



Deutsches Zentrum  
für Luft- und Raumfahrt e.V.



PROJEKTRÄGER FÜR DAS

Bundesministerium  
für Bildung  
und Forschung

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**National Coordinator Report**  
**Ageing Research Programmes**  
**in Germany**

## Introduction

Ageing research in Germany has gained considerable interest from both policy and public opinion on one side and the scientific community on the other side. Therefore, ageing research with its many facets, ranging from the social sciences to health research, biomedicine and basic research has become increasingly important during the last years. For example, the Federal Ministry of Education and Research (BMBF) initiated a funding initiative on "Health in Old Age" in September 2006 with an envisaged financial volume of 30 Mio. € for the next six years. The Max-Planck society recently announced the foundation of a new Max-Planck institute, solely dedicated to the investigation of the biological mechanisms of ageing processes. In addition, traditional institutes have been changed into institutes on ageing issues, e.g. the Leibniz-Institute for Ageing Research in Jena (IMB).

In Germany public R&D funding is rather diverse and highly complex. As it is shown in Fig. 1, funding of research is a primary obligation to the 16 states. There, funding is mainly allocated to the universities where most publicly funded research is carried out. Recently, more Universities put their focus on ageing research. Especially in Berlin, Dortmund and Bielefeld social aspects of ageing are investigated; at the University of Heidelberg/Mannheim and Erlangen/Nurnberg mainly basic and applied medical research is conducted.

Federal funding from the government is only subsidiary to funding from the states. This report, nevertheless, concentrates on funding of aging research via federal programmes from different ministries, predominantly from the Federal ministry of Education and Research (BMBF).

The German Research Council (DFG), which is the largest funding agency nationwide, supports various projects on ageing research; most of them are focused on basic research.

Some major institutions and centres working on age-related topics receive funding via research societies, such as the Max-Planck, the Helmholtz or the Leibniz society. As mentioned before, the Max-Planck Society supports ageing research: in Rostock the Max-Planck-Institutes (MPI) for demographic research is well known for its excellent scientific achievements in the field. In addition, the Leibniz society supports ageing research in its Leibniz-Institute for Ageing Research in Jena (IMB).

## Summary – Funding of research in Germany

### Federal Government

- Under the supervision of the Parliament the different Federal Ministries (e.g. BMBF, BMFSFJ, BMGS) get a certain budget for core and project funding
- Predominantly the Ministry of Education and Research (BMBF) supports project and core (institutional) funding with a focus on applied and clinical research
- Federal project funding has to be subsidiary to other funding (e.g. DFG) and a certain national interest has to be given
- Furthermore basic research is supported by the German Research Foundation (DFG, 58% of the total budget is contributed by the BMBF)
- Research organizations and institutes are supported by the Federal government via core funding with 50% (e.g. MPG) or 90% (e.g. HGF) of the total budget

### State Governments

- The responsible State Parliaments approve the basic budget for education and research of state universities and affiliated hospitals under their supervision
- Basic research project funding is supported by the German Research Foundation (DFG, 42% of the total budget is contributed by the 16 states)
- Research organisations and institutes are partly supported by the State Governments via core funding from 10% (e.g. HGF) up to 50% (e.g. MPG) of the total budget
- State funded institutes (e.g. DRFZ, German Research Centre on Rheumatism)
- Project funding by the responsible State Ministries

### National Panels (examples)

- Consensus Commission of the federal government and the State Governments (Bund-Länder-Konferenz, **BLK**)
- Advisory Board of the Federal Government and the State Governments (Wissenschaftsrat, **WR**)
- Panels and advisory boards of the Federal Ministries (e.g. **BMBF**: Gesundheitsforschungsrat, **GFR**, Wissenschaftlicher and Medizintechnischer Ausschuss, **WA** and **MTA** )

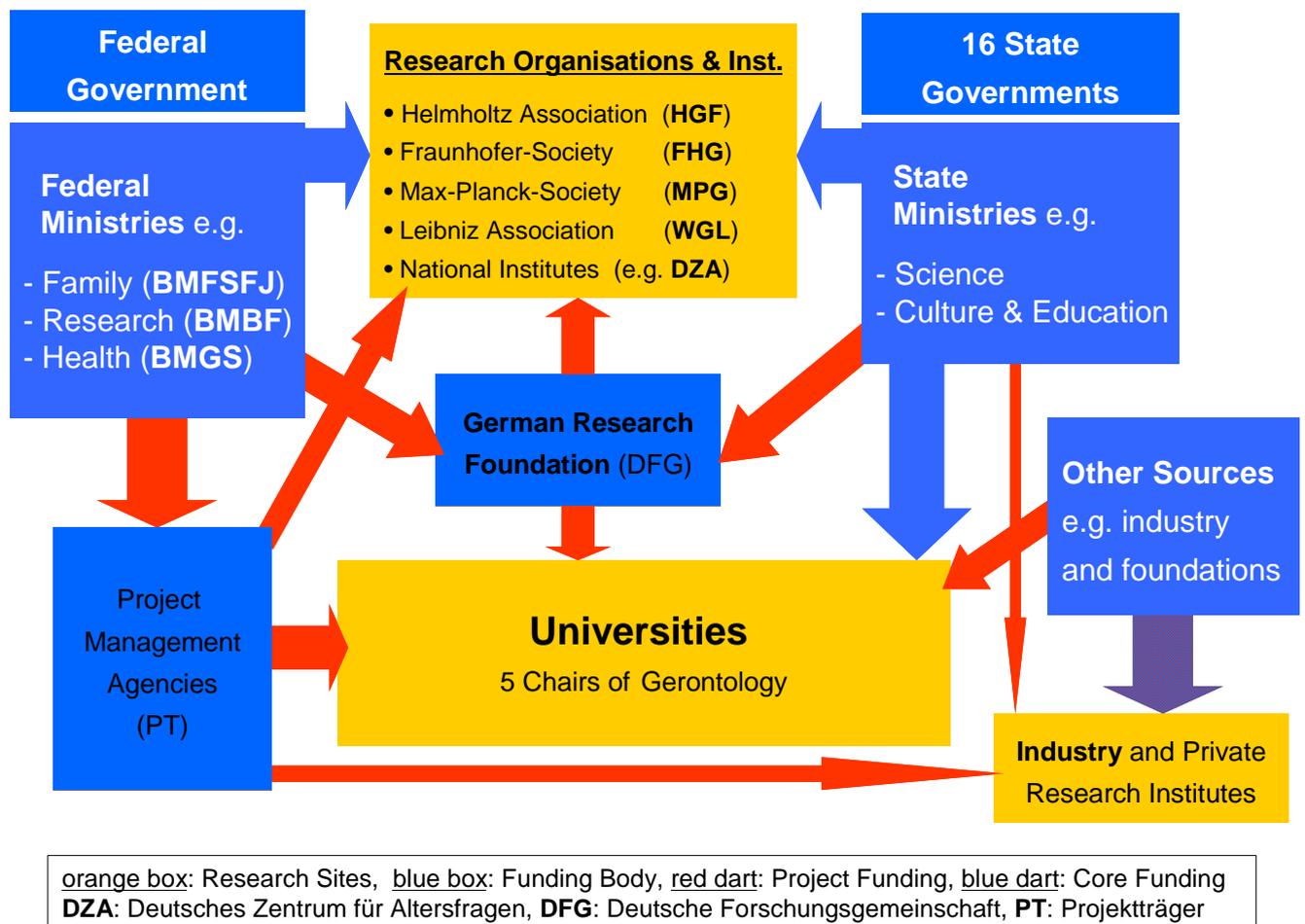
### Institutional or Core Funding

- of universities and associated hospitals (mainly *non-competitive*)
- of Research organisations and institutes, e.g. MPG, HGF, FHG, WGL or DZA (mainly *non-competitive*)

## Project Funding

- by the German Research Foundation, DFG (**competitive**)
- by the Federal Ministries, e.g. BMBF and BMGS (**competitive** and non-competitive)
- by the State Ministries (mainly **competitive**)
- by industry (**competitive** and *non-competitive*)
- by foundations (**competitive** and *non-competitive*)

### Funding of Research in Germany - 1 -



**Figure 1: Interaction between Federal and State Ministries, different funding organisations, universities and other sources.**

## **Section 1**

### ***1.1 Survey on Ageing Research Programmes in Germany***

The National Coordinator Report of Germany is based on the exchange of information and experience on ageing research programmes in Germany. The report has been compiled by interviewing the managers of ageing research programmes and it has been complemented by other background material such as the health research programme: “Health Research: Research for the people”.

### ***1.2 Data collection***

In the course of this survey on ageing research and ageing research programmes in Germany, experts in the field of ageing research were interviewed to gain an overview on the most important funding organisations of ageing research nationwide. Thereafter, these institutions were approached and the database questionnaire was sent. However, in some cases institutions did not send back the questionnaires, even though they were reminded. These institutions are not covered in this report.

Data collection was done by the two national coordinators / Germany: Dr. Martin Barth and Dr. Wolfgang Ballensiefen from the project management organisation.

## Section 2

### 2.1 About the Programmes – Coordination and Aims

#### ***What is meant by a research programme within the framework of the "Health Research Programme" run by the Federal government in Germany?***

Funding of research initiated by the Federal ministry of Education and Research (BMBF) is organized in a top-down approach. The ministry, supported by a scientific expert group ("Wissenschaftlicher Ausschuss / WA"), identifies fields that need special support by a ministry's funding measure, either since they are underdeveloped in Germany or since they are a field of special strength which needs further support.

A research programme is composed of a number of research projects that are focused on a defined subject area or set of problems, that are scheduled to run for a set period of time and that have a coordinated management. Funding can also be allocated to a predefined field of research, thematic area or for a specific purpose. The research calls are publicly announced and open to all research institutions in Germany. The funding is based upon competition between the different proposals.

A funding programme is an important tool for the development of research, science policy, research funding and cooperation among different actors in the field. Research programmes have both general science policy objectives and more specific goals that are unique to each programme. They are also expected to meet certain general requirements: A research programme shall be sufficiently broad and cover a long enough time span, but at the same time it should have a well-defined focus. It should provide added value when compared to separate funding for individual projects, and the programme's novelty value from a research policy point of view shall also be considered.

Research programmes differ from one another in terms of their starting-points, objectives and in how they are placed to achieve those objectives. Research programmes may be motivated by concerns arising from science and/or society in general. Initiatives for a research programme may be prompted by internal development needs within a discipline or field of research or by needs to support a new, emerging field that is yet not fully covered by other funding organisations. An initiative may also arise from an issue or problem that is considered to have societal importance.

#### ***Organisation of other research programmes on ageing in Germany (example)***

In contrast to what was mentioned above funding of scientific projects in the "Deutsche Forschungsgemeinschaft" (DFG) is organized in a bottom-up approach, i.e. scientist send in their applications on any topic at any time, although there is a special emphasis on basic science.

## ***German Research Programmes on Ageing***

### **I.) Programmes of the Federal Ministry of Education and Research (BMBF)**

Within the Federal Ministry of Education and Research (BMBF), ageing research has played a significant role during the last years. Ageing research has been taken up by different divisions within the ministry. The following section is dedicated to these programmes and funding measures.

#### **1) Health Research Programme (Federal government: BMBF / BMG)**

##### **Overview:**

The health research programme is under the autonomy of the Federal government; it is carried out by both, the Federal Ministry of Education and Research (BMBF) and the Federal Ministry of Health (BMG), but solely financed by the BMBF.

The health research programme covers a multitude of funding measures with close links to ageing, e.g. networks of competence in Dementia, Parkinson's disease, projects of the national genome research network (NGFN) Furthermore, there are several programmes dealing with prevention, health care, hormone replacement or cancer and cardiovascular diseases. In these programmes around 20 Mio. € were spent in 2004.

In September 2007, a research programme especially dedicated to ageing research was launched: "Health in Old Age". The focus of this funding measure is on research activities which provide the scientific basis for improving medical treatment and care for older patients. It was intended that the research activities of the collaborations deal with central health issues in old age which have not been given sufficient attention so far. Research carried out by the consortia focuses on one of the following subject areas: a.) Co-morbidity and multi-morbidity of older patients and/or b.) Strengthening health resources and autonomy in old age. Meanwhile, six consortia have been selected for funding. They will receive about 15 Mio. € for the next three years.

The website of the health research programme: <http://www.gesundheitsforschung-bmbf.de/en/104.php>

##### **Details of funding /specific funding measures:**

##### **Breast Cancer Research:**

The programme's aim is to improve research in breast cancer research and to decrease the deficits in this research field in Germany. Especially clinical and epidemiological studies on urgent care and practice-related questions are funded, particularly in the fields of epidemiological research into causes and clinical epidemiology, validation and improvement of the methods of early recognition and diagnosis; therapy optimization studies as well as comparative studies. Furthermore the validation of post-operative care procedures to ensure optimal aftercare and support for patients (with

an emphasis on the quality of life and on social psychology as well as psychosocial aspects) is also funded.

The funding measure was initiated by the BMBF in 2002. BMBF funds the programme with 6 Mio. € and it runs for 4 years with the possibility to elongate research a further 3 years.

### **Health Care Research:**

The programme's aim is to improve research in health care system and to decrease the deficits in this research field in Germany. In addition, the programme aims to lower the barriers to transfer the research results into the health care system. Scientists shall get used to the relevant questions concerning the health care system. Importantly, they shall contribute to the decision making process of the health insurance funds in Germany.

The cooperation between the Federal Ministry for Education and Research (BMBF) and the health insurance funds (GKV) eventually aims at improving the situation of the patients.

The funding measure was initiated by the BMBF, the health ministry (BMG) and the GKV in 1999. BMBF and GKV contribute equally to the funding with 0,5 Mio. € each. The programme runs for 6 years, with three funding periods, each of which lasts for 2 years.

### **Hormone Replacement Therapy (HRT):**

In view of the potential risks for women in the menopause by taking oestrogen compounds (hormone replacement therapy), the program intends to promote research approaches that are of practical relevance to the affected women and assist them and their doctors in weighing the benefits and risks of using hormone replacement therapy. The studies (clinical, epidemiological) should deal (i) with questions relevant to clinical practice/ general patient care concerning the benefits and risks of hormone therapy, (ii) dealing with questions concerning the assessment of benefits and risks by doctors and patients if the project results can be expected to benefit patients and to contribute to transparency and greater certainty or (iii) focus on the connection between certain diseases, e.g. cancer, and the use of hormone products, taking into consideration the long periods of use of such therapy in Germany.

### **Competence Networks in Medicine**

The funding measure Competence Networks in Medicine aims to support innovative efficient research and its translation into patient care by means of networking. The tasks of disease-related Competence Networks in Medicine comprise:

#### *Research on diseases*

Interdisciplinary cooperation of basic scientists and clinicians within the Competence Networks is expected to enhance the development of new and efficient solutions to urgent questions of patient care.

### *Expert networking*

Researchers in the Competence Networks build up joint data and material banks and bring together disease-related study groups. This research infrastructure enables to tackle important clinical questions. Networking between research and health care improves the translation of research results into practice. For this purpose, reviews and guidelines are written, standards in diagnosis and therapy developed, and measures for quality assurance implemented. In the Competence Networks daily-routine practice relevant research questions are addressed.

### *Knowledge transfer*

The Competence Networks promote knowledge transfer among experts and provide information for patients, their relatives and the general public. The networks offer a wide range of information, from broad educational campaigns over newsletters and brochures to professional training for practitioners.

## **German National Genome Research Network (NGFN)**

The German National Genome Research Network NGFN aims at understanding the structure and function of the human genome and its contribution towards the development of diseases with the goal of utilizing this knowledge for the improvement of diagnosis and treatment as well as for the development of industrial products and services. Nine interdisciplinary "disease-oriented genome networks" focus on disease areas of major health policy importance: cancer, cardiovascular diseases, diseases of the nervous system, infection/inflammation, and diseases due to environmental factors. These interdisciplinary networks closely interact with twelve "systematic-methodological platforms", in which high-throughput methods are developed and applied towards the systematic analysis of the structure and function of the genome of man and of important model organisms.

As part of the over 320 subprojects of the entire NGFN, subprojects of relevance for AGEING are being funded.

## **Public Health Research**

The funding initiative "Public Health Research" on the one hand aimed at strengthening the structures of public health research at some universities in Germany and on the other hand aimed at promoting scientific projects to answer questions about etiology and avoidance of relevant diseases and health promoting as well as about the health care system itself. One focus of many others in the funding measure was the elderly and their health-related problems.

## **Health in Old Age**

Expert consultation has led to the identification of two major problems in regard to the ageing population and its health status:

- Co-morbidity and multi-morbidity, which increasingly occur in older people and are often associated with multi-medication, are a big challenge. A major deficit in research and treatment can still be noticed in this area.

- Preserving and increasing personal autonomy and health resources is among the major concerns of older people. Research is needed for developing efficient strategies to prevent the deterioration of older diseased patients' condition and to ensure that they receive effective support in coping with the physical and psychological implications of disease.

Furthermore, many diseases which mainly affect older people have their origins early in life. Studies on the interaction between people's behaviour and their health are therefore of special importance. The social context and individual behaviour not only influence the occurrence of certain diseases but also the way in which people handle chronic illness and are thus crucial for the disease burden.

In order to meet these challenges, BMBF now funds six networks (or consortia) on "Health in old age". These consortia are:

1. Co-morbidity and multi-morbidity in primary health care (Coordinator: Prof. van den Bussche, Hamburg)
2. LONGITUDINAL URBAN COHORT AGEING STUDY (*LUCAS*) - Hamburg: an interdisciplinary sequential research project in the German metropolitan region of Hamburg (Coordinator: Prof. von Renteln-Kruse, Hamburg)
3. Prerequisites for a new health care model for elderly people with multi-morbidity (*Priscus*, Coordinator: Prof. Trampisch, Bochum)
4. Autonomy despite Multimorbidity in Old Age (*AMA*) (Coordinator: Kuhlmei, Berlin)
5. *KORA-AGE*: Long-term determinants and consequences of multi-morbidity (Coordinator: Prof. Wichmann, Neuherberg)
6. Multi-morbidity and frailty at old age: epidemiology, biology, psychiatric co-morbidity, medical care and cost (*Esther-Net*, Coordinator: Prof. Brenner, Heidelberg)

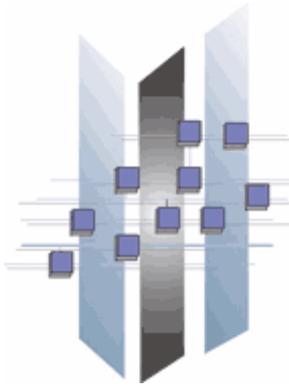
### **Involvement of Experts**

Funding of research initiated by the Federal ministry of Education and Research (BMBF) is organized in a top-down approach. The ministry, supported by a scientific expert group ("Wissenschaftlicher Ausschuss / WA"), identifies fields that need special support by a ministry's funding measure, either since they are underdeveloped in Germany or since they are a field of special strength which needs further support.

In its broadest sense, the "scientific expert group" (Wissenschaftlicher Ausschuss) is a steering committee of the health research programme. It is nominated by the Federal ministry of education and research (BMBF) and it consists of scientists in the health research field with international renown. It identifies key areas of research in the future and reviews research initiatives launched by the ministry. In addition, calls for applications have to pass this committee.

In addition, a second expert group advises the ministry on a much broader scale: the so-called "Gesundheitsforschungsrat, GFR" ("health research board") consists of high-ranked experts in the field, nominated by the minister, and sent via the organisations in this board, i.e. the large funding organisations as the DFG, the Max-Planck-Society, the Helmholtz-society, ministries and representatives from universities and the health sector.

## 2) Services for the 21<sup>st</sup> Century (Federal government: BMBF)



In all areas of the economy, services have been, and will continue to be, a key driver of economic growth and increased employment, both in Germany and in Europe as a whole. Even in times of slacker economic activity, services have invariably done better than conventional goods-producing industries. In terms of Germany's status as a place to live or to do business, services are a key component in any strategy designed to boost the country's global competitiveness. An especially important contribution is made by sophisticated, exportable services, which are also promising for the labour market policy.

In 1995, Germany's Federal Ministry of Education and Research (BMBF) responded to a perceived lack of service mentality among the country's businesses and research organizations by launching its Initiative on Services for the 21st Century, thus laying a vital foundation for the comprehensive development of services in Germany. The Initiative's key instrument involves promoting ideas, concepts, strategies and models designed to add the necessary new impetus to the successful, stable realization of the country's potential as a location both for living and for doing business, at the same time securing employment. The Initiative's overall objectives were:

- to support development of the service sector
- to encourage a more positive attitude towards research and development
- to provide incentives to private initiative
- to draw attention to the consequences for training and recognized qualifications and support appropriate
- implementation strategies, and
- to promote networking with other economic sectors of the economy.

Projects are supported within the following priority areas:

- Management approaches and methods in services (e.g. knowledge management, cooperation management and virtual enterprises, marketing, service engineering, benchmarking)
- growing branches of industry and business clusters (public services, health services, facility management, financial services, trade and craft)
- transfer and transversal project

Altogether projects for more than 4 Mio. € are financed in this programme.

## 3) Demographic Change (Federal government: BMBF)

The aim of the programme „Demographic change“ is to sustain or even improve the innovative power of ageing employees in enterprises.

To fulfil this aim ageing employees should no longer be seen alone, but together with their young and middle aged colleagues. It is important for an innovative enterprise to

reach synergies between the different degrees of innovation in aged, middle aged and young employees.

To reach that main goal since 1996 three phases of this research programme were launched: research (1996-1999), public relation (1999-2003) and implementation in enterprises (2002-2006), each was funded with concrete projects.

During the last 16 years around 16 Mio. € were spent in this programme.

Website: [www.demotrans.de](http://www.demotrans.de)

#### **4) Social-ecological Research (Federal government: BMBF)**

The programme “Social-ecological Research” uses a trans-disciplinary approach in order to solve crucial societal problems. The general aim is to contribute to the German Strategy for Sustainable Development. Trans-disciplinarity in this case means, that science crosses the borders of the scientific system and includes knowledge and visions of practitioners.

Since 2000 a number of topics were addressed by calls:

- Strategies for sustainable consumption
- Socio-ecological transformation in the supply and disposal systems
- Political strategies to cope with environmental problems - from local to global level
- Production of knowledge in space-related problem areas
- Strategies to cope with systemic risks

The programme’s perspective is a period of five more years.

There are a number of projects which address the problematic impacts of demographic change, mainly in the field of supply systems (e.g. water, food, and infrastructure). The aim of the projects is to create policy relevant knowledge for orientation and action in order to realise successful transformation strategies (successful in a sense of sustainable societal development).

The programme will run from 2000 to 2010, with a budget of up to 35 Mio. € until 2005.

#### **5) Microsystems (Federal government: BMBF)**

The BMBF supports the development of monitoring systems for the prevention and the diagnostic monitoring of cardiovascular patients. These systems are able to control e.g. blood pressure, pulse, heart rate or respiration round the clock. The patient has not to stay in hospital for that. Microsystems technology allows new methods for the long-time-monitoring of cardiovascular patients. Monitoring systems will be miniaturised so far, that they can be directly integrated in the everyday life of the patients. In a little while, diminutive sensors implanted in or fixed outside of the body will be able to detect e.g. hypertension or dysfunction of the cardiac rhythm. The sensors do not handicap the patient. Using a telemetric system, the data will be sent to the doctor - 24 hours a day and seven days a week (24/7 monitoring). Then the medic will be enabled to prepare pattern of the patient for the individual disease and he will also be informed within seconds, if the sickness deteriorates. The development of intra- and extracorporeal monitoring systems enabling individual long-time-monitoring for the optimal therapy at home or in the hospital is supported by the BMBF with 15 million

Euros. Research facilities and enterprises were invited to submit drafts for collaborative projects until February 11th, 2005.

The full titles of projects funded under the programme.

- Implantable Haemodynamic Sensor (HDS online)
- Intravascular Monitoring System for Hypertension (HYPER-IMS)
- Vital-Sensors Net for close meshed monitoring of patients with an acute cardiac risk (SOMATEK)
- Preventive Monitoring of cardiac disease (PRECARE)
- Continuous measuring and analysis system for vital parameters (KONMEVIT)
- Micro-Monitoring for observation of cardiac risk-patients with integrated defibrillation (M $\mu$ Guard)
- Context sensitive cardiac long term monitoring (CALM)
- Inner ear implemented monitoring system (IN-MONIT)
- Accompanying Scientific Project PMM

The website of the projects:

[http://www.mstonline.de/foerderung/projektliste/suche/search\\_results.html?searchableText=&anwd=&kuerzel=V3PMM&start\\_jahr=&jahr=&submit=suchen](http://www.mstonline.de/foerderung/projektliste/suche/search_results.html?searchableText=&anwd=&kuerzel=V3PMM&start_jahr=&jahr=&submit=suchen)

## **II.) Programmes by other Federal Ministries:**

### **1.) Federal Ministry of Health (BMG)**

The BMG has a central role in health policy in Germany since it is involved in legislation concerning the health system. In addition, BMG provides expertise for numerous health-related topics in ageing research.

Together with the BMBF, the BMG carries out the "health research programme".

The BMG is institutionally funding the "Robert Koch Institute" (RKI) in which, amongst others, epidemiological investigations and health surveys are carried out. Especially, this section of the RKI is responsible for providing the Federal Health reporting service.

Website:

[http://www.rki.de/cln\\_048/nn\\_217400/EN/Content/Health\\_Reporting/health\\_reporting\\_node.html?\\_nnn=true](http://www.rki.de/cln_048/nn_217400/EN/Content/Health_Reporting/health_reporting_node.html?_nnn=true)

### **2.) Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ)**

The BMFSFJ is institutionally funding the The German Centre of Gerontology ("Deutsches Zentrum für Alterfragen, DZA") in Berlin. This institute conducts scientific research and documentation in the fields of social gerontology and help for the aged. The bye-laws of the institute declare its purpose to "increase, collect, evaluate, proc-

ess and disseminate knowledge about the living arrangements of ageing and old people in order to use this knowledge for scientifically independent consultation in respect to the challenges of an ageing population for society and social policy." Among others, the DZA is involved in the German Ageing Survey which is a nationwide representative cross-sectional and longitudinal survey of the German population over 40 years.

Website: <http://www.dza.de/english/english.html>

Furthermore, the BMFSFJ directly supports research projects in the following fields:

- Dementia in old age
- Quality in Nursing Research
- Crime and Violence against elderly people

Website:

<http://www.bmfsfj.de/bmfsfj/generator/Kategorien/Forschungsnetz/forschungsvorhaben.html>

### **3.) Federal Ministry of Labour and Social Affairs (BMAS)**

AQUA – alternsgerechte Qualifizierung (age-suitable training) is a research and development project on new forms of self-directed learning and learning near the workplace for older (and younger) employees: The project aims at demonstrating how organisations can include older employees into further education and profit from their experiences to enhance their employability up to the age of 67.

But AQUA is not only geared to older employees. It also raises the awareness of companies towards an inclusive personnel management.

Overall, funding will be up to 1,1 Mio. € between 2005 and 2007.

Decision making process: EQUAL in Germany has a so-called "Begleitausschuss" (advisory board) to form the political aims and to decide which project to be funded.

<http://www.equal.de/Equal/Navigation/Programm/foerderphasen.html>

Website: [www.aqua-nordbayern.de](http://www.aqua-nordbayern.de)

### **III.) "Deutsche Forschungsgemeinschaft" (German Research Foundation; DFG):**

The "Deutsche Forschungsgemeinschaft, DFG" mainly supports basic research. Funding tools comprise, among others, the Research Grants Programme ("Normalverfahren"), Clinical Research Groups ("Klinische Forschergruppen") and Collaborative Research Centers ("Sonderforschungsbereiche").

## 1.) Research Grant Programme

The Research grants programme ("Normalverfahren") is based on the bottom-up principle, i.e. scientists can apply for research grants at any time in any given field of basic research. An openly accessible data bank in the internet contains all current research projects funded under the umbrella of the research grant programme.

<http://www.dfg.de/gepris/>

Therein, research projects dealing with many aspects of ageing can be found. The programme is open for qualified researchers (as a rule, those holding a doctorate) from all disciplines working at German research institutions. Researchers working at institutions which serve purely commercial purposes or those who are not permitted to publish findings in a generally accessible form are not eligible to apply.

Website:

[http://www.dfg.de/en/research\\_funding/individual\\_grants\\_programme/research\\_grants/index.html](http://www.dfg.de/en/research_funding/individual_grants_programme/research_grants/index.html)

## 2.) Clinical Research Groups

### **Molecular Pathology of Alzheimer Disease (Clinical Research Group; FOR 267)**

Alzheimer disease (AD) is the cause of 60-75% of dementia cases in the elderly. Our knowledge about the molecular processes involved in the etiopathogenesis of AD is limited. Neither a specific nor otherwise highly efficient treatment of AD is currently available. The scientific work performed by the AD research unit Hamburg (ADRGH) aims at a better understanding of the etiology of AD, and the development of strategies both for its prevention and therapy in the future. The ADRGH consists of five groups working in clinical and basic science and collaborating very closely with each other. The projects are: (1) analysis of DNA polymorphisms in candidate genes for non-familial, sporadic AD, (2) development of a central repository for tissue, cerebrospinal fluid, and DNA samples, (3) development of a database for clinical assessment, (4) search for biological markers suitable for specific diagnosis and monitoring the clinical course of the disease, (5) molecular genetics of AD, (6) biochemical and cell biological investigations on tau protein in AD and in vitro, (7) role of apolipoprotein E, lipids, and lipid peroxidation in AD pathogenesis. One of the primary goals of the research work performed is the analysis of correlation between clinical phenotype and biological markers determined by the respective groups. Molecular genetic, cell biological, and biochemical studies are carried out on DNA and tissue samples collected by the central repository and on experimental models of processes involved in neurodegeneration (e.g. protein aggregation or oxidation) in cell cultures and transgenic animals. The scientific work may result in an improved specificity of our present diagnostic tools or provide us with new tools suitable for specific diagnoses or for monitoring of established and novel therapies. Novel therapeutic approaches will also be assessed in Hamburg. The continuation of the series of scientific symposia in Hamburg (organized since 1999), and the great number of research papers published will promote national and international scientific communication. Local activities, i.e. the memory clinics and the genetic counseling unit, make an important contribution to patient and family care and should significantly improve public awareness of AD.

### **3.) Collaborative Research Centers**

#### **Molecular mechanisms of neurodegeneration (SFB 596)**

13 groups are involved in research on neurodegenerative diseases such as Alzheimer's, Parkinson's, Huntington, and prion diseases at the University of Munich, the Max-Planck Institute for Biochemistry, and the Max-Planck-Institute for Psychiatry. All projects focus on molecular mechanisms of human neurodegenerative disorders using tissue culture systems or animal models such as transgenic mice, zebra fish, and *Caenorhabditis elegans*.

#### **Cardiac Failure in the Elderly: cellular mechanisms and therapeutical targets (SFB 598)**

Cardiac failure is not a monocausal disease but a syndrome starting from different etiologies. Complex cellular, neurohumoral and hemodynamic interactions of the cardiomyocytes with the whole organism result in a progression of the syndrome. Finally, cardiac failure can lead to death due to progressive pump failure or due to fatal ventricular arrhythmias. The presently available therapies can slow down this development but they do not prevent it. As a result, more than 30% of the population above 65 years is living with cardiac failure of variable severity. This number and its fiscal burden will increase with the increasing age of the society. The mechanisms that drive the aged heart into failure, not clear at present, shall be analysed in our project grant. We hypothesise that cardiac ageing starts with the death of individual myocytes, caused by mutations of mitochondrial genes and by the effect of reactive oxygen species that damage DNA in mitochondria and nucleus as well as proteins in the cell and the extra cellular matrix. We will study how the reduced population of cardiomyocytes can adapt to this situation by expressing hypertrophy-associated genes, on expense of their phenotype plasticity. We will study how sustained mechanical or metabolic stress, exceeding the limits of the reduced adaptability, induces individual myocytes to fail and to die. The myocyte population is further reduced, the ventricular wall thins, dilates and secretes neurohormones into the blood that modulate heart and body similarly to an inflammatory syndrome. We shall analyse these signals. If the cardiac function cannot adequately be maintained inspite of these reactions, the heart will fail, either during exertion or even at rest. We try to interfere with the development of failure by reactivating mitotic signals in the non-dividing adult cardiomyocytes, recovering the number of contractile cardiomyocytes or regenerating destroyed ventricular tissue. The results of our basic research shall be transferred into relevance for the aged population. To this end, cardiac phenotype and function of a representative sample of 1750 male and female volunteers (age between 45 and 80 years) will be characterised with focus on the heart rate variability. This parameter, easily measurable from ECG, shall be established as a marker for early diagnosis of the developing cardiac failure, useful for the management of the elderly with regard to prevention and therapy of heart failure

#### **Cellular mechanisms of Alzheimer's disease (SPP 1085)**

Alzheimer's disease (AD) is characterized by the invariable accumulation of senile plaques, neurofibrillary tangles, and inflammatory processes. These pathological events are involved in the fatal neuronal cell loss observed in the brains of the patients. At least five gene products ( $\beta$ -amyloid precursor protein, tau, Presenilin-1, Presenilin-2, and apoE) play a pivotal role in the pathogenesis of AD. It appears that

miss-sorting and/or miss-function of these proteins is directly involved in amyloid plaque formation as well as the accumulation of neurofibrillary tangles. Therefore a detailed understanding of the cell biology of these proteins and their cellular function will pave the way to understanding the pathological mechanisms causing AD. This may also help to identify novel targets for therapeutic treatment. This program is therefore aimed to combine the efforts in cell biology and AD research and to provide a network within these two disciplines.

### **Age-related macular degeneration (SPP 1088)**

Age-related macular degeneration (ARMD) has become the most common cause for legal blindness in industrialized countries. In advanced stages of the disease affected patients lose their ability to read and to perform tasks of daily life. So far no efficient means for treatment have been developed, and, therefore, the outlook for the majority of patient is dismal. Furthermore, the pathogenesis is incompletely understood. ARMD is a complex, multi-factorial disease a better understanding of which can only be achieved by cooperation of several disciplines and institutions to include basic scientists and clinicians. The majority of the potential participants of the DFG-ARMD research program have already contributed to the understanding of retinal diseases in cooperation with international groups. Their research activities shall now focus on the most common retinal disease, which cannot be cured to date. The goal is to identify molecular and cell biological mechanisms that are responsible for the disease process and to develop efficient new treatment strategies. The aim of the research field genetics is to identify ARMD-associated genes and to analyze those in animal models. This shall be achieved by genomewide search using DNA from affected siblings (sib-pair-analysis) as well by isolating retina specific genes. Epidemiological investigations shall reveal not only genetic but also environmental and medical factors that contribute to the pathogenesis of ARMD. Within project area cell and molecular biology molecular mechanism of the pathogenesis of the disease in the outer retina shall be determined. Hereby age-related alterations of the retinal pigment epithelium as well as interactions between nerve and glial cells of the retina will be studied. Furthermore mechanisms responsible for the two pathogenetic final pathways of the advanced disease process, i.e. choroidal neovascularization as well as geographic atrophy of the RPE will be examined. Project area functional tests include further and new developments for macular function testing and complex visual performances, which will also be helpful for analyzing and characterizing future animal models as well as for evaluation of therapeutic interventions. Furthermore, novel imaging techniques should be applied to assess metabolic changes in the RPE associated with the disease process. The project area experimental therapy aims at developing new treatment modalities both in animal models as well as in humans.

## **IV.) Max-Planck-Society (MPG)**

The research institutes of the Max Planck Society perform basic research in the interest of the general public in the natural sciences, life sciences, social sciences, and the humanities. In particular, the Max Planck Society takes up new and innovative research areas that German universities are not in a position to accommodate or deal with adequately. These interdisciplinary research areas often do not fit into the university organization, or they require more funds for personnel and equipment than

those available at universities. The variety of topics in the natural sciences and the humanities at Max Planck Institutes complement the work done at universities and other research facilities in important research fields. In certain areas, the institutes occupy key positions, while other institutes complement ongoing research. Moreover, some institutes perform service functions for research performed at universities by providing equipment and facilities to a wide range of scientists, such as telescopes, large-scale equipment, specialized libraries, and documentary resources.

Website: <http://www.mpg.de/>

### **Max Planck Institute for Demographic Research**

In 1995, the Max Planck Society decided to establish the Max Planck Institute for Demographic Research with the intention to provide demography in Germany with new impulses and to strengthen its ties to international research. Moreover, the population developments in Germany of the last decades seemed to suggest that scientific work in this field has become imperative. The Max Planck Institute for Demographic Research is one of the first Institutes established by the Max Planck Society in the newly-formed German states. It began its activities in Rostock on October 1, 1996. Professor James W. Vaupel is the Founding Director and current Executive Director of the Institute. Preceding his appointment to the Institute, he held a professorship of demography and epidemiology at the University of Odense in Denmark. In 1999, Professor Jan M. Hoem was appointed second Director by the Max Planck Society. Previously, he headed the Demographic Unit at Stockholm University, the former which he founded in 1981.

The Institute analyses the statistical trends of average longevity as well as the factors conducive to achieving very advanced ages whilst enjoying relatively good health. It produces forecasts on the future living conditions of people at various ages living under the conditions of demographic change in Europe. It deals with the causes of fertility decline in Europe and investigates the impact of political, economic, and cultural conditions on the development of fertility and changes in union and family behavior. Furthermore, the Institute provides international demographic research with a variety of resources (in particular, data collections that have been processed scientifically) and develops innovative statistical methods and models for the analysis of individual behavioral patterns and demographic developments. The research agenda of the Institute is not limited to classical demography, however, as it has established and continues to build up three new areas of key research: Biodemography, which focuses on the genetic, medical, and biological aspects of aging (the latter aspect from an evolutionary perspective); Generations and Gender, a program that looks at the demographic consequences of institutional, political, and economic change in Europe; and finally, Transnationality and Family Formation. This project analyses the relationship between legal provision, migration, and behavior related to fertility and family. The Institute thus is developing new innovative areas of key research.

### **Max Planck International Research Network on the Behavioural and Social Sciences of Aging (Maxnet Aging)**

This Network was established in the fall of 2004 based on deliberations in the Max Planck Presidential Committee on Aging. The substantive task of the Network is to focus on the behavioural and social sciences of aging, broadly defined, with topical emphases reflected in such fields as cognitive and social neuroscience, demography,

psychology, law, history of science, cultural studies, sociology, economics, and the humanities. The initial time window for this Network is five years (2005-2009).

Maxnet Aging is conceived (i) as a forum in which cross-disciplinary communication and cooperation in the study of aging is nurtured within the Human Sciences Section of the Max Planck Society and (ii) as a platform for international collaboration.

The Network consists of a core permanent group of Senior and Junior Fellows. Junior Fellows have access to research initiation funds. In addition, Network Affiliates and Observers are invited to specific activities to ensure the infusion of new ideas, emphases, and methods. The main office is located at the Max Planck Institute for Human Development in Berlin.

## **V.) Leibniz-Gemeinschaft (Leibniz-Society)**

### **Leibniz Institute for Age Research / Fritz Lipmann Institute (FLI)**

The research institute focuses on biological and biomedical research on molecular mechanisms of selected age-related diseases and of senescence. The scientific research groups at FLI cover a broad expertise in molecular and cellular biology, structural biology, bioinformatics, biophysics, biochemistry, genomics and animal research. The combined scientific expertise of our groups, in cooperation with academic and industry partners, allows addressing the question of ageing and disease mechanisms on molecular, cellular and organismic levels. In addition to basic research, attention is also directed towards knowledge transfer to medical application, to prevention and therapy

Website: <http://www.fli-leibniz.de/>

## **VI.) Helmholtz Association**

With its 15 research centres and annual budget of approx 2.3 billion euros the Helmholtz Association is Germany's largest research institution. The 25,700 employees produce top-rate scientific results in six research fields. The Helmholtz Association identifies and takes on the grand challenges of society, science and the economy, in particular through the investigation of highly complex systems.

### **Function and Dysfunction of the Nervous System**

Older people are more likely to suffer from neurological and psychiatric illnesses. Helmholtz researchers working in the interdisciplinary programme "Function and Dysfunction of the Nervous System" aim to improve the knowledge of the causes of such illnesses and to develop new diagnostic and therapeutic procedures.

The programme focuses on areas such as

- Signalling Pathways in the Nervous System
- Imaging the Living Brain
- Pathophysiological Mechanisms of Neurological and Psychiatric Disorders

The research begins at the level of individual molecules and cells and extends all the way through to complex neural systems.

Website:

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

## **VII.) Volkswagen-Foundation**

### **Individual and Societal Perspectives of Aging**

In January 2007, the Volkswagen Foundation had published a public announcement of its programme "Individual and Societal Perspectives of Aging".

The following elements are eligible for funding within this thematic scope, either separately or in conjunction with one another:

- Research projects can be supported with personnel as well as non-personnel funding. Funds can also be provided for junior scholars and for cooperation partners located out of Germany. Professors in Germany who contribute substantially to a project funded within this initiative may apply for a six to twenty-four months research sabbatical ("research professorship").
- Workshops and summer schools for limited numbers of participants (max. 60) may also take place outside of Germany.

In the first round of this call for proposals, special attention will be paid to projects which

- integrate questions raised in different thematic areas
- focus on middle age and "early old age"
- make use of the possibilities offered by secondary and meta-analyses as well as
- clarify the ethical and methodical prerequisites for the participation of seniors in the research process.

The central disciplines from which applications should be drawn are psychology, sociology and economics. Participation from the fields of philosophy, politics and law, medicine, the health and nursing sciences may also be considered. It is expected that project teams and groups of participants may involve different approaches and disciplines. An international participation in the research process is welcome. Equally desirable is a participation on the part of representatives of relevant fields of practice and "persons concerned", i. e. independent (non-organized) members of the middle and older generation.

Website:

<http://www.volkswagenstiftung.de/foerderung/gesellschaft-und-kultur/zukunftsfragen.html?L=1>

## **VIII.) Robert-Bosch Foundation**

The Robert Bosch Stiftung promotes research at its own research institutes, focusing on a few fields such as clinical pharmacology and the history of medicine. These fields were suggested by Robert Bosch and his family.

In addition, the foundation supports programs in select fields that show great promise but have not yet gained a foothold in Germany. Such fields include geriatrics, methods of researching the efficacy of complementary medicine, and the sustainable use of natural resources. So far 6.56 million euros have been made available for those research programs.

## **Research and Study Program on Geriatrics**

The Robert-Bosch Foundation began the Research and Study Program on Geriatrics in 2002 with the aim of establishing geriatrics as an independent field in academic research and education. Its intention is to recruit young scientists for the field of geriatrics and to train them for future leadership positions both in research and in patient care. Cooperation with seven clinical geriatric centres in Germany and Switzerland creates a comprehensive training program, comprising all vital aspects of geriatrics and the basics of clinical study methodology. Each year, five to ten young doctors are accepted into the program, where they conduct research on a geriatric topic and take part in a training program for one to two years.

Website:

[www.forschungskolleg-geriatrie.de](http://www.forschungskolleg-geriatrie.de)

# Attachment 1: National Forum on Ageing Research in Germany

## Expert Meeting: „Health in Ageing“

### Agenda

12th April 2006

Federal Ministry of Education and Research (BMBF)

Hannoversche Str. 28-30, 10115 Berlin

Im Gartenhaus, Großer Saal

10:45-11:15

**Welcome and Round of Introduction**

11:15-12:45

**(1) Expert Statements and Round of Discussion**

- Biology of Ageing (Prof. Förstl, Prof. Kolb)
- Epidemiology of „Health in Ageing“ (Prof. Weyerer)
- Disease Related Research (Prof. Gerlach, Prof. Pientka)
- Effectiveness, Effectivity and Safety of Medical Treatment in Old Age (Prof. Riedel-Heller, Prof. Wehling)
- *Discussion and Summary*

12:45-13:15

**Lunch**

13:15-14:45

**(2) Expert Statements and Round of Discussion**

- Autonomy in Old Age (Prof. Brennecke, Prof. Koch)
- Prevention Research and Healthy Ageing (Prof. Steinhagen-Thiessen, Prof. Kruse)
- Nursing Research of the Elderly (Prof. Kuhlmeier, Prof. Schaeffer)
- Social Sciences and „Health in Ageing“ (Prof. Tesch-Roemer, Prof. Wahl)
- *Discussion and Summary*

14:45-15:00

**Coffee Break**

15:00- ca. 16:00

**Final Summary and Suggestions**

## **Participants:**

### **a. Scientific Experts**

Prof. Dr.	Brennecke	Zentrum für Human- und Gesundheitswissenschaften (ZHGB) Charité Berlin, Institut für Gesundheitssystemforschung
Prof. Dr.	Förstl	Klinikum rechts der Isar der TUM, Klinik und Poliklinik für Psychiatrie und Psychotherapie, München
Prof. Dr.	Gerlach	Klinikum der Universität Frankfurt, Zentrum für Gesundheitswissenschaften, Institut für Allgemeinmedizin
Prof. Dr. Dr.	Koch	Universitätsklinikum Hamburg-Eppendorf, Institut und Poliklinik für Medizinische Psychologie
Prof. Dr.	Kolb	St. Bonifatius Hospital, Innere Medizin, Fachbereich Geriatrie, Lingen
Prof. Dr.	Kruse	Institut für Gerontologie an der Universität Heidelberg
Prof. Dr.	Kuhlmeiy	Instituts für Medizinische Soziologie im Zentrum für Human- und Gesundheitswissenschaften (ZHGB), Charité Berlin
Prof. Dr.	Pientka	Medizinisch-Geriatriische Klinik, Universitätsklinik der Ruhr-Universität Bochum, Marienhospital Herne
Prof. Dr.	Riedel-Heller	Klinik und Poliklinik für Psychiatrie, Bereich Public Health, Leipzig
Prof. Dr.	Schaeffer	Institut für Pflegewissenschaft an der Universität Bielefeld
Prof. Dr.	Steinhagen-Thiessen	Evangelisches Geriatriezentrum (EGZB), Berlin
Prof. Dr.	Tesch-Römer	Deutsches Zentrum für Altersfragen (DZA), Berlin
Prof. Dr.	Wehling	AstraZeneca R&D, Director of Discovery, Medicine/Experimental Medicine; Psychogeriatric Research Unit, Mölndal, Schweden
Prof. Dr.	Weyerer	Zentralinstitut für seelische Gesundheit; Arbeitsgruppe Psychogeriatric; Mannheim
Prof. Dr.	Wahl	Fakultät für Verhaltens- und Empirische Kulturwissenschaften, Psychologisches Institut, Heidelberg

### **b. Representatives of Federal Ministries**

Dr.	Hausdorf	Bundesministerium für Bildung und Forschung (BMBF), Ref. Gesundheitsforschung, Berlin
Dr.	Wetterauer	Bundesministerium für Bildung und Forschung (BMBF), Ref. Gesundheitsforschung, Berlin
Dr.	Müller-List	Bundesministerium für Familie, Senioren, Frauen und Jugend (BMFSFJ), Ref. „Grundsatz- und internationale Angelegenheiten, Altersforschung“, Berlin
	Hollitzer	Bundesministerium für Gesundheit (BMG), Ref. 3 GP 3, Frauen und Gesundheit, Bonn

### **c. Representative of the „German Research Foundation“ (DFG)**

Dr.	Lohwasser	Deutsche Forschungsgemeinschaft (DFG), Bonn
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### **d. Representative of the Project Management Organisation of the BMBF**

Dr. Dr.	Hauer	Projektträger des BMBF im DLR, Bonn
Dr.	Ballensiefen	Projektträger des BMBF im DLR, Bonn
Dr.	Barth	Projektträger des BMBF im DLR, Bonn

## **2. Expert Statements to Topics**

The focus of the expert meeting “ageing research” was on health research topics. Nevertheless, even in this field, ageing research is highly complex since different disciplines are involved, ranging from the investigation of the biological basis of the ageing process in general and diseases in old age, up to the transfer of the knowledge in the health research system.

Taken all statements together, ageing research in general as well as with regard to special health research topics, requires an inter- or multidisciplinary disciplinary approach. It has turned out during the discussion of the special topics (1-8, below), that there are two interdisciplinary themes which should be in the main focus of ageing research in the field of health research: (a) Multi-morbidity in old age and (b) Strengthening health resources and autonomy in old age. Centred on these two themes, the following topics were discussed in detail:

### **1. Biology of Ageing**

Important research questions are, for example, the identification of molecular markers which are of prognostic value with regard to the onset of a disease, e.g. cancer, cardiovascular diseases or dementia.

### **2. Epidemiology of „Health in Ageing“**

One of the biggest problems in this field is the absence of the very old aged in epidemiological investigations, since this group is very often excluded from these studies due to methodological problems. Therefore, in Germany only few well coordinated initiatives of age-related diseases exist. Furthermore, the already existing cross-section studies are used only rarely. It is suggested to use these cross sectional studies and develop longitudinal studies from it.

### **3. Disease Related Research**

One of the central challenges of disease related research in old age involves co- and multi-morbidity in old age. Studies in this field are done only rarely, so far. In addition, clinical research in old patients has to develop approaches across diseases, which especially highlights the need for an interdisciplinary approach of “health in ageing”.

The most urgent needs in the view of the health care system is on the implementation of already known therapies or therapeutical concepts in the treatment of patients. This view holds for the large disease entities such as cardiovascular diseases, chronic diseases, psychosociological aspects of ageing, but also co- and multi-morbidity.

### **4. Effectiveness, Effectivity and Safety of Medical Treatment in Old Age**

As noted above, old or very old patients are only rarely included in clinical studies. This affects the up-to date knowledge on efficacy and effectiveness of medical therapies in these age groups. As the demand for adequate medical treatment in this group is increasingly evident, the need for proper pharmacoepidemiological studies and primary studies on intervention is rising as well.

### **5. Autonomy in Old Age (Rehabilitation research)**

Rehabilitation research in old age is a field of deficit in Germany, both in the clinic as well as in the outpatient sector of the health care system. Above all, the primary goals of rehabilitation in elderly patients should be the avoidance of progression of a disease and the maladjustment of a rehabilitative measure. The autonomy of the patient during this process should be a primary focus of all interventions (rehabilitation before nursing).

Important aspects for rehabilitation research include rehabilitation and multi-morbidity or the scientific evidence of a rehabilitation measure,

## **6. Prevention Research and Healthy Ageing**

Due to multi-morbidity in many elderly patients, preventive approaches have to include aspects of primary, secondary and tertiary prevention. The ultimate aim should be the complete prevention or at least the retardation of a situation where a patient needs permanent care. The topics “prevention”, “rehabilitation” and “nursing” are not separable in this context.

It is necessary to conduct intervention studies to answer questions concerning the progression of a chronic disease or the psychological variables influencing the coping with a chronic disease.

## **7. Nursing Research of the Elderly**

One of the most important aims in this context is the maintenance of independence in old age. Research questions have to deal, for example, with the early detection of a chronic disease which may lead to a situation where the patient needs care or the strengthening of the personal responsibility of a patient. In addition, nursing research has to focus on the social and familial context of a patient, e.g. by investigating the dependence on nursing relatives and their psychological coping strategies.

## **8. Social Sciences and „Health in Ageing“**

The social and behavioural sciences see an integrative function in the field of health research. Social circumstances in old ageing, heterogeneity among the elderly population, gender aspects and social inequality are all too often underestimated. In addition, aging by itself is very often considered as a mere risk, and not as a chance. One perspective to overcome this negative image of aging might be the development of the “compression of morbidity” from the perspective of potential in old age. In line with this, the investigation of determinants for healthy ageing and their interaction with physical, mental or social resources could be a future research focus.

## Attachment 2: Centers for Ageing Research in Germany

In addition to the survey on national programmes on ageing research, a survey on institutes or centers for ageing research in Germany has been carried out. The

Institute	Field of Expertise
<p>Europäische Senioren-Akademie Rathausplatz 2 48683 Ahaus</p> <p>Tel. 02561/ 42 09 70 Fax: 02561/ 42 09 79 Link: <a href="http://www.europaeische-senioren-akademie.de/werwirsind.php">http://www.europaeische-senioren-akademie.de/werwirsind.php</a></p>	<p>Health Care for the Elderly</p>
<p>Geriatrisches Zentrum Ulm / Alb-Donau Zollernring 26 89073 Ulm</p> <p>Telefon: 0731/187-191 Fax: 0731/187-390 E-Mail: <a href="mailto:Geriatrisches_Zentrum@bethesda-ulm.de">Geriatrisches Zentrum</a> <a href="http://www.bethesda-ulm.de/seite.php?ID=122">http://www.bethesda-ulm.de/seite.php?ID=122</a></p>	<p>Geriatrics</p>
<p>Deutsches Zentrum für Altersfragen Manfred-von-Richthofenstr. 2 12101 Berlin</p> <p>Telefon: (+49) (030) 26 07 40 0 Telefax: (+49) (030) 78 54 35 0 Link: <a href="http://www.dza.de/homes/kontakt.html">http://www.dza.de/homes/kontakt.html</a></p>	<p>Social Policy</p>
<p>Evangelisches Geriatriezentrum Berlin Reinickendorfer Straße 61 13347 Berlin</p> <p>Tel.: 030 / 4594 1000 Fax.: 030/ 4594 1938 <a href="http://www.egzb.de/">http://www.egzb.de/</a></p>	<p>Health Care and research</p>
<p>Forschungsgesellschaft für Gerontologie e.V. Institut für Gerontologie an der Universität Dortmund Evinger Platz 13 44339 Dortmund</p> <p>Tel: 0231 / 728488-0 Fax: 0231 / 728488-55 <a href="mailto:ffg@pop.uni-dortmund.de">ffg@pop.uni-dortmund.de</a></p>	<p>Health Care and research</p>
<p>Forschungsgruppe Altern und Lebenslauf (FALL) Freie Universität Berlin Institut für Soziologie Garystr. 55 D-14195 Berlin Tel.: +49 30 838 576 51 Fax: +49 30 838 576 52 Link: <a href="http://www.fall-berlin.de">http://www.fall-berlin.de</a> E-mail: <a href="mailto:fallsekr@fall-berlin.de">fallsekr@fall-berlin.de</a></p>	<p>Social Research</p>

<p>Geriatrische Kliniken Wuppertal  Postanschrift  Herrn Prof.Dr.med.Ingo Füsgen  c/o Geriatrische Kliniken Wuppertal  III. Med.Klinik der Kliniken St.Antoni  Lehrstuhl für Geriatrie  Carnaper Str. 60  42283 Wuppertal  Telefon: 0202/2994500  Email: <a href="mailto:prof.fuesgen@antonius.de">prof.fuesgen@antonius.de</a></p>	<p>Geriatrics</p>
<p>Geriatrisches Zentrum Berlin-Buch  Chefarzt PD Dr. Christian Zippel  Postanschrift  Herrn PD Dr. Christian Zippel  Geriatrie Zentrum Berlin-Buch  Klinik f. Geriatrie u. Rehabilitation  Zepernicker Str. 1  13125 Berlin-Buch  Telefon: 030/94 01 26 30  FAX: 030/94 01 26 44</p>	<p>Geriatrics</p>

<p>Institut für Medizinische Soziologie  Mitglied des DZA e.V. Prof.Dr. Adelheid Kuhlmei  Internet: ► <a href="http://www.fu-berlin.de/medsoz/Kuhlmei/kuhlmei.html">www.fu-berlin.de/medsoz/Kuhlmei/kuhlmei.html</a>  Postanschrift  Frau Prof.Dr. Adelheid Kuhlmei  Institut für Medizinische Soziologie  Zentrum für Human- und  Gesundheitswissenschaften Berlin  Thielallee 47  14195 Berlin  Telefon: 030/84 45 13 91  FAX: 030/84 45 13 92  Email: <a href="mailto:medsoz@zedat.fu-berlin.de">medsoz@zedat.fu-berlin.de</a></p>	<p>Medical Sociology</p>
<p>Institut für Pflegewissenschaft  Universität Witten/Herdecke  Internet: ► <a href="http://www.uni-wh.de/pflege">www.uni-wh.de/pflege</a>  Postanschrift  Institut für Pflegewissenschaft  Universität Witten/Herdecke  Fakultät für Medizin  Stockumer Str. 12  58453 Witten  Telefon: 02302/669-358  FAX: 02302/669-318  Email: <a href="mailto:pflegewissenschaft@uni-wh.de">pflegewissenschaft@uni-wh.de</a></p>	<p>Nursing Research</p>
<p>Kompetenz-Centrum Geriatrie  Internet: ► <a href="http://www.kcgeriatrie.de">www.kcgeriatrie.de</a>  Postanschrift  Kompetenz-Centrum Geriatrie  c/o MDK Hamburg  Postfach 26 1621  20506 Hamburg  Telefon: 040/25169-491  FAX: 040/25169-499  Email: <a href="mailto:info@kcgeriatrie.de">info@kcgeriatrie.de</a></p>	<p>Geriatrics</p>
<p>Max-Planck-Institut für Bildungsforschung  Forschungsbereich Entwicklungspsychologie  Internet: ► <a href="http://www.mpib-berlin.mpg.de/de/forschung/lip/index.htm">http://www.mpib-berlin.mpg.de/de/forschung/lip/index.htm</a>  Postanschrift  Max-Planck-Institut f.Bildungsforschung  Forschungsb. Entwicklungspsychologie  Lentzeallee 94  14195 Berlin  Telefon: 030/82 40 62 56  FAX: 030/ 8 24 99 39  Email: <a href="mailto:sekbaltes@mpib-berlin.mpg.de">sekbaltes@mpib-berlin.mpg.de</a></p>	<p>Cross-sectional</p>
<p>Max-Planck-Institut für demografische Forschung  Internet: ► <a href="http://www.demogr.mpg.de/">http://www.demogr.mpg.de/</a>  Postanschrift  Max-Planck-Institut  für demografische Forschung  Konrad-Zuse-Str.1  18057 Rostock  Telefon: 0381/2081 - 0  FAX: 0381/2081 - 202  Email: <a href="mailto:info@demogr.mpg.de">info@demogr.mpg.de</a></p>	<p>Demography</p>
<p>Universität Bielefeld  Institut für Pflegewissenschaften  Internet: ► <a href="http://www.uni-bielefeld.de/IPW/">www.uni-bielefeld.de/IPW/</a>  Postanschrift</p>	<p>Nursing Research</p>

<p>Frau Dr. Doris Schaeffer          Universität Bielefeld          Fakultät für Gesundheitswissenschaften          Institut für Pflegewissenschaften          Universitätsstr. 25          33615 Bielefeld          Telefon: 0521/106 38 95          FAX: 0521/106 64 37          Email: ipw@uni-bielefeld.de</p>	
<p>Zentralinstitut für seelische Gesundheit          Internet: ► <a href="http://www.zi-mannheim.de">www.zi-mannheim.de</a>          Postanschrift          Zentralinstitut für seelische Gesundheit          Abteilung Gerontopsychiatrie          Herrn Prof.Dr.Lutz Frölich          J 5          61159 Mannheim          Telefon: 0621/170 3-0          FAX: 0621/234 29          Email: froelich@zi-mannheim.de</p>	<p>Neuro / Psychology</p>
<p>Geriatrische Kliniken Wuppertal          Postanschrift          Herrn Prof.Dr.med.Ingo Füsgen          c/o Geriatrische Kliniken Wuppertal          III. Med.Klinik der Kliniken St.Antoni          Lehrstuhl für Geriatrie          Carnaper Str. 60          42283 Wuppertal          Telefon: 0202/2994500          Email: prof.fuesgen@antonius.de</p>	<p>Geriatrics</p>
<p>Geriatrisches Zentrum Berlin-Buch          Chefarzt PD Dr. Christian Zippel          Postanschrift          Herrn PD Dr. Christian Zippel          Geriatrie Zentrum Berlin-Buch          Klinik f. Geriatrie u. Rehabilitation          Zepernicker Str. 1          13125 Berlin-Buch          Telefon: 030/94 01 26 30          FAX: 030/94 01 26 44</p>	<p>Geriatrics</p>

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