CELEBRATING AAL’s LASTING LEGACY
The year 2020 will most likely stay in our memories for a very long time and for the least as the start into a new decade. It turned out to be a year of standstill on a global scale, a year, in which public health as well as healthy ageing received a whole new meaning! And twelve months later we are still in the worst pandemic since the ‘Spanish flu’ of 1918 in Europe.

It will probably take years to understand, what 2020 really meant to our societies and to what extent the experience of the global pandemic led to lasting changes. The effect on an ageing European continent was harsh with a tough wake-up call for our society and institutions.

The importance of health prevention, the need for shifting care more towards the home and community front, the role technology can play in keeping people connected and safe at home are only a few elements of AAL’s narrative being put forward in 2020.

There has never been a timelier opportunity to promote the AAL Programme’s role in contributing to systems change. That momentum was brought into the current development of the new Horizon Europe partnership on health & care systems transformation with the majority of AAL members aiming to participate. Twelve years of collaboration between public funding agencies, business, research and users provide an enormous learning experience to accelerate necessary innovation and change for Europe’s welfare systems in the 2020.

While the AAL Association has been working hard to bring its programme assets into the new partnership in Horizon Europe and possibly also into Digital Europe, the AAL Programme continued relentlessly into its final year of full operations. Let me just cite a few highlights of 2020, for which you will find more detailed information in this report:

The Call 2020 was implemented with some delays despite the lock-down attracting a record number of applications in AAL2. At the same time an additional and final AAL Call in 2021 has been launched in December 2020.

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Foreword

Welcome to this very special publication celebrating the European Week of Active Healthy Ageing 2022, held in the beautiful and historic city of Gdańsk. We hope to provide a valuable summary of the many views expressed, lessons learned and ideas exchanged during our time together and celebrate what was the last ever annual AAL gathering held 14 years after the programme began.

As well as being the last event like this, EWAHA22 was also the first AAL conference back together again after the restrictions of the pandemic. How wonderful it was to be together in person after so long, particularly in such a beautiful setting, where we could meet as friends and colleagues with shared interests and common goals.

In short, the event was a glittering success and enormous praise should go to our conference hosts Fundacja Gdańska, who, along with the AAL team, managed to bring together a wonderful programme of speakers and workshops, a fascinating exhibition and a social programme that proved a fitting finale to the AAL Programme.

An emotional opening ceremony was crowned by the presence of the legendary trade union leader, former president of Poland and Nobel Peace Prize winner Lech Wałęsa. It was held on the site of the old Gdańsk shipyards where so much history was made in the 1980s, and which is now home to the magnificent European Solidarity Centre, where we gathered on the first night.

The main event took place over two days at the impressive Amber Expo Conference Centre, which played host to a vibrant timetable of workshops, plenary and poster sessions, and an exhibition of AAL solutions that are already making such a difference to so many lives all over Europe. There was also time set aside for busy networking and the place was abuzz with lively conversation and peppered with groups of people holding fruitful meetings.

Things finished off in suitable style at the final ever AAL party, held just a short walk from the conference building at the spectacular Polsat Plus Arena Gdańsk, an impressive stadium and home to Lechii Gdańsk. Here, conversations continued to a backdrop of music and a wonderful lightshow that, as well as lighting up the night sky, seemed to shine a spotlight on AAL’s many achievements and its impressive legacy as delegates chatted and danced late into the night.

The following pages seek to reflect some of the important content to have emerged from these amazing settings. As they do, one message seems to stand out clearly – the importance of collaboration. The purpose of AAL has always been to develop products and services that make a real difference to people’s lives. It has achieved great things in working towards this aim, but in establishing a continuous dialogue amongst its vibrant community in the spirit of collaboration it has, perhaps, achieved its most lasting legacy.
The opening ceremony took place at the European Solidarity Centre, and delegates were treated by an unexpected appearance from Lech Wałęsa, the man who spearheaded the Solidarity movement in the 1980s and went on to become a Nobel Laureate for Peace and the President of Poland. His speech, as well as those from a dazzling array of other speakers, brought inspiration, laughs, motivation, and a determination to make the most of this rare chance to meet with so many like-minded people.

This was the first large in-person event hosted by the AAL Programme since the COVID-19 pandemic, so on a personal level this was a chance for many friends and colleagues to gather, eat and drink together, and restart the informal chats that provide so much of the hidden value of communities such as those that surround the AAL Programme. Of course, the pandemic has changed the landscape in which we all work permanently, and not many more so than the domain of technology for ageing well. The advantages of many of these technologies have now been seen and made use of by necessity, and we no longer live in a world where people must be persuaded of the benefits of digitalisation. Now, back in person, it was time to gather and take stock of what has happened over the past years.

Legacy was undoubtedly a running theme at this 14th and final annual gathering of the AAL Programme community. Talks of what had been achieved, what had worked and what still needed addressing ran through many of the workshops and informal chats across the week. The final plenary session, hosted by AAL’s Nicola Filizola, focused on this legacy, bringing perspectives from across the board and hinting at how the themes carried for so long by the programme will be carried forwards in the coming years.

One theme that has developed and risen in prominence through the years of the programme is the so-called ecosystem approach, which is now taking a central position in discussions about how to bring our health and cares systems forward into the future so that they can help people live happy, active, and independent lives as they grow older. This concept has
reached maturity at just the right time as the AAL Programme starts to wind down, and the recognition that silos must be broken down and deeper collaboration encouraged is surely the sign of a sector that is very much coming into its own.

The workshops, as always, provided multiple opportunities for collaboration, interaction, and the kinds of conversations that happen during in-person encounters that make these kinds of events so valuable to those who attend. Technology demonstrations, discussion of best-practice, open-ended forums, and visions for the future were all on display in the workshops. These short-lived gatherings have always been a great strength of the annual events of the AAL Programme, and many will have left with unexpected new knowledge and connections to take back and apply in their work settings.

The exhibition hall was the physical focal point for EWAHA 2022, with booths from a wide variety of stakeholders showcasing the diversity that exists within the active ageing ecosystem in Europe. It provided not only a place for people to show and discuss the latest technologies and projects being explored, but also demonstrated how far much of this research has come. Many technologies are now being applied together in cohesive systems that will help older people live independently better than ever before, and the exhibition provided a snapshot of where this domain is right now, and where it might go in the coming years.

For any who have attended AAL Forums in the past, which have taken place across Europe from Bucharest to Bilbao, they will know that the closing ceremony and parties are always memorable, and this year’s event was no exception. Taking place at the striking Polsat Plus Arena Gdańsk, a giant golden football stadium that was constructed for Euro 2012, the night began with a light show and ended with dancing and music. This year also had the added poignance of being the last of these gatherings, and though this may be farewell for now, the legacy of the AAL Programme will live on through other activities that will ensure that the baton it has held for 15 years will continue to be carried through the 2020s.
There are few people more qualified to cast an experienced eye over the past 14 years of AAL activity than Dr. Gerda Geyer. She has been involved in the programme from its conception, joining in 2007 before it even started. As such she was involved in its design and launch and has been helping to shape its direction of travel ever since.

As president, Geyer’s time in Gdańsk was focused on promoting the activities AAL will be delivering over the next couple of years as it supports the projects it has funded in connecting and showcasing their impact. She was also in Gdańsk to promote the new European partnership on transforming health and care systems, which among its many expected outcomes aims to foster “high-quality digital services for all”.

Geyer is certain that there will still be many opportunities in the new programme to leverage the expertise gained in the AAL Programme. The AAL approach was one of the designing pillars for the new partnership, while it is clear that our health and care systems cannot be changed and improved without use of technology, where appropriate, and the benefits technology offers are now widely accepted.

As well as technology being a central pillar for the future of health and care, Geyer believes that a vital lesson learned from AAL will also be key – collaboration between enterprises and end users, together with research partners. “What will be vital in transforming our systems is an understanding that transformation in this sector cannot only be stimulated from the top down,” she says. “It needs to be pushed from the bottom up as well, so we will need to be active at both levels in the new programme.”

“The top-down approach will ensure people are thinking about things and providing the structure for change, the support, the management and
the strategic vision,” she continues. “But the people who adopt this change and put it into practice will also need to be involved.”

For Geyer, this collaborative approach adopted by AAL is one of the most satisfying outcomes of the programme. She believes the multi-disciplinary collaboration of enterprises with end-user organisations and end users themselves, along with research organisations, has created a new approach to innovation in this sector. Adopting this approach has, however, been a steep learning curve, particularly at the start of AAL in 2008, when involving users in research projects was still something alien to many.

“It was not the normal job description of a technician, for example, to talk to users and take on board their input and include it in the development of solutions they were working on,” she explains. “AAL attracted people who not only value these types of encounters but enjoy working in this way, who enjoy the collaboration and like to be challenged and to co-create
solutions to challenges they understand better because of this approach.

“I can remember the first AAL Forum, that took place in Vienna in 2009,” she continues. “It really was not clear whether we would be successful in attracting the right mix of people, enterprises, research organisations and, importantly, end-user organisations like care groups, municipalities, associations representing older people and insurance companies. It was certainly not a given that organisations like these would be interested.”

It seems that AAL emerged at the right time. It was becoming clear that technology would play a vital role in meeting the challenges of ageing populations, while people in end-user organisations were receptive to an approach where they felt that their needs were being taken seriously and that there would be benefits for them in being involved in finding solutions to the challenges they faced.

It was never plain sailing for AAL, however, and Geyer remembers some difficult conversations. “There were those on the other side of this argument who were very critical of AAL’s mission,” she says. “Many believed that while older people did need support in meeting the many challenges of ageing, they did not need technology. They didn’t understand it, couldn’t use it and technology took away human interaction that is so important.

“Now when I talk to most people in care organisations, for example, the overwhelming response is that they do need to adapt their processes and this means including technology, whether that’s to provide support for the older person or to make their own processes more efficient so they can save time and money that enables them to provide that human interaction.

“In other words, their overall view about whether technology needs to be part of supporting older people has changed since the start of AAL. I am not saying that is entirely due to the programme, but we have played our part at a time when digitalisation is everywhere.”

Of course, technology itself and the social landscape have changed a great deal since 2008, and it has been vital over that time for AAL to adapt its approach to maintain its relevance. As well as adapting its calls to focus on the pressing challenges of the passing years, AAL has also introduced many support actions to help its projects achieve what they have set out to do, whether that is collaborating with the right teams, involving the right end users or helping them develop strategies for their solutions to reach the market.

It has been a successful formula, which has led to many great successes, with commercial products on the market, services in use in care homes or hospitals and new systems in place that make care more practical and efficient. Geyer mentions some examples of AAL successes.

“There have been a great many brilliant solutions developed by AAL projects over the years,” she says. “These AAL products and services are now out there and are improving the lives of older people in some way or another.

“Think of the navigation systems for people with dementia, who are often afraid to leave their homes, while at the same time often have the urge to move around a lot. These systems, combined with some form of emergency call system connected to relatives or carers, allow those with dementia to have an increased
radius of mobility, while also making their care networks more efficient.

“Falls are also a big concern for older people,” she continues. “This has been a big topic for AAL and one that has delivered great success. Among the many devices to help limit the negative impact of falling for older people are sensors using artificial intelligence that detect falls and activate an alarm chain. Not only is this sort of technology valuable for the older person who will receive assistance quicker, but it is also helpful in the care home environment. These sensors mean that nurses don’t have to do night rounds, for example, which often disturb light sleepers, and this frees up their time to do other tasks.”

It is not only the technology that brings a smile to Geyer’s face when considering AAL successes. “What we also brought into this field was our pioneering ethical approach,” she says. “Ethics play a central role in all projects funded by AAL and in this respect I think this puts us in the avant-garde of RDI funding. There are many technology projects that do not take such a fundamental ethical consideration to the extent that we do. This has been a great success and is something that others will follow in the future.”

In terms of this future, Geyer is optimistic that the groundwork AAL has laid for encouraging and supporting active and healthy ageing will continue to evolve and the opportunities remain enormous. She is very proud of this.

“We have tried to contribute our share to ageing not being seen as a disease but seeing the opportunities it brings,” she says. “I think our interdisciplinary and ethical approach has been a huge success, but we can go further. I would like to see more artists involved, for example. Not only would this offer different perspectives on needs, but it would also help in reaching out to different audiences.

“The most beautiful moments for me in my professional life in the AAL Programme were when I understood that our approach does lead to change and can make a difference for the better in people’s lives.

“There are, of course, many open issues that still exist that will need to be addressed, but these are much broader issues that just those we focused on in the AAL Programme,” she concludes.

“These issues are more about inequality in society, about hierarchy and poverty. Not everybody lives the life he or she would dream of – that’s just a reality. We tried to contribute to address this reality and change certain dimensions to make things better, one step after the other. Sometimes, if you do that, you will have very nice surprises, and we certainly had plenty of those with AAL.”
The opening ceremony of EWAHA 2022 took place at the European Solidarity Centre, a museum and library in Gdańsk devoted to the history of Solidarity, the Polish trade union and civil resistance movement, and other opposition movements of Communist Eastern Europe.

The host for the evening opened the ceremony with a quote from Irish playwright George Bernard Shaw: “We don’t stop playing because we grow old – we grow old because we stop playing”. But in 50 years, as he pointed out, it is estimated that half of the entire EU population will be over the age of 65. The AAL Programme has throughout its history strived to help people live the lives they want to as they grow older – working, playing, and spending time with loved ones. This year, it welcomed delegates to its 15th and final annual event, which aimed to celebrate its success and take stock of all that has been achieved.

A welcome from Gdańsk

Mayor of Gdańsk Aleksandra Dulkiewicz took to the stage first to welcome the gathered delegates to Poland and expressed her happiness at meeting everyone in person after so many years of pandemic-induced separation. How poignant it was, she said, that we could all welcome Lech Wałęsa, ex-President of Poland and the man who spearheaded the Solidarity movement which has shaped much of what makes modern Europe, here at the European Solidarity Centre.

The topics being talked about at this event are global issues, she said, and as mayor of a city she is always thinking about how to create activities for older people who want to remain active. Gdańsk is the only city in Poland that has adopted a model of equality, which promotes equal treatment for all those who live here and those who will come here, no matter where they come from, where they were born, no matter their sexual orientation, whether they are young or old, able or disabled.

Hello – and goodbye – from AAL

Representing the AAL Programme was its president, Gerda Geyer, who outlined AAL's unique approach to funding projects – the combination of a strong business approach with ambitious involvement of end users to enable the co-creation of useful solutions.

This approach has distinguished AAL from other funding activities, and it still does. But of course, funding programmes all eventually come to an end, and we are now coming to it with AAL. Several projects have been launched recently that are expected to deliver good and useful solutions with real impact. In the next few years, the AAL programme will maintain an environment...
for ongoing and closed projects to meet and to profit from what they are learning.

Over the past two years, several AAL member countries have been involved in designing a new Research, Development, and Innovation activity. A co-funded programme that is called “Transforming health and care systems”. It is clear from the title that the ambitions of the new programme go beyond what the AAL Programme has aimed at so far, moving to the system level. Ecosystems will have to be taken into consideration if sustainable transformation is to be put in place. The AAL Programme approach – co-creation, end user involvement, and digitalisation – was influential in the design of this new programme. Thus, some of these elements will continue to play a role in the new co-funded partnership.

The view from the EC
Marco Marsella was at the opening ceremony representing the European Commission. He characterised the AAL Programme as a community of innovators working to deliver the benefits of digitalisation for older people. EWAHA, he said, builds on the results of the AAL Programme, with the goal of translating the opportunities of digital technology to support ageing and well being in general. He was very pleased to see innovators, researchers, public authorities all together in the same room.

The AAL Programme has been funded by the EC over last 15 years, and its spirit will continue in different forms. It is now time to take stock. It has funded around 150 projects with more than 700 beneficiaries, most of them SMEs, which would normally find it difficult to access such funds. 26% were end user organisations, which has been excellent for helping shape solutions that will help the people they are being made for. The programme has built itself to become a
We tore down the old order of the world, but that was for the purpose of building a new world, and a better one too.

recognised brand in Europe, leveraging technology and networking to great success.

Of course, he said, this is an event about health and care, so it is impossible not to talk about COVID-19 and the pandemic. COVID-19 has brought several difficulties to Europe, but it has also forever changed the way in which technology will be seen in health and care. “Digital” before the pandemic had to be discussed and promoted, but now everyone has now seen and experienced it and understands the benefits it can provide and how it can transform health and care. However, the challenge remains to modernise our systems and take technology to the citizens.

Our ambition today, he said, is to harness the power of health data. The EC has proposed an important regulatory package, the European Health Data Space, which will open possibilities in using data about people to improve quality of life for people who need primary assistance, for personalised medicine, for research, and for scientific discovery. The commission is also working in policy terms on its Care Strategy, which will support long term access to care but also the rollout of accessible technologies for the provision of health and care systems.

Finally, financial support will be changing forms. For instance, 140 new Digital Innovation Hubs will be funded, focusing on innovation, and health will be a part of this.

Tackling today’s societal challenges requires a holistic approach to transformation, he concluded. Community is the essential ingredient for making this happen, and Marsella stated
that he was convinced that with the instruments in place and the community we see today and beyond, we will succeed.

**A hero’s welcome**

It is one thing to hear a speech from a real-life hero. It is another to hear it at the very place of their most famous deed. This was what delegates at EWAHA were unexpectedly treated to with an appearance from Lech Wałęsa. He confessed that being invited to speak at the event had made him realise for the first time that he was now what many would consider an older person.

Having worked so hard all his life trying to change and improve things, he never expected to be at this point. The only way to face this, he said, was to continue as before and ask what can be done to change and improve things in this place that he now finds himself. Of course, he mused, not a lot can be done about ageing, other than trying to make it through to the other side in good health. “I will keep running from the ultimate and do what I have been doing until now.”

Looking back, Wałęsa spoke of the events of his infamous life. “We tore down the old order of the world, but that was for the purpose of building a new world, and a better one too. So far, it hasn’t gone very well, has it?”

Wałęsa expressed his exceeding preoccupation in events currently taking place beyond the eastern border of Poland in Ukraine, and said that while he did not have much to offer in words about the field of expertise being explored at this event, he hoped that its work would help support people that find themselves at this stage of their life to make their better and bearable.

**Cristina Andersson**

**AI and robotics**

Ageing is the only true democracy in the world – we all age, at the same rate, all the time. So said AI and robotics expert Cristina Andersson in her speech at the EWAHA 2022 opening ceremony. Europe is ageing fast, and no country more so than Finland – Andersson’s home country – which will see its population of over-85 year olds double in the near future. At present, Finland lacks a solid plan to deal with this silver transition, she said, and this is a disservice to people who deserve a dignified life after all they have given. To do this, we need to make the most of intelligent assistance – robotics and AI solutions – to take care of us all as we grow old.

Andersson described her dream for the future, where technology is used for wellbeing, for the best of people, and not in a way that side-lines the personal touch of people. Robots should be the intelligent helpers, assistants that can free time for the real professionals of nurses and doctors to take care of their patients. Sadly, she said, she did not see that currently happening in Finland.

Andersson then told the story of her visit to a neurorehabilitation centre north of Milan called Villa Beretta. Founded by nuns, her first impression was that of a stunning setting with a small castle and tower, but not one where you would expect to find the latest in rehabilitation technology. However, after a short tour and
some delicious Italian coffee served up by the nuns, she was then taken into the area where rehabilitation took place, and was blown away. Robots, exoskeletons, AI programmes that could turn data into activities. The technology was cutting edge, and the room was full of smiling patients.

“Villa Beretta has 700 patients. It is like a miracle. After my visit, I came home to Finland and found out my godmother had something broken in her hip. 83 years old, and she was in a rehabilitation hospital. I rushed to see her there. The corridors were empty, total silence.

My godmother was lying in a bed and was happy that I came, but that was it. I thought to myself, why are we not using these technologies I saw in Italy? I know Finland is not the only country in Europe struggling to get everyone taken care of, but the technology nowadays can provide that. So, I ask of all of you today to say let's make this happen! Let's take care of each and every person in Europe!”

**Growing old without dignity**

Last but not least were Magdalena Grzebałkowska and Ewa Winnicka, two women who have been changing conversations about the role of older women in Polish society with their influential podcast, Growing old without dignity. Both reporters and authors of non-fiction books by trade, their irreverent take on the process of getting old offered a refreshing take on the subject, and provided a lot of laughs along the way.

Winnicka spoke of her mother, a highly educated engineer, who retired at 50 when her first grandchild was born. This was the natural path for women at the time, said Winnicka, but now that she had reached a similar age, she felt unable to let go of her career, her dreams – her life. After conversations with her friend Grzebałkowska, who voiced similar concerns, they decided to start recording their conversations, and their podcast was born. As it turns out, they had tapped into one of the biggest unspoken conversations being had in Polish society today, and their podcast soared in popularity.

The two women’s address to the EWAHA 2022 audience covered a wide range of topics around ageing, with the general purpose of drawing people out of the usual discourse on the topic and encouraging people to think about ageing in terms of us, and not them. As we grow old, our needs change surprisingly little – we still want friendship, laughs, sex, mental stimulation, and compassion from others. As delegates departed from the opening ceremony, it was with a new perspective on the topic of ageing, but also with smiles on their faces.
In your speech you mentioned the new Digital Innovation Hubs and bringing together healthcare and technology in a new programme. Could you explain a bit more about that?

The EC provides support in this area in two ways. The first is financial support, but equally as important is policy support and coordination efforts. On policy support, as part of the EU Care Strategy we have a pillar dedicated to digital innovations for the provision of health care services. Financially, there are different avenues now that are taking up the legacy of the AAL Programme. Under the framework programme for research and innovations, you have the partnership on health and care. The transformational role of digital will be part of that partnership, as will much of what was part of the AAL Programme.

This area will really benefit from the new concept of the Digital Innovation Hubs – one-stop shops that will help companies to respond to digital challenges and become more competitive by providing access to technical expertise and
testing, as well as the possibility to ‘test before invest’. 140 of these centres will be available across Europe. The provision of innovation in the health and care sectors will be an integral part of these Digital Innovation Hubs. Essentially, stakeholders can go there to promote and carry out innovation, as well as to use testing and experimentation facilities for safety and for effectiveness.

**How will the legacy of the AAL Programme’s research and experimentation feed into future programmes?**

We are now running an evaluation, and a formal report will be issued by the commission towards the end of this year, and we work together with the AAL constituency a lot. At our level, we have heard feedback from the expert groups that we are running with the Member States, as well as directly from the AAL management services, which represents in a way the wish and the will of those that are contributing financially from the Member States to the AAL Programme. I think that we have managed to successfully gather those involved and the ideas into the space of discussions for the creation of the new programme.

What we hear, even in the evaluations that we are conducting now, is that the AAL Programme has been successful. For instance, in leveraging input from small and medium enterprises that otherwise would not get that possibility, because it’s very agile and very fast. But we also
realise in these evaluations that uptake remains a challenge, and so funding is important but not sufficient for what we want to achieve. You need to have events like this to encourage the deployment of technologies from the policy sectors. You need to make a case. So, the future is about making a case, it is about making a case for technological solutions that certainly have a cost but can provide benefits for the elderly. We need to listen and, in a way, create an environment where these solutions can be deployed for those who need them.

**Can you reflect a bit from your experience on the success of the AAL Programme? What do you see as its most successful aspect?**

I would say that it is the flexibility. The AAL Programme has managed to leverage, in a very specific field, efforts and commitment from different players that you would not normally expect. It has generated a network of players and of people that are very committed, and they are delivering excellent results in several hotspots.

So, certainly the fact that you have a diverse set of stakeholders is part of this equation, because putting together innovators and regional authorities from different countries is not an easy endeavour, and this programme has certainly managed to do that. There are 450 or so people here at this event, which is a testament to its effectiveness in this respect. However, deployment of the results of the programme remains a challenge. The big question is, how do we get these results to citizens and change their lives in a sustainable way?

**What is being done to ensure that the power of the AAL community that has been built over so many years is not lost?**

That is exactly what we are doing and one of the reasons why we are here today. The commission’s presence, and the fact that we are working with European reference centres of the European Innovation Partnership on Active and Healthy Ageing, shows the importance of gathering that community and providing other tools for them to deliver. The post-COVID19 recovery funds of the European Union are also an important instrument here. We hope that Member States have leveraged that fund for older people and for digital transformation. Digital is a huge part of that recovery fund, so we hope that that part of the budget is helping in this domain.
Making our health and care systems fit for an ageing population in the 2020s

As the AAL Programme draws towards its close, the second plenary session at EWAHA 2022 looked to draw experience from those working in the field at various levels to answer the question: how do we ensure our health and care systems are fit to serve our ageing populations as we move into the 2020s?
For 14 years now, the AAL Programme has been looking into the best ways to use technology to aid Europe’s transition to having older populations. As we enter the 2020s, and having been through the COVID-19 pandemic, demographic transition is now being felt more keenly than ever, both in our daily lives and in our health and care systems.

The second plenary session, hosted by AAL Programme Director Klaus Niederländer, looked to explore how we can make our health and care systems fit for the future, a topic which concerns us all. “It’s not just about when we fall sick – it’s about preventing us from falling sick in the first place,” said Niederländer in his opening statement. “We need to work out how to create more open systems that can deliver us out of crisis mode. To do this, we need to get out of our silos, collaborate more, and become part of systems where all of us have a role to play.”

The session took the form of a panel discussion followed by an open floor for questions and input from the audience. It was the ecosystem approach in action, and provided a holistic view of how people are looking to transform health and care systems in the coming decade, with
panellists and audience members offering up experiences from local, regional and national levels.

**A change of mindset in Central Denmark**

Pia Wiborg Astrup, Head of Health Innovation and Regional Development in Central Denmark, opened the session by sharing her experiences of how a change in mindset has helped develop the region's health and care services and has put it on the way to breaking its own silos all the way up to the international scale. Since 2007, her organisation has had responsibility for hospitals in the region and has closely collaborated with municipalities to make better healthcare systems for its citizens. But despite lots of collaboration and cocreation activities, they realised after a few years that they were still in silos, creating solutions too independently. They thus decided to look at ways to open up their hospitals to wider partnerships to address the challenges they were facing.

“We started trying to think about how to create partnerships and start acting more like an ecosystem than a single entity,” she explained. “We wanted to change our mindset and try to find solutions in places we might not usually look, and to sometimes hand over control to other stakeholders rather than trying to solve all challenges ourselves. Once we started thinking like this and reaching out to more people, we realised that we had a lot in common with other stakeholders in terms of our vision for the future.”

This coming together of stakeholders led to a branding partnership of public and private partners from the city of Aarhus, with the aim of creating and building up an ecosystem from the bottom up. This entity was called Healthcare Innovation Aarhus, but soon after its formation, Wiborg Astrup realised that an even bolder approach could reap greater rewards. “Our ambition is building as we collaborate more, and now we want to bring in partners from a national level, and also reach out internationally, as we are doing here today at EWAHA 2022, to open ourselves up to the possibilities and solutions that exist globally.”

**Inter-regional collaboration in Italy**

Nicola Scomparin was on the panel representing ProMIS, a network of Italian regions that has been involved in promoting healthcare initiatives between various parts of Italy. As far back as 2001, the Ministry of Health in Italy started encouraging regions to cooperate in the domain of healthcare. In 2011, it started organising activities which involved all Italian regions, with one person from each region being tasked with collaborating across the country. At first, horizontal collaborations were encouraged among regions, while Scomparin tried to identify the emerging synergies occurring in programmes and strategies among regions. After that, opportunities for internationalisation of the models were examined, with connections being made with European networks through workshops, courses, and funding.

In the domain of active ageing, ProMIS started supporting regions to apply to the calls of reference sites. In the first call, just five regions were awarded as reference sites, but now twelve regions have been awarded. “Our work was to create opportunities,” Scomparin explains. “Our Italian reference sites also started lots of training initiatives to support teams from other regions so they could understand their work and the value of the ecosystems. We now have
a sound regional network that cooperates. The next challenges will be to go another step up, encouraging cooperation between ministries, taking opportunities from the European Commission like the Technical Support Instrument Programme, and being ready to replicate and scale up."

**Ecosystems in the city**

With the Netherlands decentralising its care systems recently, Charlotte Krom, programme manager for care innovation in The Hague, has seen the city take on more responsibility for care. “We are responsible for most of the care that happens inside people’s homes,” she said. “This means making sure they are comfortable, providing assistance adaptations, and all sorts of other things. In the last couple of years, we have seen that a lot of hospital care is now moving towards the home, and this requires even more serious adaptation, not just in terms of the living environment, but also in terms of strengthening local communities to provide support.”

With older people who are less digitally literate, she said, it is sometimes not possible to ensure that everyone receives the level of care they should be. Reaching out through informal carers is one way to try and do this, as well as holding large events that provide transport to and from and book popular entertainers. “Sometimes it takes a little bit of creative thinking when working out how to reach people!” she said.

Krom has seen the role they have been playing in the city grow, and now they have found themselves spearheading the ecosystem that is developing to ensure that older people receive proper care. This has involved connecting with a diverse set of stakeholders including companies, investment funds, care organisations, and even banks and the postal service. “Having formed a governance structure for the ecosystem that is coming together in The Hague, we are now finding ourselves taking a step back as other stakeholders fill roles and collaborate independently,” said Krom.

**The future of health and care systems**

The second half of the plenary session saw a more open format in which questions and comments were welcomed from the audience. Many agreed with the running theme of the importance of diverse stakeholders for successful ecosystems that had threaded through the panellists’ talks, and the idea that each ecosystem must develop in the way that fits naturally for the local environment, culture, and circumstances. As much as we want copy-paste solutions that we can spread across regions for easy success, there must always be sensitivity and empathy applied to ensure that the wisdom and practical solutions that we find in other places are carefully and compassionately adapted to suit the needs of each place and people.

Niederländer neatly summarised the value of ecosystems after a discussion on the role of art in ecosystems for care. “Often it is the artist who first express the changes we need in society, and it is the politicians who are the last to come to the same conclusions,” he said. “We must always make sure we are ready to listen to and find solutions from places we might not expect if we are to make sure our systems are fit for helping us all age well in the coming years.”
Birgit Morlion, of the eHealth, Well-Being and Ageing Policy at the European Commission discusses the AAL legacy

When we talk about the legacy of AAL, we must remember that it started 14 years ago, looking at this topic from a technological perspective – how can digital technology help society face the challenges of ageing? However, in the meanwhile the world has moved on, and it’s not only about technology anymore. We must broaden the lens and see how we integrate these technologies into people’s homes, at the workplace and in health and care systems and bring them to other people. As such, we also need to broaden the community, bringing many different disciplines on board.

This is what we are doing now with the European Partnership on Transforming Health and Care Systems. It’s not only about research into technologies, but also about exploring how you bring these technologies to the right people – to the citizens, to the carers and to the families. You can see this holistic approach appearing in all European Commission policies now. It’s not only about digital anymore, it’s about digital in all policies, including health. The ‘Care Strategy’, for example, incorporates actions on supporting scaling-up and the integration of digital technologies.

A real asset of the AAL programme is that a quarter of the participants were end users, and it also attracted a lot of SMEs that do not usually participate in Horizon 2020 projects. With AAL, they are contributing to a real project, so it lowers the barrier for them potentially because it’s a very agile programme.

Although the last call from the AAL Programme happened in 2021, the programme is not finished yet. About 40% of the projects are still ongoing, so we will continue working on capturing the impacts of the programme, as it often takes a longer timeframe to see what the real effects on market penetration are. Everyone involved is still really committed to working on what remains of the programme and bringing the results of the research to those who really need it, so we still have a while yet before we can really grasp the full legacy of the AAL Programme.
One of the main purposes of the annual gathering of the AAL Programme community is to provide a space for people to meet, interact, share knowledge and perspectives, and think more deeply about the goals of their own work. The workshops have always been the epicentre of this, and EWAHA 2022 was no exception to this rule.
With the AAL Programme coming to an end, many of the workshops took the chance to look back and evaluate what had been done, what had worked, what hadn’t, and how this information could be taken forwards to help provide greater success in the future. Legacy was a word brought up time and time again, and the benefit of hindsight was brought to the fore in many of the interactive workshops across the two days.

In the workshop “Lessons from 15 years of developing ICT solution for seniors, collecting the steps for scaling up”, a selection of Dutch AAL project participants shared their insights and lessons learned over the years on developing and implementing innovations in the field of active and healthy ageing. These valuable insights aimed to help others identify possible next actions that could support the scaling up of digital solution in the years ahead.

In the plenary session examining the legacy of the AAL Programme, the support actions that supported competencies in business were hailed as one of its great successes. The workshop “Strategy, Segmentation, Storytelling and Social media: Our 4S approach to communicating research and raising public awareness” saw Insight Media bringing their expertise in science
and research communication to an interactive workshop that aimed to help people find and tell the stories of their work to create compelling content for promoting their products.

A key concept that has come to the fore in the modern AAL Programme is ecosystems. The “Ecosystem Health Check” workshop provided an introduction into ecosystem building based on the experience and practice of the ‘DEEP Ecosystem’ accelerator, to help attendees learn about ecosystem thinking and how to measure its usefulness. Adapting to an ageing population in Europe by mitigating the risks and optimising the opportunities requires more than individual actions or projects – it calls for collective action on a system level. The workshop provided a platform to help those interested get started with such a shift in approach and perspective.

In a decade which began with severe global isolation caused by the COVID-19 pandemic, the “Life is for Living!” workshop felt a timely exploration of the terrible blight that involuntary loneliness can have on people’s lives. To have friends and a social context is a basic human need, and the pandemic has raised the need to work across community and health care borders to reduce involuntary loneliness. Run by staff from Skellefteå Municipality who meet over 10,000 seniors each year and strive to prevent involuntary loneliness and inspire seniors to improve their healthy ageing, the workshop took a population-based approach to exploring how we can beat involuntary loneliness.

Differences in digital literacy across generations is a topic that has never been more important, and had a hard and unforgiving light shone on it through the COVID-19 pandemic. Although the proportion of older people in our populations is undoubtedly increasing, they are often excluded from parts of everyday life that are becoming ever more digitalised, such as e-banking, public administration, communications. The workshop “Freedom and inclusions are just one click away” looked to explore this by asking how younger generations are preparing for active and healthy aging, what information and practices are needed, and how the community
can mobilise itself in order to be aware for future ageing challenges.

Although some workshops took a broader view of the ecosystem at large, some were more focused on specific topics. For instance, one workshop looked at the availability of public toilets for the elderly and people with reduced mobility. The workshop was jointly organised by representatives of different AAL projects exploring different approaches to support users on the toilet providing both physical and cognitive support for people. The session focused on the inclusion of different groups in the process of co-designing toilet solutions. The panellists shared their methods, tools, obstacles and solutions. “One of the things we found was that the older people were ready to try new things,” said one of the speakers, “and are good at solving problems themselves.

The interactivity of workshops at these events over the years has developed immensely, and while in years gone by this may have largely constituted a small Q&A at the end of a session, many workshops now get people mixing and working in groups on new ideas and thought experiments to draw perspectives out of the gathered wisdom of the audience and bring fresh takes on old problems. One workshop, “The impact of dance on ageing from several perspectives”, took this one step further and had the entire group dancing together, which helped bring people out of their shell and provided them with first-hand knowledge of how dance can improve one’s mood.

Of course, the AAL Programme centres around technological solutions, and these were displayed and discussed in a number of the workshops at EWAHA 2022. Robots, virtual reality solutions, sensors, and age-friendly interfaces for computers, tablets and phones were all showcased, and it was incredible to see how some of these technologies have developed from what they were 14 years ago.

These workshops have become a cornerstone of the social and educational aspect of the yearly gatherings of the active ageing community in Europe, and although the AAL Programme is now coming to an end, the power of these small gatherings and the impact they have on those attending mean that they will surely continue in some form or another at future events within the community.
Juha Teperi of Tempere University is focused on the development of the EC’s new partnership programme called Transforming Health and Care Systems. This new partnership is using the legacy of the four previous programmes, including AAL. As such, I came to EWAHA not to mark the ending of something, but to promote the start of something new, which I am pleased to say is partially based on what AAL has achieved.

In terms of these achievements, what I have seen is that AAL has evolved and has reacted to the changing landscape of technology and ageing. This evolution has been a very positive thing. AAL started very much focused on the supply of technology to solve a problem, but over time has moved more towards the demand side.

In the new partnership programme, we will make a jump from this micro level, where we produce technologies for individuals and professionals and move towards the meso and even macro levels, when we can transform our health and care systems and use technology as a tool for this change. The difference is that we start from the system approach rather than the individual needs. I am not saying that the individual needs are to be less important, but we are struggling all over the world with the enormous pressure on our health and care systems, so we need to be able to transform them at the higher level. AAL, of course, has done very important work that we can use in this approach, but what we need to do now is build on this success and go to the next level.

The new programme is not just about ageing, it is about health and care systems as a whole. Of course, most of this applies to older people as the biggest users of these systems are older people, but we must remember, this is all of us, we are all ageing. The challenge is that our systems are not responsive to the real needs. We need to find new ways to organise and not only in terms of how we use technology. We need to consider how our services need to adapt and change.

What AAL has given us is the community to be able to enable this approach. We have people who are deep into their specific processes who are coming together, to learn and collaborate. That is imperative and we want to be able to have the same dynamics in the new partnership and I am convinced that many of the people who have been involved in AAL will be a part of it.
The final plenary session of EWAHA 2022 also marked the final plenary session of 14 years of AAL Programme-led events. It was fitting then, that the session focused on the AAL’s legacy, with panellists and audience members invited to share their experiences and thoughts on how these years have shaped the sector and how this influence will continue into the future.

The AAL Programme’s Communications Director Nicola Filizola was the moderator for this historic plenary, which he noted was symbolic both on a personal level, bookmarking his professional journey with the programme that began in 2001, and on an organisational level, as it gave time to reflect on the achievements of the programme and examine how well it had achieved its mission statement. The AAL Programme has invested in digital innovation to achieve three goals: improve the life of elderly people, strengthen the industrial base in Europe, and support the sustainability of health and care systems.

The aim of this session was to retrace and look back on the legacy of 14 years of the AAL Programme with the assembled panel of experts and the audience, looking at the impact of the research and taking stock for future ideas and helping to bridge this moment in the ecosystem with the future.

A history of the AAL Programme
Geja Langerveld, a former AAL Programme National Contact Person for the Netherlands, began the session with her reflections on the AAL Programme, why it was formed, how it evolved over the years, and where it is now. The Netherlands originally joined the AAL Programme in the context of an ageing society and the shortage of staff to their health and care systems that they could see coming even 15 years ago. They wanted to leverage digital solutions to ensure their systems would be sustainable moving forwards.

She summarised how the concept of health had broadened to include emotional and social well-being, and how this had shaped some of the ways in which the AAL Programme operated. The development of co-creation, business support actions, pilot implementations, and other practices have all been defining parts of the legacy of the programme.

From fledgling researcher to CEO
Following Langerveld’s summary of the development of the AAL Programme, it was then the turn of the assembled panel members to offer their reflections. Martin Morandell, CEO of Smart in Life, described his journey in the sector that saw him present at the first AAL Forum in Vienna as one of the youngest researchers there, frantically taking notes during the inaugural sessions. Since then, he has participated in many successful projects, notably winning the AAL award not once but twice, and eventually striking out on his own path by forming his own company.

“The first real piece of legacy I see is that we have proven we can bring benefits to people in the one of the most vulnerable phases of their life with smart and assistive technologies,” said
The impact of the AAL Programme: A legacy of 14 years
Morandell. “On top of that, even though some things may not have been turned into projects directly from the programme, the fact that all our research was published and much of that has gone on to improve quality of life for people is an excellent legacy in itself that we can be proud of. It might have been nice that more of these products ended up being produced by major European companies but, either way, our research is having real impact.”

Opportunities at a regional level
Maddalena Illario, chair of the European Reference Site Collaborative Network, described how, as a regional officer, the AAL Programme gave her the opportunity to meet companies directly. “Being able to meet and freely discuss and share ideas, and really make the needs of our regions known, was huge for me. These were needs not only of the end users, but also at the regulatory, administrative, and organisational levels that were needed to facilitate the transfer, adoption and scale-up of innovative approaches.”

Having a touching point for the most advanced innovations available in the community was one advantage that Illario said the AAL Programme had brought to her professional life, but she also expounded that fact that the programme facilitated administrative procedures that relieved the burden from regional organisations on implementing evaluation processes and facilitating the alignment of priorities between local and international levels.

Providing perspective from her current role, she said: “The reference sites are local ecosystems that engage a multitude of stakeholders, bringing together investors, research organisations, innovators, local health agencies, and public authorities. Creating communities that provide a facilitating element to bring innovations closer to people and push people together who have shared goals provide so much value. Innovators need this to understand the complexity of the public health systems they are working with, and this approach is something that can be taken forwards into the future to help achieve transformation in health and care systems.”

Evolution of the AAL Programme
António Lindo da Cunha, director of the Automation Laboratory at IPN in Coimbra, explained how the evolution of thinking within his organisation mirrored the changes that occurred throughout the AAL Programme in terms of outlook and strategy. Beginning from a point of creating technology-driven projects
to solve problems, it was then decided that end users must be involved, the only stakeholders that could truly validate and prove the value of the solutions being created. After this, the realisation came that even if beautiful solutions had been co-created with end users that solved real problems, it was no use if they could not be sustained and multiplied and turned into successful businesses. This is where the strength of diverse consortiums came into play, and the AAL Programme has a truly unique legacy in its approach to projects in this respect, bringing in SMEs, academics, end user associations and others to leverage knowledge and ideas from all perspectives.

Geja Langerveld interjected this point, saying: “The programme learned a lot at the management level by picking up signals from the community. It was accepted that we should have companies within the consortium to try and encourage market uptake, but after a while it became apparent that there were gaps in knowledge – marketing and sales experience were lacking. This is how the support actions eventually started. AAL2Business, for example, provided so much value through its workshops on business coaching and teaching how to pitch to investors. The toolkit on co-creation throughout the different stages of project was also excellent for pushing the innovations from the programme in the right direction.”

**Thoughts from the AAL community**

At this point, the session opened for audience members to provide their perspectives on the legacy of the AAL Programme. Birgit Morlion of the European Commission mentioned that with the evaluation of the AAL Programme that was now taking place, the community that had been the portfolio support actions for continuous learning, and the mechanisms for receiving feedback from the ground to the top levels, were all greatly admired. “The fact that projects are not isolated in silos, and that walls have been torn down between sectors, is a big achievement,” she said.

Sofia Moreno-Pérez echoed the thoughts of António Lindo da Cunha, emphasising how AAL had evolved from a “solution looking for a problem” approach to a much more all-encompassing ecosystem that encouraged co-creation, business development, ethical introspection, interoperability, and the need for open platforms. “I remember hearing about these concepts at AAL Forums, and then three years later everyone would be doing them. In this respect, the AAL Programme has always had its eyes trained on the future and has consistently helped to guide the community towards better practices.”

Many others contributed to this poignant reflection on the last 14 years of work, but it was up to Nicola Filizola to wrap up the session with a heartfelt message to everyone who had been involved. “It is great to feel that we have ended this final plenary session on an ambitious note, as clearly this is the end of an era in one respect, but people are ready to do so much more. To all the SMEs, large industries, policymakers, local authorities and organisation and other entities that have helped make the ideas and goals of the AAL Programme become reality, I thank you.”
While speakers in the workshops and plenary sessions were able to voice their fascinating thoughts about all things AAL during EWAHA22, we wanted to gather as wide a cross section of opinion as we could, so we took to the floor to talk to delegates. With the AAL Programme drawing to a close we wanted to hear what people thought were its finest achievements and how we can leverage its impressive legacy in the new era for health and care in Europe.

**Delegates’ opinions**

“Overall AAL has been a success, but I am afraid that the word ageing will disappear from the new programme and that is a shame. AAL has inspired a whole generation of researchers and SMEs who didn’t know about designing products and solutions for older people before and now they do. There is a danger that a lot of this experience and knowledge will now be wasted. Even though technology has changed, user requirements and the challenges older people face remain the same. We need to transfer the knowledge we have built in AAL to a new generation because if we don’t, it may well disappear.”

Ad van Berlo

“I have met some interesting people through AAL, while the community aspect of the programme is extremely important. Bringing technology together with the researchers, end users and industry is very valuable. This is what needs to continue in the new programme.”

Daniel Bolliger

“AAL has allowed many people to focus on things that otherwise they wouldn’t have had the time or money to focus on and this has enabled many to explore new markets. What we are focusing on is what older people can still do by themselves, rather than what they can’t do. I think this is an important market as we are looking at what can empower people as they are ageing. By focusing on strengths, we can see what makes people valuable to society.”

Lindsey Vermeer
“Although some of the questions being asked over the AAL years may have remained the same, one of the really valuable things we have learned from our research is that the answers are not always the same. Local culture, tradition, and the specific characteristics of individuals play a huge role in how people interact with devices and apps, and so moving forwards we should remember that trying to create solutions that work for everyone is perhaps not the answer. Flexibility and personalisation may be the key to adoption.”

Elisabete Pitarma

“The programme started as a very closed and strict structure, but evolved to become much more flexible, open and collaborative. A big success has been the introduction of support actions, which have helped projects with their commercialisation potential. Matching end user involvement with a short time to market is not an easy thing to do so we must continue to look for the right way to approach this. We have a vibrant community of many stakeholders sharing ideas and content and we should continue to collaborate. I am not sure that the programme itself has contributed to people living better quality lives, but it has surely brought something positive to the research community in terms of collaboration, the consideration of end-user needs and a much better understanding of commercialisation strategies.”

Marco Corollo

“I have loved working with AAL. We have been able to open up to seniors in our project and they have loved what we do. We see them smile and really enjoy what they are doing with us. The importance of AAL for us is that there is so much knowledge in the community. They bring a lot of older people to the table they can motivate each other. This has also given us an opportunity to engage with industry and I hope bring our project to even more people.”

Franziska Rüegg

“I have many projects focused on ICT and ageing, and I started working with AAL recently because I wanted to create real impact and reach a large target audience. So, I am very sad that AAL is coming to an end. This community should go on. Of course, we have the network, but I think we need an official body to keep us together, so I am hoping this will happen. Our society and systems are crashing, there are more older people and fewer younger people. We must do something, and human-centred technology is a solution.”

Ulrike Liebert
“The good thing about AAL is that it encourages open innovation. Before AAL, we would focus on the research and the design and not the business modelling. AAL gave us that focus so we knew that in two or three years our product should be on the market. Now, all our most successful products on the market in the Netherlands have their origins in AAL. In terms of the future, it is a big mistake to see that ageing is not a specific topic in the new health and care programme. Society has a huge problem right now in terms of numbers of carers and a shifting demographic and we need to be investing in these solutions. While 10 years ago we were starting out a bit in the dark, we now know which solutions to invest in, particularly those that help carers and care organisations. The private sector won’t risk that investment alone, so we need public investment as well.”

Hank Herman

“AAL provides opportunities to meet new people who share the same mindset. There is a real community involved, with great knowledge about developing technology as well as the best way to involve end users. AAL has funded a lot of projects and they are all a piece of the puzzle. We are now at the stage when someone has to say we have all these great results, so we need to work together and combine these ideas to do something even bigger in the ageing well market.”

Jarno van der Woude

“It has been important that AAL projects consider the user perspective as this is something often overlooked. We should always be bringing to market things that these users need, want to use and are prepared to pay for - so we have to ask them. There is a problem with conferences like the EWAHA and others, however. Everyone attending is on the inside - we need to include more from civil society, we need to open up. People are receptive to new technologies, so they need to know what is available and the benefits they offer. Then they will share ideas. But there is no interface between us in here and real people.”

Brigitte Buhrlen

“It was great to work together with so many countries and see that the problems we all face are similar but that with different regulations in place and different approaches we can get different ideas about how to address these problems. It is a pity now that it is not clear how this approach can continue.”

Edith Birrer

“At the start, AAL was very technically driven, but it has evolved to combine the technical with social science and this has been the great advantage of the programme. It has enabled us to create valuable networks and bring different stakeholders together. With it ending, it will be important that we don’t lose these connections or the knowledge they have generated. I hope we can find another way of continuing these activities together.”

Clemens Nieke
“The market is difficult, the environment is difficult, you have to know a lot about the users. Then there is the support system, which is very strong. If you have a nice idea, it is very difficult to bring it to market in this sector. It is not like bringing a product to the consumer market, as there are all these stakeholders involved. That’s why many AAL projects end up with a nice prototype, but with no money for investing it into the market. Even the products that do make it to the market are not widely known about, even in relevant institutions. As the focus shifts to care and nursing, it will be interesting to see how the AAL community reacts. Technology is more widely used, more available and cheaper than it was when AAL started, but the question remains on how it is applied, how people get to know about it and who pays for it.”

Peter Mayer

“As well as raising awareness about the challenges of ageing, the AAL has enabled the development of a real community and structure to develop products that are close to a market that is now there. It exists. If you think back to 2008, there was no market for these products – it was a case of a solution looking for a problem. In this sense, AAL was not always so efficient in funding projects, with many starting with the vision of getting a product to a market that wasn’t ready. Of course, we look back with hindsight, which we didn’t have then. Now we have the market, so we need to focus on demand-driven innovation. We should follow the money and develop with an eye on those who are prepared to pay for these solutions. The money is there, in the public sector, industry and with the public. Develop for them and work with industry who can adopt products and scale them up. This is the ecosystem we need.”

Sofia Moreno-Perez
THE LAST DANCE
AAL’s final party

See you soon . . .
In the great tradition of AAL events, delegates gathered for the end of our three days together for a final party, held at the impressive Gdańsk football stadium. Of course, this was the AAL party to end all AAL parties and so delegates danced out in style - for now, at least!