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Population Ageing

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## ABSTRACTS

### 'Long term care, spatial planning and public policy in Central and Eastern Europe'

Eastern-European Ageing Societies in Transition (EAST) Research Network

Workshop in Budapest 9-10 of June 2016

#### Keynote Presentations

**George Leeson**, Oxford Institute of Population Ageing, UK

"Why ageing, and why EAST?"

*The presentation highlights the demographic development in the recent past and predicted future in Central and Eastern Europe. These developments have a profound effect on the ageing of the population and on issues associated with this process such as intergenerational relations and the provision of support to vulnerable older people. The demography of the region is characterized for instance by excess male mortality in certain countries, which impacts strongly on male-female differences in life expectancy, as well as by natural population decrease and net emigration. The dramatic demographic changes experienced in these countries coincided with equally dramatic political, economic and social change. The presentation will highlight these demographics and discuss their implications for living arrangements, kin networks, individual wellbeing and inter-generational relations.*

**Valentina Hlebec**, Faculty of Social Sciences, University of Ljubljana, Slovenia

"Methodological characteristics of research projects conducted in Eastern European countries between 2011-2015"

*Quality of research findings is associated to many factors, starting with thorough literature review and formulating research questions and hypotheses. These, however, have to correspond closely to research designs, quantitative, qualitative or those with mixed methods, in order to provide high quality answers to research questions and hypotheses. Researchers have to be aware of advantages and disadvantages of specific methods, such as possibility to generalize findings from sample to population in quantitative study or evolving a comprehensive and in-depth understanding of a research phenomenon from grounded theory approach. The purpose of this paper is to present major characteristics of research designs used in research projects, conducted in Central and Eastern European countries but available mostly only in national languages with focus on researches between 2011 and 2015. Hungarian researchers initiated collection of information about the projects and small-scale studies in winter 2015 using a classification of projects characteristics. All together close to 100 studies were described and analysed. We will evaluate methodological characteristics of research projects such as type of research design, type of data, sampling procedures etc. using systematic review principles.*

**Andreas Hoff**, Zittau/Goerlitz University of Applied Sciences, Germany  
 “Models of Care across Europe”

*“This paper aims to conceptualize models of care provision in several European countries, thus providing a theoretical framework for international comparison of caregiving across country borders. In the first part of the paper, we will introduce European care regimes and discuss their underlying cultural rationales. These cultural differences are reflected in contemporary modes of long-term care provision, funding mechanisms, and care policies. We will scrutinize the former in the second part of this paper using the MISSOC database. In conclusion, we will discuss the relevance of European care regimes for comparisons of long-term care provision in Central and Eastern Europe”.*

**Zsuzsa Szeman, Maria Tróbert** Institute of Mental Health, Semmelweis University, Hungary  
 “Age-friendly environments: Global trends and where is Eastern Europe”

*Urbanisation and ageing present a new challenge for most countries of the world. The WHO’s 2005 initiative, the “Global Age-friendly Cities” program, launched a new concept by linking the built environment with societal and social considerations. The presentation first shows how the overseas Anglo-Saxon countries, different Asian countries, the old member states of the European Union followed that initiative, which countries have been pioneers and which ones are lagging behind. It reveals the similarities and differences in the ways individual countries handle the problems. It looks at the cultural and religious differences, the way in which traditional attitudes influence the age-friendly environment.*

*The presentation then compares two good examples of the potential for social innovation in long-term care in the recent MOPACT project: the Hungarian “Elder-friendly House” and the German “Bielefelder Model”, concluding that a Central European country is able to develop innovative tools to improve the quality of life of older people with a long-term care need.*

**Lucie Vidovičová**, Office for Population Studies, Faculty for Social Studies, Masaryk University, Brno, Czech Republic  
 “The challenges of ageing and urbanization in the Czech Republic”

*In recent decades there has been what some call a “senior friendly boom” : an increase in interest in the strategies, practices, services, products, and processes that reflect the specific needs of ageing people and which should help to increase their quality of life. The environment, a factor mediating the experience of aging and a key component of a positive approach to managing the challenges of population aging at the aggregate level, is also a prominent feature in such a list. The presentation introduces the Age-friendly City Index as a way of measuring the age-friendliness of urban environments. The proposed index assesses the dimensions of outdoor spaces and transportation as they are perceived and evaluated by older people, residents of the fourteen biggest towns in the Czech Republic. The dimensions and items included in the index are constructed upon the theoretical framework proposed by the World Health Organisation Global Age-friendly Cities Project. Validation of the results of the index is based on experimental open-ended question analysis. The resulting categories confirm the importance of greenery and aesthetics for the age-friendly concept, and confirm the rankings of cities obtained via the composite index. In addition, comparison with similar measures tested in Canada and Hong Kong are discussed, and the necessity of backing up index measures with policy analysis and general structural support is argued for.*

**Mihaela Ghenta**, National Scientific Research Institute for Labour and Social Protection, Romania  
 “Potential of social innovation in long-term care in Eastern Europe”

*Mihaela Ghența<sup>1</sup>, Luise Mladen<sup>2</sup>, Aniela Matei<sup>3</sup>, Speranța Pîrciog<sup>4</sup>*

*The Eastern European countries are facing challenges related to the ageing of population translated in an increased interest to develop strategies that address the long-term care (LTC) related issues. The latest policy reforms reflect a shift in public awareness concerning the future difficulties associated with ageing and long-term care. This presentation aims to provide a description of long-term care systems in Romania and Bulgaria, based on the research carried out within the FP7 project “Mobilising the Potential of Active Ageing in Europe” (MoPAct). The central objectives are to emphasize the current problems of long-term care services provision and the possibilities for social innovations in this area. National and international studies related to long-term care topic and official statistics (national and European) were considered in this comparative approach. Qualitative research methods (interviews with national experts and focus-groups conducted with various stakeholders of LTC services from Romanian urban/rural areas) were used to deepen the information resulted from desk research. In terms of services provision, the research showed that LTC remains insufficient clearly defined in both countries, despite of the recent policy changes. Opportunities for social innovation include: learning from other European countries, the development of home care services, especially in rural areas and of specific financing schemes for low income elderly.*

### **Presentation Abstracts**

**Andrzej Klimczuk**, Warsaw School of Economics, Poland  
 “Ageing Policies in Selected Cities of Poland: Key Governance Issues”

*The one of the important topics related to public policies on ageing is the delivery of public services for older adults at the local level. These services include, among others, care services, health care services, employment support, senior centres and recreational services, cultural services, and transportation.*

*The main aim of this paper is to discuss approaches to the ageing population in selected big cities of Poland. The analysis will focus on the solutions and challenges for governance and management of ageing policies at the meso-level (communities, cities, and municipalities) and the micro-level (citizens, households, and neighbourhoods).*

*The first part of the paper will briefly introduce key assumptions of ageing policy in Poland and its implications for local governments. The second part will provide analysis of the main goals of local policies in following cities: Białystok, Kraków, Gdańsk, Wrocław, and Poznań.*

*The summary will include recommendations for entities of socio-economic policy and suggestions for future-oriented research directions that may be useful in other countries of the Central and Eastern Europe.*

**Marcela Petrová Kafková and Tatiana Sedláková**, Office for Population Studies, Faculty of Social Studies, Masaryk University

“The oldest-old or fourth agers: are they the same or different populations?”

*In my contribution, I will discuss the issue of the oldest population; specifically, I will focus on the issue of the recognition of older peoples' care needs, preferences and spending of everyday life. In the case of the Czech Republic, there is very little information on the oldest-old or the specific population in need. Generally speaking, the oldest-old population is a population seriously underrepresented in research, being one which is often neglected in surveys and qualitative research. The interviewing of people of advanced age brings specific problems and interviewing by proxy is often used. Nevertheless, an improved understanding of the needs and preferences of this population is a*

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*precondition for improving both the provision of care and its quality of life. Unhelpfully, such populations are surrounded by various myths and stereotypes.*

*According to Czech statistics, only 16 % of older people are the oldest-old (i.e. 80+), which is a little more than 400 000 people. Of these oldest-old, only 43 % of women and 25 % of men receive care allowance. These relatively low percentages and studies of centenarians – indicate that although health generally deteriorates with age, the oldest-old are not generally regarded as people in need. The other ambiguity relates to the living conditions of older people, as we know that only a small minority live specifically in “old people’s homes”. There are various types of residential care for older people, and standard residential homes for older people are, in many cases, substituted by primarily medical facilities, there is no accurate knowledge of the number of older people no longer living in their own home.*

*For defining older people in need, the fourth age concept seems useful. Fourth-agers might be characterized in particular by their loss of agency, especially by their inability to care for, and make decisions about themselves. In this respect, it is not an inevitable stage of life and affects only a proportion of the population. The combined effects of ageing, chronic illness, and disability which are all characteristic of the fourth age irreversibly change an individual’s customary way of life and call into question his/her sense of self. Indeed, the fourth age is conditioned by institutional practice, and contact with the health and welfare systems. Older adults, however, are not passive elements in this process; they actively negotiate and maintain a fragile sense of self in the face of increasing disability and frailty. In the context of fourth agers, the following important question arises: When does a person lose enough of his/her autonomy or agency in order to be labeled as a fourth ager? In other words, what kind and degree of help tend to make an older person a fourth-ager? I will address these questions and issues in my presentation.*

**Agnes Nemenyi**, Christian University Partium, Oradea, Romania

*“Home care of aged people in Romania, Legislation, institutions, inequalities in access to home care service”*

*Home care of aged people is a new forme of service for aged people. There are involved state units as well as the civil sector. Rural people are in a big difficulty to use this type of service. There are also inequalities between counties*

**Christian M. Heidl**, (with Prof. Dr. Jürgen Zerth), Wilhelm Löhe University Fürth, Germany

*“First impacts of a digital monitored exsiccosis system for long term care quality – implications for quality of life of elderly people as well as caregiver acceptance”*

*In the project ‘SeLe’ a sensor-based system for long term care will be developed that controls the liquid balance of a person to a valid and reliable level and, therefore, prevents health risks by physical dehydration.*

*Consequently on basis of an innovative sensor technology (microwave-sensors) and newest integration technology an early warning dehydration system is currently investigated and will be implemented in ambulant and stationary care.*

*The scientific use of the technology is developed with elderly people in mind, who live either in a nursing home (stationary care) or at home (ambulant care).The systematic investigation of the user conditions and acceptance factors should be examined for the application of the projected product-service combination.*

*Furthermore for SeLe technology a socio-economic effectiveness analysis as well as terms of use and acceptance is determined for leading nursing employees and specific care employees as well as their implemenation conditions for the analysis and the use of the technology.*

*This asks for substantial and structural changes in the workflow of the healthcare system from a nursing point of view (caregiver), as well as for the patient itself. It requires an increased control of processes in order for a sensor-based system to reliably measure the liquid balance of a human being, and can also be implemented. The aim is, on one hand to increase and improve the quality of life for the elderly, and on the other hand to modify the quality of the healthcare system for long-term care.*

**Galyna Poliakova**, Ukrainian Charity “Turbota pro Litnih v Ukraini” (Age Concern Ukraine), Ukraine

*“Elder Abuse in Ukraine”*

*The phenomenon of elder abuse has never been recognised in Ukraine. Although many older people suffer from elder abuse and age-related discrimination the society pretended that nothing bad may happen to Ukrainian seniors. Unfortunately in the text of the Law on Home Violence only children are described as victims and all procedures are focused on children. Old people are helpless and no governmental institution has any legal tool to protect them. Ukrainian Charity “Turbota pro Litnih v Ukraini” (Age Concern Ukraine) made a survey aimed to reveal what do elder people think of elder abuse in Ukraine, who are the abusers (from their point of view), what types of abuse are most*

prevalent. 1415 individuals aged 60+ were interviewed in 15 biggest cities in Ukraine. The questionnaire was developed on our request by a group of researchers from Ukrainian Psychiatric Association. The interviews were performed by groups of trained volunteers. The received data were presented to members of city councils in all cities participated in the survey, to the staff of the Ministry of Social policy of Ukraine and to the staff Ministry of Home Affairs of Ukraine.

**Daniela Pastarmadzhieva**, Political science department, Faculty of Economics and Social Sciences, University of Plovdiv "Paisii Hilendarski", Bulgaria

"The needs of elderly people in Bulgaria and the public policy"

*Elderly people as a specific social group are under protection and care of various national, subnational and supranational organizations and policies. On the one hand elderly people are an object of the state as the latter produces policies concerning them. On another hand they are part of the civil society and they are participants in the policy-making process.*

*It can be assumed that an adequate planning of long-term care for the elderly people requires their own assessment of the social and political environment and of their place in this environment.*

*The current study offers an analysis of the situation from the perspective of political science. It displays the attitudes of elderly people towards the role of the state, assessment of the quality of their personal life, whether they feel discriminated because of their age, whether they feel secure and protected from criminal violation. For the purposes of the study as "elderly" are defined those people who were over the age 60 at the time the survey was conducted. The main data used is from European Social Survey - Round 6 conducted in Bulgaria in 2012-2013. The other sources used are various analysis of Open Society Institute Sofia (Public opinion and social attitudes in Bulgaria) and previous studies of the needs of elderly people in Bulgaria.*

*On the basis of the collected data the author tries to identify the areas that elderly people see as problematic and areas which need improvement.*

**Kinga Vajda**, Semmelweis University, Sociological and mental health aspects of individual and community resources, Hungary

"East and West: Territorial and municipal differences in Hungarian social care for elderly people"

*For Hungary and the other East-European countries, aging society is a serious challenge. Acts and laws that rule the system usually follow one step behind the demographic changes. The presentation using statistical data of the Hungarian Office for Statistics, intends to show the differences of the basic social-, and long term care based on territorial and regional variations, while putting the east-west diversification into the focus. In line with geographical differences the number of clients served by one social care provider also shows a great diversification, that means different workload for professionals. The interconnection between basic social-, and long-term care is important because basic social care could be the preventive part of the social security system for the seniors. By enjoying the basic care provided clients could avoid or postpone moving in a residential or nursing home.*

*Further to the regional differences the municipal differences are also well-marked. The dilemma is whether aging in a smaller community like a village is better than aging in a bigger town capable providing better care? Could the village provide that same safety to the elderly like a town does? Or can a safe and supporting smaller community be better compare to the bigger town's defective social system?*

*Observing the territorial and municipal differences provides us with a clear picture of differences between the eastern and western part of the country.*

**Lukasz Krzyzowski**, Humboldt-Universität zu Berlin, AGH University, Krakow, Poland

"Circulation of elderly care culture(s) in transnational networks of Polish migrants"

*People are living longer in most parts of the world, and in some parts of the world, healthier lives. On the one hand, global aging is a success story – it represents medical achievements and advancement. On the other hand, aging affects economic situation (e.g. escalating pension expenditures) and other issues such intergenerational relations or the ability of states/communities/families to provide care. Ageing of societies changes also models of care and images of older people in society especially when both international migration and aging are analyzed simultaneously. Transnational relations have intensified due to the development of new communication technologies, relatively cheap and fast international flight connections and (in some parts of the world) the liberalization of migration policy. Therefore, maintaining contact with those left behind in the sending society is currently easier than ever before.*

*People migrating to another country with different models of elderly care – familialism by default, supported familialism and de-familialisation (Saraceno and Keck 2010) - can transfer newly acquired knowledge to sending society transforming family obligations and expectations towards state in terms of providing care to older people. At the same time they may change care patterns in receiving societies. Circulation of economic and social remittances can also change social practices of older people in sending/receiving societies. Based on TRANSFORMIG's first wave interviews (N=130), the paper is dedicated to the question of how social networks of Polish migrants in the UK and Germany transmit local experiences of ageing and care obligations.*

**Yaroslava Evseeva**, Institute of Scientific Information on Social Sciences, Moscow, Russia  
 “Moscow as an age-friendly city: Achievements and challenges”

*In 2007, the WHO launched a Global Age-Friendly Cities project. Russia is represented in it by two cities: Moscow and Tuymazy (Bashkortostan). The paper reviews tendencies related to age-friendly cities in Russia, with a particular focus on Moscow. The author suggests that while progress has been made as regards technical betterment (transportation, accessibility of spaces and buildings), as well as what can be seen as personal development and sociocultural activities (art classes, sports clubs, etc.), older people's civic engagement, social inclusion, access to information, participation in the life of society and community remain problematic; positive images of old age and older people are lacking*

**Signe Tomson**, Rīga Stradiņš University, Faculty of Rehabilitation, Department of Rehabilitation, Riga, Latvia  
 “Accessibility problems in home environment for seniors in Latvia: experience from the research project *innovAge* (WP2)”

*Introduction. Studies on relations between health and environment indicate that accessibility positively influence healthy life expectancy, as accessible home environment and neighborhood support mobility, daily activities and social participation in old age. One of the tasks in the EC 7th framework research project *innovAge* (2012- 2015) aimed to develop an IT tool to support senior's involvement in decisions about their housing options and help them to become active partners in choice and supply of housing.*

*Aim of the study, materials and techniques. Study aims to explore senior's opinions about accessibility in their physical home environment. Interview records and notes from two study stages were analyzed. At the first stage, 8 seniors took part in research circle consisting of four group discussions. At the second stage, 10 seniors took part in usability testing of IT tool prototype. At both stages participants represented variety of living conditions, family situations and functional abilities. Participation in the study was voluntary and the participants had right to withdraw from the study at any stage.*

*Results. Usually, barriers in home environment seniors consider late, when functional abilities decreases substantially. The most common places where environmental barriers appear are sanitary spaces, kitchen and housing entrance. Despite the environmental barriers and functional limitations, seniors remain in their homes, mainly because in Latvia do not exist traditions to seek options for relocation as well as no policies and services support this. In few municipalities exist options to adapt home environment but it implies only in case of severe disability for persons using wheelchair. Usually, the need for environment adaptation for seniors is replaced by care services, thus meeting also the needs for senior's socialization. Regarding possibilities to adapt home environment exist strong prejudices (bath vs. shower, disadvantages of living on the first floor, etc.). Seniors admitted that they lack knowledge and experience on housing adaptations, but emphasized that the environmental accessibility in a wider context, including the neighborhood and services, is essential.*

*Conclusions. The close cooperation with participants facilitated the researchers' understanding of the seniors' complex views and needs regarding their home environment and related issues which are important for developing housing policies for senior citizens in Latvia. Despite the specified accessibility problems in home environment, the seniors evaluated usability of their homes generally high.*

*Keywords: seniors, accessibility, housing*

**Piotr Szukalski**, Applied Sociology and Social Work, University of Lodz, Poland  
 “Disability, population ageing and demand for social assistance homes. Case of Poland”#

*In the next decades the population of Poland will be characterised by accelerated ageing. In the next 15 years the number of the aged 65+ will increase by 42%, the number of the aged 75+ by 56% and the number of the aged 85+ by 27%. The increased numbers of the elderly will affect demand for social assistance, although changes in disability level could modify impact of “pure” demographic change. The paper is aimed at estimation of demand for social*

assistance homes for the elderly until 2030. First, starting with assumption that observed pace of changes in disability level by age will continue and using the 2014 CSO population projection the number of the disabled 65+ will be estimated. Second, using different assumptions about changes in age-specific demand for social assistance the total demand for social assistance homes will be estimated.

**Katharine Schulmann**, European Centre for Social Welfare Policy and Research, Vienna, Austria

“A review of the state of the art in ICT-enabled social innovations in long-term care”

*Background: To meet current and future needs for long-term care, many countries in Europe are being compelled to look to new and innovative products and services, both to fill gaps in existing services and to introduce new services and new service structures that promote an ‘active aging’ and ‘independent living’ approach to health and care. This presentation draws on findings from a scoping study carried out by a research team at the European Centre to describe the ‘State of the art on ICT-enabled social innovation in prevention, health promotion and rehabilitation.’ The scoping study is part of a larger project funded and executed by the European Commission’s Joint Research Centre – Institute for Prospective Technological Studies (JRC-IPTS) designed to gauge the potential impact of ICT-enabled social innovation in support of the Commission’s Social Investment Package for growth and social cohesion (SIP).*

*Objectives: The objectives of our research were to review ICT-enabled innovations specifically in the areas of prevention, health promotion and rehabilitation within long-term care for older people, and to develop a framework for analyzing the impact of ICT-enabled innovations in these three areas.*

*Methods: We carried out a literature review of the peer-reviewed academic literature as well as grey literature on the topic.*

*Results: We map the state of the art on ICT-enabled innovations using a framework that distinguishes between the following categories of ICT solutions for prevention, health promotion and rehabilitation: wearable devices, home-based devices, service-wide interventions, and community-based interventions. We find that while there is a plethora of ICT innovations under development and in the pilot phase of implementation, hardly any ICT-based solutions have successfully been scaled-up. Those that have reached a wider market have tended to be isolated products (e.g. software and web-based applications), rather than more complex tools intended to be integrated into the wider healthcare system. To measure the impact of these ICT-enabled innovations, we develop a framework consisting of three dimensions: health and self-management potential, scaling-up potential, and social innovation potential. Another key finding is the regional imbalance in the development and diffusion of ICT-based innovations within Europe. Eastern European countries, where the need for new solutions is just as, if not more, pressing as in Western countries, are not well represented in the international literature in terms of evaluations of existing ICT innovations.*

**Csaba Kucsera**, Information Society Unit, Institute for Prospective Technological Studies, Joint Research Centre, European Commission

“ICT-enabled social innovation for the policy area of Active and Healthy Ageing and Long-Term Care”

*The demographic change in the European Union and the economic crisis with its profound and lasting consequences on its societies and their social protection systems prompted the European Commission to issue the Social Investment Package (SIP) in 2013. The SIP is a comprehensive communication that identifies policy goals and suggests measures to attain them in new yet comprehensive ways in this context. According to the SIP, social innovations can improve the efficiency and adequacy of social policies and the provision of social services in addressing such societal challenges; and can also facilitate life-long investment in personal and community capacities –human capital –to boost personal and community-based coping strategies with challenges when they arise. Such potentials of social innovations are further increased by novel solutions enabled by Information and Communication Technologies (ICTs). The ongoing IESI research project<sup>1</sup> –in its full name ‘ICT-Enabled Social Innovation in support to the implementation of the EU Social Investment Package’, that is conducted by JRC-IPTS, part of the European Commission’s in-house science service –applies a systematic approach to understand better how ICT-enabled social innovation might contribute to social investment policies. It builds a database of ICT-enabled social innovation initiatives –policy-relevant experiences like services, policies or systems –primarily from the Member States of the EU, and documents extensively those that were able to deliver proven benefits on policy-relevant outcomes. During the first two year of the project –that runs until December 2016 –210 initiatives were mapped and analysed in total in a wide array of social services. The project also develops a general impact assessment framework to capture the benefits to various stakeholders at different levels.*

*Importantly, the IESI research project maintains a particular focus on the policy area of Active and Healthy Ageing and Long-Term Care (AHA&LTC). Within this focus, three –interlinked –policy themes were identified and are*

orienting the data collection and analysis: 1) Independent living of older people in the home environment; 2) Integrated health-and social care; and 3) Prevention, rehabilitation and health promotion.

Out of the 210 ICT-enabled social innovation initiatives mapped until December 2015, 55 belonged to the policy area of AHA&LTC. Nevertheless, there seem to be a significant imbalance among the welfare regimes of the EU when it comes to the presence of such ICT-enabled initiatives. All of them had to meet with a three-fold selection criteria: 1) policy relevance, i.e. by addressing one or more of the challenges that ageing societies pose according to the definition of the SIP and adopted by the IESI project; 2) clearly made possible or improved by the use of ICTs; and 3) capable of delivering positive outcomes on those policy objectives, based on (available) evidence and a systematic assessment. Out of the 55 initiatives mapped in the AHA&LTC policy area in total, 47 of them had at least one EU MS among the countries they were operating on. However, the representation of the Central and East-European countries is weak, only 9 % of the initiatives are from this region. Among the many possible reasons of this imbalance the followings are likely to play their role: 1) the mainstreaming of ICT-enabled social innovation in the AHA&LTC policy area is lagging behind; 2) the lack of general culture of some impact assessment and publication of the results; and 3) language barriers. In any case, the last round of data collection in 2016 will have a special emphasis on these countries in order to achieve a more balanced sample.

Analysis of the initiatives mapped so far showed great potential for the realisation of policy goals by adopting ICT-enabled social innovation solutions for the delivery of social services. The apparent benefits of the AHA&LTC policy areas in fact seemed to have even more potential when looking at this sub-field through the lens of the overall field of social services. This presentation explains the policy context of the project; the developed conceptual and analytical framework; the steps of data collection and analysis with its main "promising" results mentioned through the 2015 IESI Knowledge Map. And finally, the presentation would like to inspire the attendants to share their expert insights and suggestions for the last round of IESI data collection.

1 <http://is.jrc.ec.europa.eu/pages/EAP/eInclusion.IESI.html>

**Jerzy Krzyszkowski**, Department of Labour and Social Policy, University of Lodz, Poland  
 "Innovation in social services: the case of long term care in Poland"

As a result of population ageing and transformation of women's employment pattern the demand for long term care services increases in the countries of Central and Eastern Europe. Main trends and evolutions of social services in the long term care sector in Poland seem to be:

1. the decreasing participation of family in the long term care for its members:
2. deinstitutionalization of public long term care – a shift from residential homes to home care services,
3. expansion of long term care provided by non – public services,
4. decentralization of long term care social services

The growing importance of third sector organizations in this area seems to be the tendency supported by central authorities in Poland. The National Program ASOS ( Social Activation of the Old People) is a good example of this tendency. In this situation there hope for more innovation in this area. However innovation seems to be an oft-heard buzzword in public discourse in Poland it is not the case of social innovation in welfare and social services. Historically speaking social innovation in social services has been neglected area in welfare studies in Poland.

My presentation will be based on results of qualitative research of content analysis of local initiatives prepared by non- governmental organizations in this field.