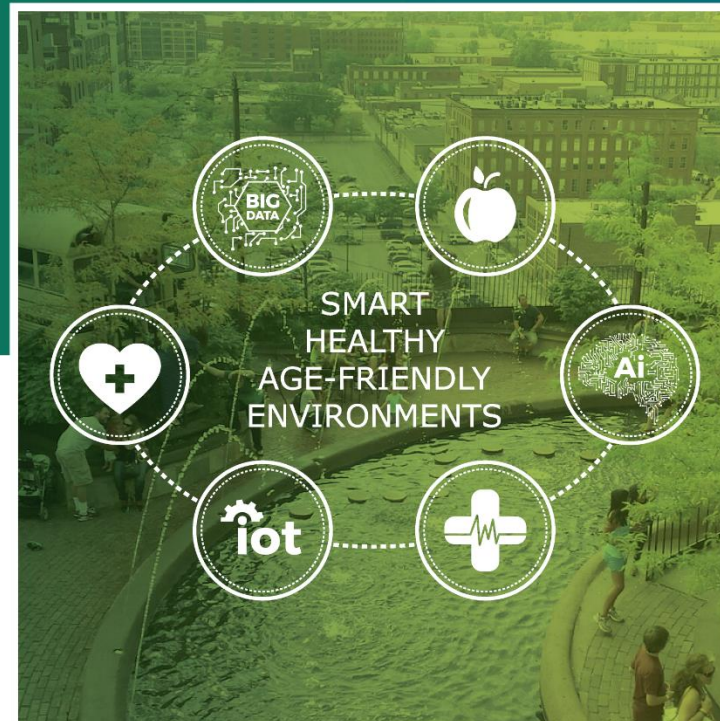


THEMATIC NETWORK 2018

SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS



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Melvin van der Mark
Javier Ganzarain

A photograph of a family on a boat. An older man with white hair, wearing an orange life vest, is smiling and looking at a young girl. The girl is also wearing an orange life vest and a blue beanie, and is looking up at the man. Another person wearing an orange life vest is partially visible on the right. The background shows a body of water and trees.

If people should age at their own homes, how to align **technological** development with the **building** industry for smart environments in terms of **POLICY** and **FUNDING**, enhancing a **more efficient health care system** that may add **better quality** for less investment?

THEMATIC NETWORK SHAFE


Approved by the European Commission (DG SANTE + DG CNECT)
as one of the Thematic Networks for 2018, powered by the
EU Health Policy Platform



Cáritas Coimbra is a non-profit organisation that supports around 26.5000 people/year in 5 districts of the Central Region of Portugal. It works mainly in social care, health and education; has nearly 90 centres (with 150 services), 1000 workers and 150 volunteers.



AFEdeemy is a limited private company, based in the Netherlands. Its mission is to build capacity of local, regional and national stakeholders in Europe to enhance the chance on implementing age-friendly environments in their territories.

A photograph of a group of people of various ages practicing Tai Chi in a park. In the foreground, a young girl in a bright pink long-sleeved shirt is performing a movement with her arms raised and hands clasped. Behind her, an older man in a maroon sweater and a woman in a white jacket are also in similar poses. They are all sitting on the ground in a circle, with trees and a path in the background.

Produce a Joint Statement 2018 that summarizes a common position on Smart Healthy Age-friendly Environments - focused on eHealth and mHealth - with priorities for policy making and recommendations for the European Commission and the Member States also thinking beyond 2020.



STAKEHOLDERS NETWORK

www.caritascoimbra.pt/en/shafe

The partnership is developed in a quadruple layer-scheme:

- **Coordinators**
- **Main partners** - The European organisations and networks that supported the Thematic Network [main document](#).
- **Associated partners** - all organisations and networks that cooperate with the coordinators by delivering work, suggestions and comments on the draft Framing Paper and draft Joint Statement.
- **Endorsing partners** - networks or organisations that endorse the final version of the Joint Statement that is presented to the European Commission in November 2018



MAIN PARTNERS

- European Innovation Partnership on Active and Healthy Ageing (EIP-AHA) - representatives from groups D4 and C2
- European Innovation Partnership Smart Cities and Communities (EIP-SCC)
- European Covenant on Demographic Change
- Eurocities
- European Construction Technology Platform
- European Centre Social Welfare Policy and Research
- ECHAlliance
- European Health Telematics Association (EHTEL)
- Reference Sites Collaborative Network

ASSOCIATED PARTNERS

AGE Platform Europe
 Alzheimer's Disease and related disorders Heraklion Perfection
 "ALLILENGII" (SOLIDARITY)
 Association E-SENIORS
 Azienda Ospedallera Universitaria Federico II
 BMGI Consulting
 Center for Assisted Living Technology Aarhus
 Advita – Associação para o Desenvolvimento de Novas Iniciativas para a Vida
 De Montfort University
 DKIT NetwellCASALA
 Dublin City University
 Dublin Institute Technology
 empirica
 European Chronic Disease Alliance
 European Health Futures Forum
 European Pain Federation
 Centro de Investigação Interdisciplinar em Saúde (CIIS), Universidade Católica Portuguesa
 Gradiant
 Hamburg Ministry of Health and Consumer Protection
 IDEABLE SOLUTIONS, SL
 INNJoy Agency for Innovation and Development
 Institute of Systems and Robotics – University of Coimbra
 Istituto Rittmeyer
 Santa Casa da Misericórdia de Vila Viçosa
 LANUA International Healthcare Consultancy
 Research Centre for Anthropology and Health
 Universidade da Beira Interior/CIDESD
 Exatronic, Lda
 Reference Site Asturias
 Instituto de Administração da Saúde, I-RAM

LILT Biella (Italian League against Cancer)
 Lithuanian University of Health Sciences
 MAGGIOLI S.P.A.
 Mativision Limited
 Medical University Vienna, Institute for Outcomes Research
 NOVUSENS Innovation and Entrepreneurship Institute
 Politecnico di Milano
 Porto4Ageing
 Projeto R
 Regione Campania
 SANMEDI bv
 SingularLogic S.A.
 Case Western Reserve University
 Instituto Politécnico de Viana do Castelo – Escola Superior de Educação
 NOVA Medical School – EpiDoC Unit
 SLOVECO
 Smart Homes
 Instituto Politécnico de Viseu
 Spark Works ITC Ltd
 The Bartlett Real Estate Institute UCL
 AD ELO – Associação de Desenvolvimento Local da Bairrada e Mondego
 UA paal, University of Alicante, Dep. Of Computing Technology
 Universitat Rovira i Virgili – Smart Health Research Group
 University of Deusto
 UPM – Universidad Politécnica de Madrid, LifeSupporting Research Group
 Virtualware
 Warsaw School of Economics, Poland
 HEI-Lab: Digital Human-Environment Interaction Lab/Universidade Lusofona
 Fundação Nossa Senhora do Bom Sucesso
 Instituto Principe Real
 Métis – Comunicação em Gerontologia
 CINTESIS-ICBAS UP
 INOVA+
 40+ Lab
 Faculty of Sport Sciences and Physical Education – University of Coimbra
 Projeto Aventura Social
 University of Aviero
 University of Bucharest
 APDP Diabetes Portugal

Faculdade de Psicologia e de Ciências da Educação da Universidade de Coimbra
 Coimbra Health School – Polytechnic Institute
 D'article Enterprise
 Van Berkum Communicatie
 HomeLab, Lucerne University of Applied Sciences and Arts
 ANGES - Associação Nacional de Gerontologia Social
 South Denmark European Office
 UCC Cubo Mágico da Saúde – ACeS Baixo Vouga
 STC – Serve the City Portugal
 Unidade Local de Saúde do Baixo Alentejo
 Caregivers Portugal, Associação Portuguesa de Cuidadores
 TICE.PT
 Liga dos Amigos do Centro de Saúde de Alf. da Fé
 Egas Moniz Cooperativa de Ensino Superior CRL
 Nuada
 Faculdade de Motricidade Humana, Universidade de Lisboa
 Age.Comm – Unidade de Investigação Interdisciplinar – Com. Envelhecidas Funcionais
 Faculdade de Medicina da Universidade de Coimbra – Instituto de Patologia Geral
 Município de Miranda do Corvo
 Nursing School of Coimbra
 Escola Superior de Enfermagem de S. João de Deus – Universidade de Évora
 RMIT Europe
 Centro de Solidariedade Social da Adémia
 Global Health and Tropical Medicine, Universidade Nova de Lisboa
 Fundação Dr. José Lourenço Júnior
 Santa Casa da Misericórdia de Lisboa
 INESC TEC
 Instituto Superior de Engenharia de Coimbra
 MultiMed Engineers srls
 Clínicas Leite Lda.
 APCC-Associação de Paralisia Cerebral de Coimbra
 Município De Pampilhosa Da Serra
 Comissão de Coordenação e Desenvolvimento Regional do Centro
 Belgian Building Research Institute
 Senior Group
 Utrecht University (European Framework for Age-Friendly Housing)



CAN WE REACH OVER 200 ENDORSEMENTS?!

METHODOLOGY

FRAMING PAPER

Background
State of the art eHealth and
mHealth Quality and Costs, people
with chronic diseases/impairments
Stakeholders opinions
Best practices
Common principles

PREPARATIONS

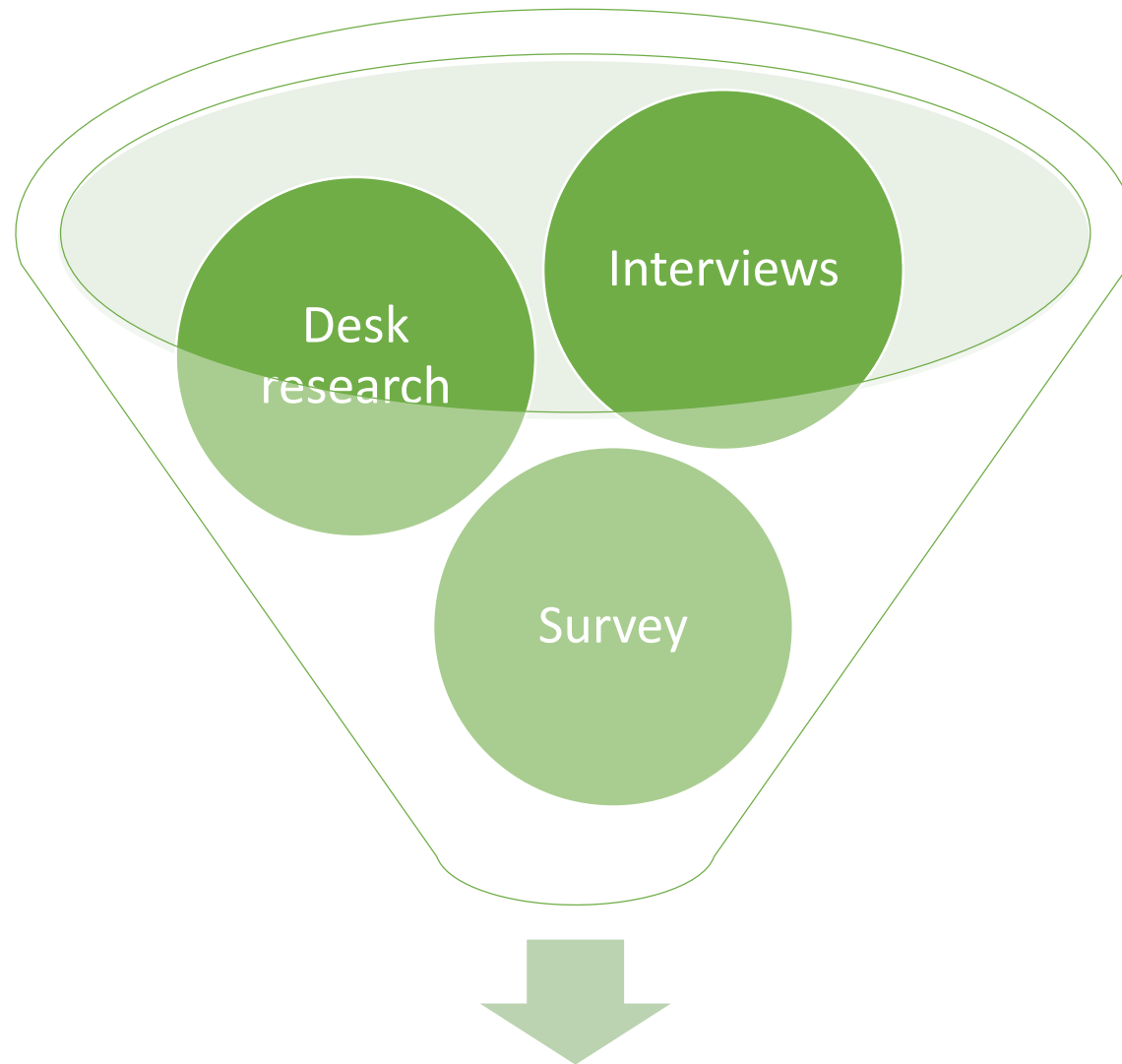
Literature
AAL findings
FP6, FP7, H2020 findings
EIP AHA repository
Experts interviews
End-users interviews
Survey

JOINT STATEMENT

Common position on Smart
Healthy Age Friendly
Environments
Recommendations EU policy
making beyond 2020

CALL TO ACTION

RESEARCH



Current state of the art and
recommendations from participants

RESEARCH – DESK RESEARCH

	Advantages	Disadvantages
Wellbeing and Quality of Life	<ul style="list-style-type: none"> • Supported and feeling safe • Connected to others • Self management 	Less personal contact
Healthcare and social care	<ul style="list-style-type: none"> • Improved diagnostics and provision of care • Improved monitoring and knowledge healthcare workers 	Early stage Low rate of acceptance Expensive
Independent living	<ul style="list-style-type: none"> • Support independency • More security and safety • Improved adherence • Decreases burden caregivers 	Tailor made solutions versus general profitable solutions
Efficiency and efficacy	<ul style="list-style-type: none"> • Improved care pathways • Improved decision making – less risks • Diminishes administration costs 	Business models and clear cost-benefit calculations still missing

RESEARCH – Towards Survey and Interviews



If results are mainly positive,
why there is no more eHealth
in health and social care or
used for independent living?



European survey
Interviews opinion leaders

RESEARCH – Barriers

	Governance and coordination	<ul style="list-style-type: none"> • Alignment, coordination and sharing between cities, regions and, countries is missing • Stakeholder involvement lacks • Technical issues remain such as installation, updates, interoperability
	Communication, people and societal challenges	<ul style="list-style-type: none"> • Low awareness and acceptance of ICT • Lack of user-friendly ICT • Prevention and empowerment citizens underdeveloped
	Learning and knowledge management	<ul style="list-style-type: none"> • Digital and health illiteracy • Reinventing the wheel everywhere • Overviews results and lessons learned from projects is missing • Privacy and data/internet security remain an issue
	Funding, economics and business models	<ul style="list-style-type: none"> • Short term project funding, funding aimed at the consumer and to undercut time to market, deployment and scale up • Business models, return on investment models are missing • Affordable pricing is lacking