POLICY
International Longevity Centre the Netherlands (ILC-NL) is an independent movement with the goal to let people think about healthy and active ageing, with a greater freedom of choice and self-reliance. The benefits of vitality amongst older people should be encouraged while vulnerability and dependence be postponed for as long as possible.

PARTNERS
ILC-NL is a member of ILC Global Alliance, an international federation of centres for active and healthy aging. ILC-NL is represented by Leyden Academy on Vitality and Ageing, and closely collaborates with Vereniging Aegon, Jo Visser foundation and Leiden University Medical Centre (LUMC).

Leyden Academy on Vitality and Ageing
Leyden Academy is a research institute whose mission is to co-create knowledge about ageing and vitality with older people and other relevant stakeholders, and making it accessible to policymakers, healthcare providers and the public to improve the quality of life of older people. Core research themes include vitality, meaning-in-life and social belonging.

Vereniging Aegon
Vereniging Aegon is shareholder of Aegon N.V. and represents its interests as well as that of associated companies, insured persons, employees, and other shareholders and partners. Vereniging Aegon contributes to the well-being and vitality of older people. Since 2007 it supports Leyden Academy.

Jo Visser foundation
This foundation is committed to dignified care for vulnerable older people who are permanently dependent upon care. Values such as belonging, solidarity, intergenerational encounters and community building play a leading role.

LUMC
LUMC is a leading university medical centre for research, education, and patient care with a strong scientific orientation. The master’s programme Vitality & Ageing, developed by Leyden Academy, is part of their education program.

ACTIVITIES
ILC-NL, together with Leyden Academy, is involved in several research projects and activities in the field of care, welfare, employment, and participation, such as:

Democratic Care in Nursing Homes
In a transition from paternalistic to democratic care, Dutch nursing homes are expected to concentrate on the well-being of their residents and to align care with residents’ significant others. Although this way of working is affirmed in nursing home policies, care staff experiences difficulties with providing democratic care in practice. In co-creation with care staff (n = 110) throughout 11 nursing homes in the Netherlands, we therefore developed the enjoying life approach values the participation of all people involved in the care process and strives for person-centered care by learning from each other through sharing narratives and building personal relationships. This is in line with democratic care’s notion that good care starts in the lifeworld of care receivers and is the result of an intersubjective dialogue between care receivers and their caregivers. In this chapter we
present our learning experiences with the enjoying life project and discuss implications for the democratic potential of organizations. We show that the participation of residents and significant others within the care process can lead to a mutual understanding of what is deemed “good” in a specific situation. However, this requires the cultivation of an organization culture wherein different and sometimes conflicting perspectives on what good care entails are acknowledged and a space is created to engage in dialogues about good care. This is an abstract of chapter 3 by Marleen Dohmen, Josanne Huijg, Susan Woelders, and Tineke Abma, which was published in the book ‘Institutions and Organizations as Learning Environments for Participation and Democracy’, University of Innsbruck, Springer, January 2023.

The perspective of older persons on the COVID-19 measurements in the Netherlands

The governmental COVID-19 policies worldwide reflect the national levels of economic and political development, and the cultural contexts for implementation. Furthermore, they are closely linked to the national policies on aging and long-term care. As a result, the COVID-19 policies lead to highly varied results worldwide. In the Netherlands the measures that were introduced, were accompanied by public discourses that were questioned regarding their ageism, including so-called compassionate ageism. This type of ageism, implicit and difficult to detect, is based on the perception of older people as warm and likable but nonetheless incompetent and helpless. Literature points out that many policy measures that were intended to be age-friendly and to protect older people, turned out to be inherently ‘ageist,’ demonstrating a paternalistic behavior toward older people by labelling them collectively as vulnerable. These findings underline the necessity to assess the age-friendliness of policy measures in times of crisis.

WHO framework

Protective measures that were taken during the COVID-19 pandemic, targeted older people as an at-risk group. How did older people in the Netherlands experience the COVID-19 measures and policies introduced by the Dutch government? In our study we used the framework for age-friendliness of the World Health Organization (WHO), who define age-friendliness as ‘encouraging active aging by optimizing opportunities for health, participation and security in order to enhance quality of life as people age’. The framework allows for a broad assessment of the COVID-19 policies, as it incorporates eight areas: outdoor spaces, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, and community and health services. We focused on the experiences of 74 older Dutch adults in the first and the second wave of the pandemic, to find out the impact in the earlier mentioned areas, and the lessons which can be learnt to better respond to a similar situation in the future.

Age-friendliness

The term ‘age-friendly’ is well-known in the Netherlands, among local policy makers, academic researchers, social- and care professionals and older people themselves who take part in the participatory research projects. Several Dutch cities already joined the WHO’s network, and by now several areas of age-friendliness have been incorporated in local policies. This study helps to understand whether age-friendliness has been incorporated in the Dutch governmental policy during the COVID-19 pandemic. The Dutch COVID-19 policies were predominantly developed based on information provided by (bio)medical experts. The response of the government took time, which generated public critique, given the high death rate among older people, increased loneliness, and limited freedom due to the lockdown.
Key points
The results of our analysis indicate that older people feel negatively affected in the areas of social participation, respect, and social inclusion. Furthermore, the measures concerning communication and the health services were experienced as age unfriendly. An important underlying issue of the COVID-19 measures is limitation of individual autonomy. The following key points can thus be made:

▪ A crisis such as a pandemic requires policies, based on interdisciplinary and experiential knowledge.
▪ Policies directed at older people can be experienced as ageist if the heterogeneity of that group is not considered.
▪ Policies directed at older people will benefit from examination within the WHO conceptual framework of age-friendliness ex ante and ex post.


Silver Empowerment
See ageing as a source of power instead of as a sign of decline and vulnerability, is the message of the newly published book "Silver Empowerment", in which scientists from various disciplines discuss ways of improving self-reliance of older people. Promoting an age-friendly society is the main topic. The book covers a wide range of topics, such as resilience, loneliness, interaction between formal and informal care and how to involve older people in research and care.

The chapter with contributions from Elena Bendien, Tineke Abma and Susan Woelders, is about participation and empowerment of older people in research. In this chapter they highlight a case study on research into social participation of older people in Zeeland. It is often thought that participatory research contributes to the empowerment of participants, in this case the older people. Empowerment then refers to gaining more control over your life, but also to collective action, and therefore has a political component. However, we saw in our research that despite wonderful ideals, moments of dis-empowerment can occur.

One of the participants: ‘I am 85 years old. I have always been busy, and even when I had a job, I always did volunteer work. But as years go by, especially when you are over 80, people seem to think you no longer want to do volunteer work or that you are no longer able to. They don’t ask you anymore and that’s a pity.’

Another example of dis-empowerment arose in the interaction between older participants in the study. This had to do with a few men dominating the conversation, which caused women to withdraw from the conversation, feeling that there was no room for them to participate. Thus, democratic decision-making was not possible. Situations like this require intervention from the researchers.

Participatory research is not merely a technical process and application of the right methods. It is about standing for the underlying principles and values and standing up for participants to prevent dis-empowerment. This requires what we call work ethics.

Silver Empowerment strives to offer every person the opportunity to grow old in a dignified and meaningful way, whilst being warmly connected to an inviting society.

The book is an Open Access ebook and is also available in paperback. It is published by Leuven University press.

Honours Class on scarcity in health and well-being
The Honours Class Innovating Health and Well-being is an extracurricular course for talented master students,
focusing on complex social and scientific subjects. This year, thirteen students spent nine weeks developing an innovation for a chosen challenge in the field of scarcity in the healthcare and welfare sector. On 22 June, the final presentations of the Honours Class Innovating Health and Well-being, organised by Leyden Academy, PLNT Leiden, Leiden University and the LUMC, took place. The theme this year was all about scarcity in the healthcare and welfare sector. The students pitched a solution for a challenge they had chosen by means of a homemade video.

**PsyConnect**
The team focused on improving the matches between clients and mental health care providers. From conversations with fellow students and care professionals, it emerged that those requesting help have a need for autonomy and would like to choose their own mental health care provider. The team set to work on this and developed the ‘PsyConnect’ platform, which makes it easier for the person requesting help to find the right care provider that meets his/her personal needs.

**EURconnect**
Another team started developing an app where students can find all relevant information in the social field and related to their academic career. Their research showed that fellow students lack a place where they can find all relevant information related to student life. For example, about housing, mental health, and peer coaches.

**Hidden hunger**
The last team took up the challenge to develop a solution for malnutrition among primary school children. This is a deficiency of vitamins and minerals. In their pitch, they demonstrated their solution to teach children more about healthy nutrition through meal planning in a playful way. Foods can be combined, and recipes can be devised on a magnetic board.

**The Art of Belonging**
This is the message that Tineke Abma would like to convey. On Friday, June 23, she delivered her inaugural lecture ‘The Art of Belonging’ following her appointment as professor of Older People Participation at the University of Leiden. This is a summary of her inaugural speech.

**Older people are a gift to society**
Participation, or taking part, is of great importance to older people. People such as Afifa Tadmine (73), whose face represents Leyden Academy. With her BLOEM Foundation, Afifa is –and has been for years–very committed to the activation of women who live in social isolation. Or take Leo and Netty Olffers, who have opened their living room to older people in the Laak district of The Hague for years. These are no exceptions. Older people are busier than ever: babysitting their grandchildren, working as volunteers, whilst often still working in paid jobs themselves. Participating is meaningful. It contributes to the well-being of older people and is at the same time a great ‘gift’ for society.

**Being and desire**
According to older people participation is useful if it contributes to belonging. ‘Belonging’ sounds like a combination of two verbs: being and longing, or ‘being’ and ‘desire’. Belonging refers to a deep human desire to belong without having to conform. Being accepted is not self-evident. As soon as people reach retirement age, they are confronted with processes of social exclusion. They do not experience belonging (anymore). This is even more true for older people who have had to deal with exclusion based on class, ethnicity, or another sexual identity all their lives. Opportunities for participation are unevenly distributed in our society.

**Dominance of economic thinking**
Current policy for older people focuses mainly on healthcare costs for an aging population and the perceived limited economic usefulness of older people. The
older people is presented as a cost item and vital older people are expected to contribute to the economy and healthcare crisis by providing informal care, on top of all the tasks they already perform. But what do they want? This and other forms and combinations of meaningful participation remain underexposed, such as participating in socio-cultural activities that offer older people opportunities for continued growth and development. The need to learn does not stop after the age of 65. This is precisely what I wish to do with my chair.

*Art touches and connects beyond words*

It is high time to give a new meaning to the concept of participation so that it contributes to meaning and belonging. This can only be done if we are prepared to accept that we humans are always connected with, and therefore dependent on, the world around us. Participating artists and social designers have a lot to offer. They are not so much focused on the defect or clinical picture but take into consideration the (older) person and their creative potential. It is important for them to initiate a creative process, to express feelings, and they do this with care and concern, with concern for well-being of older people. What makes theatre, dance or singing together have so much to offer? In short: Art is not so much about transferring information or meaning, but primarily about sensual and sensory sensation. The experience is intensified, and people are temporarily pulled out of their everyday life. Something resonates in people, which is aroused by the movements and the music, and that ‘feeling sound’ creates inspiration. This is why art touches and connects beyond words.

*Transdisciplinary research with older people*

I have always been an advocate for participatory research with people that contributes to their self-insight and mutual understanding. Drawing on different, sometimes conflicting perspectives, we can gain more insight into the experiences of others, and by entering an equal dialogue we can broaden and enrich our own horizons. Involving patients or clients in research is becoming more and more common, but the participation of older people in research is much more limited, especially when it comes to older residents in nursing homes or older people with cognitive or verbal disabilities. We therefore have little or no knowledge of their perspective and are thus confronted with our own methodological limitations. We invariably assume that people are autonomous and speaking subjects, and researchers often forget that there are people who cannot express themselves well in speech or whose words are not necessarily related to their emotions or actions. Excluding people from research is in fact silencing them. This is why I plead for transdisciplinary research together with older people and artists as co-researchers, and for the use of arts-based methods.

*Moral horizon*

Belonging forms the moral horizon for my research into participation by older people. That horizon outlines a movement and direction that my team and I are committed to in our research with, for and by older people. We want to contribute to 1) reducing inequalities of participation for older people and therefore their belonging, and 2) to promoting participation and belonging through a broader view of where participation takes place. Not only in informal care and work, but especially in areas that may have no direct economic benefit, but do generate vitality, meaning and connection, such as active participation in participatory art and culture.

*Our research into the value of art*

To gain more insight into the value of participatory art with and for the older people, we conducted research into visual arts in hospitals, participatory theatre, inclusive dance, art for older migrants, clowning for people with
dementia and intergenerational art in which children and older people work together, creating imaginary communities and visualizing what connects ‘us’ beyond age. We do not hesitate to ask critical-reflexive questions. Because art is no cure for everything and is not the solution or answer for the current healthcare crisis. But I do plead for an optimistic and hopeful vision of the third and fourth phase of life with room for participation in socio-cultural arrangements. The enormous creative potential this release is enriching both for the older people and our entire society.

A dance a day keeps the doctor away!

Older people and low literacy
About 24 to 40 million older Europeans have difficulty reading and understanding texts. This often leads to lower digital skills, stress, uncertainty, and health problems. For this reason, we have developed a playful and interactive healthy lifestyle course to support people with low literacy. The toolkit and the accompanying mini-training for professionals and volunteers who want to organize the course is now available.

Learning through play
Growing older with pleasure! is designed as an eight-week course, consisting of weekly two-hour meetings. During these meetings, participants learn in an accessible way, using interactive game cards, about topics that matter to them: the aging body, nutrition, well-being, digital skills and being heard. The course was developed according to the principles of meaningful play and collaborative learning. In the first case, learning skills through play is central, with the aim of gaining knowledge and ideas in a fun and enjoyable way. This approach has a positive effect on memory and recognition, motor skills, self-confidence, and social well-being. Collaborative learning focuses on group-oriented learning, active learning through involvement and strengthening social relationships, in the context of everyday life.

“Low-literate older people have often had to deal with disappointing learning processes. They have lost motivation along the way. It is important to get to what they do find important. There are too few projects that respond to this.” – Jolanda Lindenberg, researcher Leyden Academy

Positive reactions
The interactive course has already been tested in various European places. A total of 200 participants took part in the pilots, ranging in age from 53 to almost 100 years. Some participants indicated that they felt less pressure and found it easier to share and try things out. The pilot was also a promising experience for the trainers involved.

“You have a lot to deal with as an older person. During the course I learned to tackle issues spiritually, mentally, and physically. I especially loved the game element. There was also a disadvantage: the course is too short.” – Anita, participant

Free teaching materials
Grow older with pleasure! is a collaboration between Leyden Academy, Stichting Lezen en Schrijven, University of Copenhagen, University of Coimbra and AI9.PT, and is supported by Erasmus+ (a European Union program). The free toolkit can be downloaded from the LOLit website. In addition to the course material, you will also find a step-by-step mini training for healthcare professionals who want to apply the course in their organization.

“The special thing about this project is that people get the feeling that they belong, that they feel part of society.” – Peter van Deursen, adult education Erasmus+

CONTACT INFORMATION
ILC-the Netherlands
Prof. dr. Tineke Abma, president
Rijnsburgerweg 10, 2333 AA Leiden
The Netherlands
Phone: +31 71 5240960
abma@leydenacademy.nl
leydenacademy.nl/ilc-the-netherlands/