESC)	Germany
18.	Hynynen, Raija	Ministry of the Environment	Finland
19.	Ilmarinen, Juhani	Finnish Institute of Occupational Health	Finland
20.	Jacobs, Therese Prof	Centre for Population and Family Study	Belgium

	NAME	ORGANISATION	COUNTRY
21.	Jylha, Marja Prof	University of Tampere	Finland
22.	Kauppila, Anna-Liisa	Academy of Finland	Finland
23.	Kohl, Ulrike	Fonds National de la Recherche	Luxembourg
24.	Kolttola, Lars	Ministry of Social Affairs & Health	Finland
25.	Kray, Ralph Dr	Chaité	Germany
26.	Kristiansen, Steinar	The Research Council of Norway	Norway
27.	Leshem, Benny Dr	Israeli Ministry of Health	Israel
28.	Lind, Jouko	The Social Insurance Institution of Finland	Finland
29.	Lumme-Sandt, Kirsi	University of Tampere	Finland
30.	Marginean, Ioan	Executive Agency for Higher Education and Research Funding	Romania
31.	Nissinen, Auliuki Prof	National Public Health Institute	Finland
32.	Nuutinen, Anu	Academy of Finland	Finland
33.	Ogg, Jim	Caisse Nationale D'Assurance Vielliesse	France
34.	Reunanen, Antti	National Public Health Institute	Finland
35.	Seib, Dorika	Federal Ministry for the Family, Senior Citizens, Women & Youth	Germany
36.	Soininen, Hilikka	University of Kuopio and Health Research Council, Academy of Finland	Finland
37.	Steinmann, Lukas, Dr	Avenir Suisse	Switzerland
38.	Stessman, Jochanan Prof	Hadassah University Hospital	Israel
39.	Stevens, Liselotte	Netherlands Organisation for Health Research and Development (ZonMw)	The Netherlands
40.	Strakova, Lubica Dr	University of Sheffield	UK
41.	Szukalski, Piotr	University of Lodz	Poland
42.	Tobiasz-Adamczyk, Beata Prof	Jagiellonian University	Poland

	NAME	ORGANISATION	COUNTRY
43.	Väänänen, Kalervo	Academy of Finland	Finland
44.	Vaarama, Marja	STAKES	Finland
45.	Van Achter, Marc	European Commission	Belgium
46.	Walker, Alan Prof	University of Sheffield	UK
47.	Willems, Lucienne	Netherlands Organisation for Health Research and Development (ZonMw)	The Netherlands
48.	Yngwe, Per-Erik	Swedish Ministry for Health & Social Affairs	Sweden

Appendix B**LIST OF STEERING COMMITTEE**

NAME	ORGANISATION	COUNTRY
Dr Kenneth Abrahamsson	Swedish Council for Working Life & Social Research	Sweden
Dr Claudine Attias-Donfut	Caisse Nationale D'Assurance Vieillesse	France
Dr Martin Barth	ProjectTraeger DLR	Germany
Inesz van Benten	The Netherlands Organisation for Health Research & Development (ZonMw)	The Netherlands
Giorgio Clarotti	European Commission	Europe
Dr Joanne Cook	University of Sheffield	UK
Dr Adrian Curaj	Executive Agency for Higher Education & Research Funding (UEFISCSU)	Romania
Dr Aurelia Curaj	Executive Agency for Higher Education & Research Funding (UEFISCSU)	Romania
Prof Beatrix Grubeck-Lobenstein	Institute for Biomedical Ageing Research of the Austrian Academy of Sciences	Austria
Prof Marja Jylha	School of Public Health, University of Tampere	Finland
Anna-Liisa Kauppila	Research Council for Health Academy of Finland	Finland
Ulrike Kohl	Fonds National de la Recherche	Luxembourg
Dr Steinar Kristiansen	The Research Council of Norway	Norway
Dr Benny Leshem	Israeli Ministry of Health	Israel
Fritz von Nordheim	European & Social Affairs DG, European Commission	Europe
Anne-Sophie Parent	AGE, European Older People's Platform	Belgium
Dr Emanuele Scafato	Istituto Superiore di Sanita	Italy
Dr Lubica Strakova	University of Sheffield	UK
Prof Alan Walker	University of Sheffield	UK
Lucienne Willems	The Netherlands Organisation for Health Research & Development (ZonMw)	The Netherlands

