INSTITUTE FOR INNOVATION AND TECHNOLOGY

AAL PROGRAMME

5th edition of the AAL Programme Impact Assessment

Final Report 2026

Dr. Julian Stubbe, Dr. Sonja Kind, Anastasiia Volianska,
Dr. Bettina Schmietow

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Institute for Innovation and Technology (iit)
within the VDI/VDE Innovation + Technik GmbH
Steinplatz 1
10623 Berlin, Germany

www.iit-berlin.de

Contact:
Phone: +49 511 475583-27
E-Mail: stubbe@iit-berlin.de

photocredit:
Kaspars Grinvalds/adobestock,
Dragica/adobestock

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Inhalt

Executive summary

Europe's demographic transformation continues to place profound pressure on health, care and social systems, while at the same time opening new opportunities for innovation. Over more than a decade, the Active and Assisted Living (AAL) Programme has addressed this challenge by supporting the development of digital solutions that enable older adults to live independently, participate in society and receive better support from their care networks. As the programme concludes, this fifth edition of the AAL Impact Assessment provides a comprehensive review of its final generation of calls (2018–2021) and reflects on AAL's impact and relevance for future European innovation partnerships.

The assessment draws on a mixed-methods approach combining a quantitative online survey and in-depth qualitative analysis. All 52 projects funded under the 2018–2021 calls were covered, with 89 fully completed questionnaires providing a representative evidence base. In addition, 15 projects were analysed as success stories, capturing different maturity levels – from market-ready products to early-stage concepts – and illustrating how AAL-generated value unfolds beyond the formal funding period. Together, these methods allow for a robust assessment of outcomes, impacts and systemic lessons.

Strengthening Europe's industrial base

The findings show that the AAL Programme has made a tangible contribution to Europe's innovation and industrial landscape in the field of digital ageing and care. Around 15 % of surveyed projects resulted in at least one product or service being launched on the market, while more than half of respondents reported having achieved substantial progress towards commercial or strategic objectives. AAL funding significantly accelerated development processes, with many participants stating that their solutions would not have reached the market – or would have done so much later – without programme support.

AAL's contribution extended beyond individual products. Participants reported strong learning effects in areas such as user-centred design, technology development, business modelling and internationalisation. Support actions, particularly AAL2Business, proved effective in strengthening commercialisation strategies and business-model development. Importantly, projects that built modular solutions on existing platforms or integrated results into established product portfolios showed the strongest pathways towards market uptake. At the same time, the assessment highlights persistent challenges at later stages of innovation, especially regarding certification, regulatory compliance and scaling.

Improving quality of life for older adults and their networks

Across the portfolio, AAL-funded solutions consistently aimed to enhance autonomy, safety, wellbeing and social participation of older adults. Survey results indicate positive effects on both mental and physical wellbeing, with many respondents reporting that users were able to remain independent, socially engaged and confident for longer periods. These impacts were reinforced by the success stories, which demonstrate how solutions supported everyday activities such as communication, mobility, rehabilitation, cognitive stimulation, cultural participation and safe living at home.

A defining strength of the AAL Programme lies in its user-centred approach. Continuous involvement of older adults, informal caregivers and professional carers in design and testing phases significantly increased relevance, usability and acceptance of solutions. More than 80 % of respondents confirmed that user involvement improved both adoption and relevance. The success stories underline that meaningful co-creation – embedded throughout the project lifecycle rather than limited to isolated tests – was a key determinant of impact.

Increasing efficiency and sustainability of support and care systems

The assessment provides evidence that AAL solutions contribute to more efficient and sustainable care arrangements when they are embedded in existing workflows. Respondents reported reduced caregiver workload, improved coordination and earlier detection of risks, enabling professionals to focus more on meaningful human interaction. Several solutions supported remote monitoring, rehabilitation and decision-making, helping to extend care beyond institutional settings and reduce unnecessary interventions.

Institutional actors, particularly care providers and public organisations, remain central drivers of adoption and payment, while individual older adults increasingly benefit as end users. This confirms the importance of aligning innovation with organisational realities of care systems, including reimbursement structures and professional routines.

European added value and ecosystem effects

Beyond project-level outcomes, the AAL Programme generated significant European added value by strengthening networks and building a shared innovation ecosystem. Cross-border collaboration enhanced participants' understanding of different care markets, regulatory contexts and user needs. Nearly all respondents agreed that the knowledge gained through AAL is relevant beyond national contexts, and many continue to benefit from partnerships established during their projects.

Support actions such as the AAL Forum and the European Week of Active and Healthy Ageing played a crucial role in fostering mutual learning, visibility and community building. These ecosystem effects represent a core impact of the programme and a key asset for future European initiatives.

Persistent barriers and lessons for future programmes

Despite these achievements, the assessment identifies enduring systemic barriers. The most significant challenges remain the financing gap between prototype development and market entry, increasing regulatory complexity – particularly in health-related domains – and fragmentation of European care markets. These barriers limit scalability and prevent many promising solutions from achieving wider impact.

The lessons from AAL are therefore clear. User-centred, cross-border R&I funding is highly effective in generating relevant and innovative solutions, but it must be complemented by instruments that address later-stage needs. Future partnerships should integrate support for certification, regulatory navigation, scaling and follow-up financing, while continuing to invest in ecosystem-building and long-term collaboration.

Concluding perspective

As it concludes, the AAL Programme leaves behind a strong impact: a mature, user-oriented and internationally connected innovation ecosystem for ageing and care. Its experience demonstrates that meaningful impact emerges when technological development, user needs and system conditions are addressed together. Building on these insights, future European and national initiatives have the opportunity to move from successful innovation towards sustainable, large-scale adoption – ensuring that digital solutions for ageing deliver lasting societal and economic value.

1 Intro

Europe's demographic change continues to reshape how societies think about ageing, independence and care. As the population grows older and the demand for care services rises, technological innovation has become an essential driver for maintaining quality of life, supporting caregivers and strengthening the resilience of health and care systems. Against this backdrop, the Active and Assisted Living (AAL) Programme has, for more than a decade, acted as a European catalyst for solutions that enable older adults to live independently, participate in society and benefit from digital support tailored to their needs. With its combination of research, innovation, user involvement and cross-border collaboration, AAL has helped advance a field that is increasingly central to Europe's social and economic future.

This fifth edition of the AAL Impact Assessment examines the results of the programme's final generation of calls (2018–2021). It brings together quantitative and qualitative evidence to assess the programme's contribution to its three overarching objectives: (1) strengthening Europe's industrial base, (2) improving the quality of life of older adults and their networks and (3) increasing the efficiency and sustainability of support and care systems. The assessment also serves a forward-looking purpose. As European and national innovation-funding bodies shape new initiatives in the fields of ageing, health and digital transformation, the findings presented here provide insights into what works, where barriers remain and which elements of the AAL approach hold strategic value for future partnerships.

The analysis builds on data collected through an online survey of participants from 52 completed AAL projects, achieving full project coverage and a representative sample of 89 fully completed questionnaires. To complement these results, 15 AAL projects were selected as success stories, covering different maturity levels – from market-ready solutions to promising early-stage concepts. Semi-structured interviews with project coordinators and partners provided additional depth, illustrating how AAL-generated value continues beyond the formal funding period and highlighting mechanisms that enable or hinder long-term impact.

The following report synthesises these findings and presents them along the programme's three main impact dimensions. It examines market creation and technological development, effects on end users and caregivers, and contributions to care-system efficiency and ecosystem strengthening. It concludes by outlining lessons learnt that are relevant for policymakers and funding bodies designing future innovation programmes in the field of active and healthy ageing.

2 Activities and objectives of the AAL Programme

2.1 Structure and objectives of the AAL Programme

Founded in 2007 by 14 member organisations, the AAL Association supports and finances the development of technologies and services that improve the lives of older adults. As Europe's population continues to age, new societal challenges emerge – ranging from quality of life for older adults and carers, to labour market implications, to the need for a strong AgeTech sector and silver economy. The AAL Programme responds to these challenges by fostering a shared approach across participating countries and partners, transforming demographic pressures into opportunities and stimulating innovation.

The programme is co-financed by participating member countries and the European Commission. Its funding activities have now formally concluded, and the programme is expected to close as planned in 2026. The 2021 call constituted the final call for proposals, and by 2025 all funded projects had been completed. Over its duration, the AAL Programme was co-funded by the European Commission (through Horizon 2020). A total of 25 countries participated in the programme. At the beginning, there were 23. Canada and Taiwan joined later on. The programme comprised a total budget of approximately €700 million. The three overarching objectives of the programme are shown in the following figure (Figure 1).

Figure 1:
Objectives and target groups of the AAL Programme

The programme activities consists of three elements: collaborative R&I projects involving various EU countries, AAL Support Activities, and activities at the national level (Table 1). In focus of this assessment are the collaborative R&I projects.

Table 1: Elements of the AAL Programme

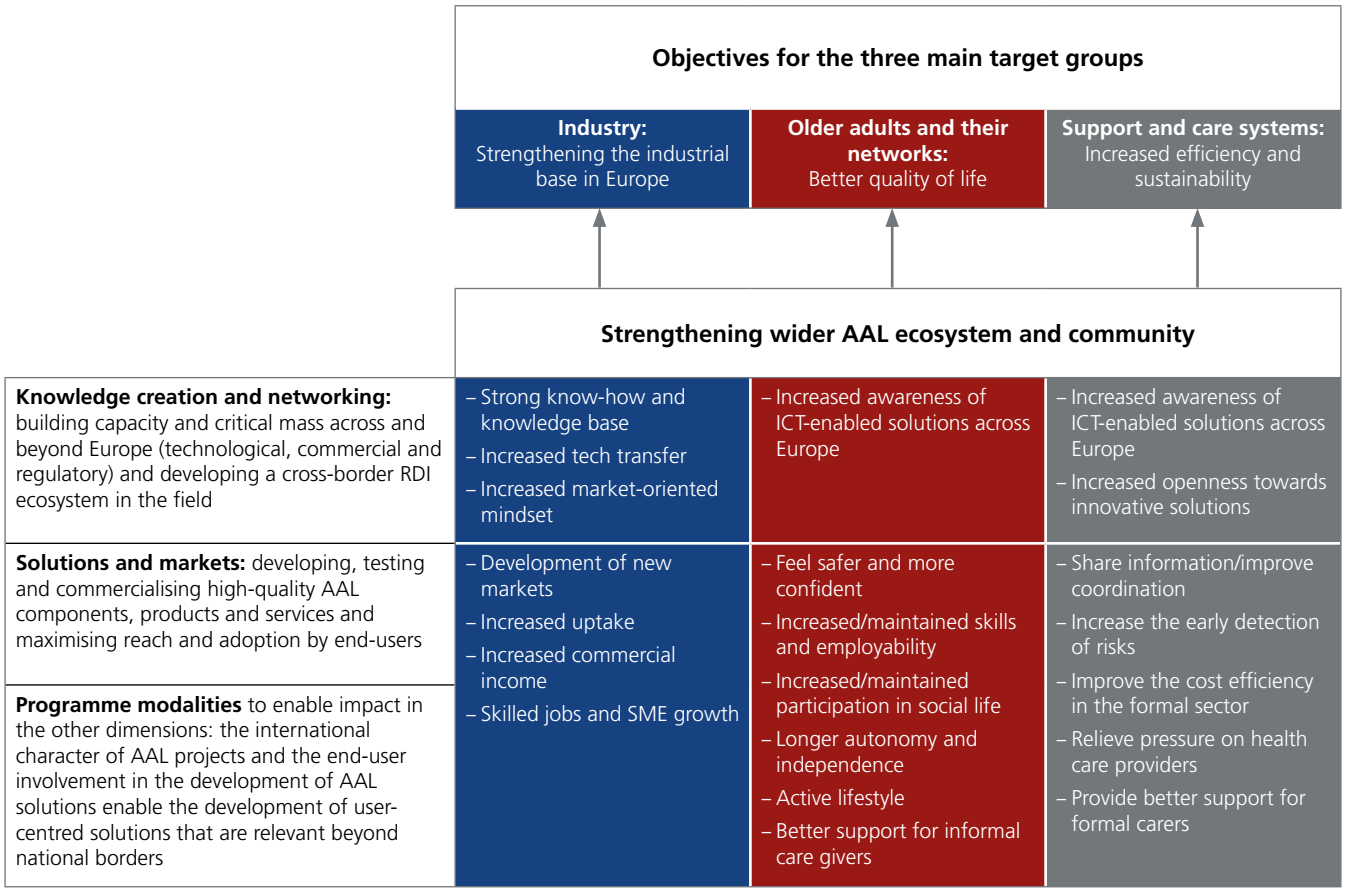
Collaborative R&I projects	AAL Support Activities	National activities
In funded projects, industry, researchers and end-users from different Member States work together to develop market solutions. Since 2008, **309 projects** that aim for end-user involvement and a market introduction within 2 to 3 years, have been funded in the framework of the programme.	Support Activities target participants and help them with different aspects of the project. The main Support Actions are: – AAL Forum – AAL2Business – Smart Aging Prize – AAL Challenge Prize.	In addition, the AAL Programme connects different activities at national level that contribute to achieving its objectives. These include e. g. national programme calls, policies, events, workshops and support mechanisms.

The AAL Central Management Unit is responsible for implementing and managing the programme, including its support actions. Funding is provided jointly by national agencies and the European Commission. Eligibility is assessed at national level, while proposal evaluation, monitoring and reporting are carried out centrally.

Figure 2 illustrates how the AAL Programme seeks to achieve these impacts. It distinguishes three pathways through which change is expected to emerge:[1]

- **Knowledge creation and networking:** Building capacity and critical mass across and beyond Europe;
- **Solutions and markets:** Fostering the development of innovative ICT-based solutions and markets for ageing well;
- **Programme modalities:** Using the AAL Programme modalities as a lever to create impact in the other dimensions (i. e. knowledge creation and networking, and solutions and markets).

Figure 2: Objectives and paths of the AAL Programme



1 A detailed intervention logic, including outputs, outcomes and impacts, is presented in annex A.1.

This funding logic provides the framework for the activities and funding modalities implemented through the AAL Programme, particularly its calls for collaborative project funding. This assessment focuses on the R&I projects supported in the final generation of calls from 2018, 2019, 2020 and 2021.

2.2 Calls in focus: 2018, 2019, 2020 and 2021

According to the AAL Legacy Study (July 2025)[2], the final generation of AAL calls – 2018 to 2021 – reflects a period of consolidation, strategic repositioning and increasing technological maturity within the programme. These last calls built on more than a decade of programme evolution and were shaped by shifting societal needs, emerging technologies, and lessons learned from earlier funding rounds.

From 2019 onward, the AAL Programme increasingly emphasised challenge-oriented problem solving, culminating in three thematically distinct but interrelated calls:

2019 – Sustainable Smart Solutions

This call reflected AAL's move toward integrated, sustainable digital ecosystems, promoting solutions addressing long-term care needs, daily living support, and ageing in place. The emphasis was on smart home integration, safety, and preventive monitoring, responding to challenges such as chronic disease management and mobility decline.

2020 – Healthy Ageing with Digital Support

A broader and more holistic call, expanding from disease- or impairment-focused tools to wellbeing, self-management, and preventive health. The themes aligned strongly with AAL's nine challenge categories, including cognitive decline, social isolation, and caregiver strain (see Table 2).

2021 – Inclusive Health & Care Solutions

The most targeted of the late-phase calls, it foregrounded solutions for formal and informal care, interoperability of care pathways, and digitally supported collaboration between actors. This shift was influenced by the programme's long-term learning on ecosystem needs and user involvement dynamics.

Across these years, the 2020 call represented the widest thematic scope, whereas 2021 marked a return to more defined care-related challenges. The Legacy Study identifies nine key challenge categories addressed across the programme's history, and these remained central to the 2018–2021 period (Table 2).

Table 2: Key societal challenges addressed by projects funded through calls 2018–2021, identified by the AAL Legacy Study

Key societal challenges	
– Reducing caregiver burden	– Adapting the home environment
– Managing chronic diseases	– Preserving physical function and mobility
– Mitigating cognitive decline and mental health issues	– Improving safety and emergency response
– Sustaining daily living and autonomy	– Compensating for sensory impairments
	– Reducing social isolation

The final calls increasingly bundled these challenges into combined, multi-domain use cases – an evolution from earlier single-function prototypes toward interoperable, ecosystemic solutions.

Throughout the 2018–2021 calls, the AAL Programme intensified its emphasis on end-user participation, multi-stakeholder consortia, and ecosystem alignment – a response to lessons learnt from earlier project waves.

Further, the Legacy Study underscores a marked increase in involvement of professional care providers, local authorities, and service organisations in later calls (linked to call themes such as the 2021 Inclusive Health & Care); a shift from small, experimental living-lab pilots to larger-scale real-life testing involving more diverse user types; and an evolution in the AAL network, with increasing cross-border and cross-sector collaborations, widening the programme's systemic impact.

2 Salvador, Eduardo; Carbonnelle, Quentin; Braito, Nazareno; Durinck, Eveline (2025): AAL Legacy Study. Final report – Commissioned by AAL Association.

2.3 Projects in focus of the assessment

2.3.1 Impact assessment

The 2025 AAL Impact Assessment examines projects funded under these 2018–2021 calls. The online survey was conducted between 8 and 29 September 2025. A total of 343 project participants were invited. The assessment sample includes 52 completed projects (see Table 3):

- 3 projects from the 2018 call;
- 13 from the 2019 call;
- 16 from the 2020 call, thereof one small collaborative project (6 %);
- 20 from the 2021 call, thereof two small collaborative projects (10 %).

Only projects not already included in previous assessments were addressed from the 2018 and 2019 calls, while the 2020 and 2021 calls were covered in full. The key survey scope are (see annex A.2 for full description):

- All 52 projects were represented in the final dataset,
- 89 fully completed responses were collected (response rate: 26 %),
- The survey identified 13 launched products/services.

Small collaborative projects (SCP) were funded since the 2018 call. In the examined sample there are three such projects.

The main objectives of the small collaborative projects were the exploration of new ideas, concepts and approaches for ICT-based solutions for older adults. Furthermore, they should reach out to new stakeholders for inclusion in (future) development of AAL solutions, build strong collaborations with end-user organisations, support community building with new customers and possibly create shared agendas.

Small collaborative projects had a duration between 6 and 9 months (instead of max. 12 to 30 months) and a maximum co-funding budget of € 300.000 (instead of max. € 2.500.000).

Because the number of responses concerning impacts of products and services is in some cases small, results described in percentage – particularly in chapter 3.1 – should be interpreted with caution.

A large share of survey respondents (42 %) came from the 2021 call, reflecting lower participation rates among partners from earlier calls.

In selected aspects, results were compared with the third[3] and fourth[4] AAL Programme assessment.

Table 3: Projects addressed by the assessment by call, number of partners in brackets, projects identified as success stories highlighted in bold; SCP = small collaborative project.

Call 2018	Call 2019	Call 2020	Call 2021
frAAgiLe (8)	ACESO (8)	ALTO (4) | SCP	AAL4ALL (A4A) (7)
CoachMyLife (7)	**APH-ALARM (7)**	Anathema (4)	**AGAPE (9)**
SAVE (7)	**DIANA (7)**	**Care about Care, C^C (8)**	**BeauCoup (10)**
	eSticky (7)	**CleverGuard (8)**	Buddy4All (6)
	GUARDIAN (10)	COCARE (4)	CAREUP (9)
	GUIDed (7)	CoSoPhy_FX (5)	ChroNoct (4)
	H2HCare (5)	COTIDIANA (5)	CREATE (7)
	iCan (6)	Easierphone (6)	DemiCare (10)
	LEAVES (9)	EXERGETIC (5)	Emilio (9)
	mHealthINX (10)	FaceRehab (5)	**engage (6)**
	QEoL (6)	FORTO 2.0 (5)	**ORACIA (5)**
	ReMember-Me (8)	HAAL (7)	PerciLight (6)
	T4ME2 (9)	HEROES (6)	PRECISE (8)
		NEST (5)	**PREPARIO (6)**
		SI4SI (5)	**Project Alpha (4) | SCP**
		WisdomOfAge (6)	**Recovery Fun (7)**
			Sens4ME (7)
			SOAPTIMIST (5) | SCP
			SOLARIA (8)
			ISHA (8)

3 van Hoed, Miriam (2021): Third edition of the AAL Programme impact assessment. Final summary report – Commissioned by AAL Association

4 van Hoed, Miriam; Legein, Emma; Durinck, Eveline (2023): Fourth edition of the AAL Programme impact assessment. Final summary report – Commissioned by AAL Association

2.3.2 Project success stories

For the purpose of this assessment, a sample of 15 projects was identified to describe success stories, each offering particular learnings on how AAL-funded initiatives generate value beyond their formal project period. The sample intentionally represents a broad spectrum of maturity levels to capture different pathways through which "success" can emerge in the AAL ecosystem.

To reflect this diversity, the projects were categorised into three maturity groups:

- **AAL Products and Solutions** – successful projects that are close to or already reaching the market.
- **AAL Projects** – initiatives that still require a final push in terms of investment, partnerships, or validation to achieve market entry.
- **AAL Concepts** – promising ideas and prototypes that are not yet market-ready but have generated relevant knowledge, innovations, or organisational learning.

By distributing the sample across these maturity stages, the selection intentionally differs from the list of 13 launched products/services identified in the quantitative assessment mentioned above. This broader approach allows the study to capture a richer understanding of "success" in the AAL context – ranging from organisational development, research advances, and strengthened end-user engagement to commercial achievements such as market introduction or the creation of new commercial entities (e. g. spin-offs).

The success story assessment followed a qualitative approach based on semi-structured interviews with project coordinators or key project representatives. Interviews lasted approximately 30 minutes and were conducted in November and December 2025. The conversations focused on topics such as:

- Lasting effects of the project on end users, organisations, or markets;
- Success factors and barriers in ensuring sustainability beyond the funding period;
- The role of partnerships and networks in maintaining impact and visibility;
- Reflections on how future AAL projects could be strengthened with regard to long-term relevance and implementation.

Across the 15 projects, the success stories collectively address all challenge areas identified by the AAL Legacy Study, although many projects contributed to more than one category. The most frequently addressed challenges were: Reducing social isolation, reducing caregiver burden, managing chronic diseases and sustaining daily living and autonomy.

A detailed description of each case study – including project-specific solutions, user groups, technological components, and narratives – is provided in a separate publication dedicated to the success stories.

In this report, chapter 4 focuses on cross-cutting insights derived from the sample: commonalities across the success stories, mechanisms through which impact emerged, and different types of added value generated by AAL project funding. This includes an analysis of how the projects contributed to the programme's three overarching objectives (strengthening Europe's industrial base; improving quality of life, autonomy, social participation; increasing the efficiency, sustainability, and digital readiness of care and support structures).

3 Impact of the AAL calls, projects and support actions

The following chapter focuses on the findings of the impact assessment and the quantitative results of the online survey. It is structured according to their impact on the programme's three overarching objectives: contributing to strengthening Europe's industrial base, contributing to better quality of life, and contributing to an increasingly efficient and sustainable care systems. Further, the chapter captures the added value for ecosystems and lessons learnt on challenges and reducing barriers.

3.1 How AAL contributes to the strengthening of Europe's industrial base

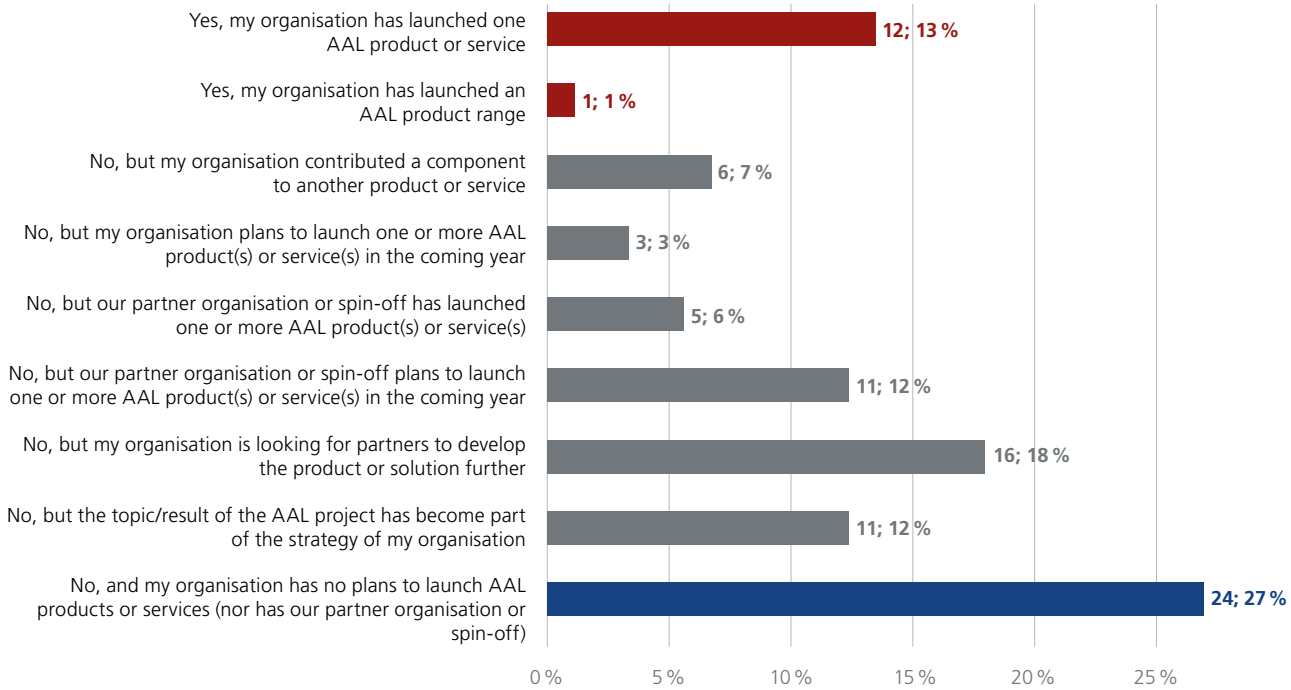
3.1.1 Contribution to commercialization and development of new markets

The AAL impact assessment has shown that the AAL Programme has had a positive effect on commercialisation and the development of new markets. The programme has also already led to commercial revenue in some projects. In addition, the AAL Programme has accelerated developments and substantially helped with the market launch of solutions.

New AAL solutions have been developed and integrated into the care system. By integrating new solutions, the programme has contributed to greater acceptance of technical solutions in care.

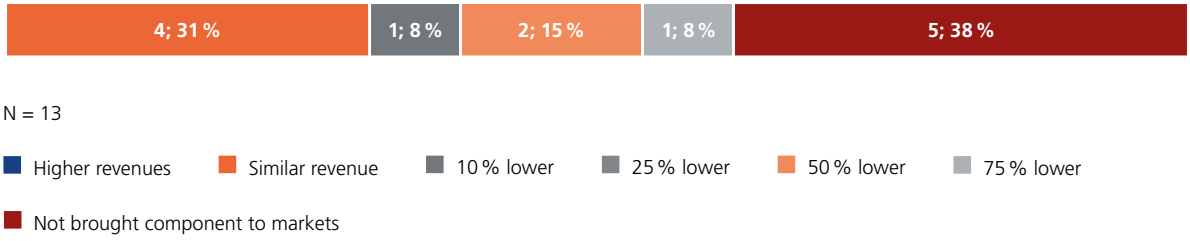
– 15 % (13) of the surveyed AAL projects have led to at least one solution and 7 % (6) contributed to a component being brought to the market. Further 3 % (3) are currently planning their own market entry and 18 % (16) are actively seeking partners for further development. 12 % (11) have strategically integrated the topic into their organization. Around 6 % (5) report that partners or spin-offs have launched products, and 12 % (11) expect this to happen in the near future. According to the survey, more than half of the programme participants (55 %) achieved a substantial goal. Just 27 % (24) of respondents have not launched any products and have no plans to do so (Figure 3).

Figure 3: Has your organisation launched an AAL product/service to market that resulted from this project? Please tick the answer that applies the most.



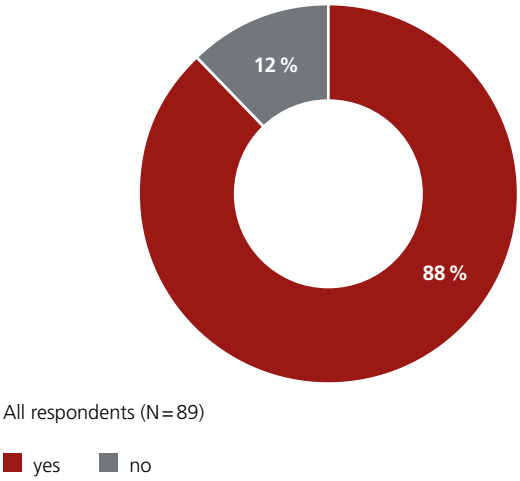
N = 89

Figure 4: We aim to estimate the value of the AAL Programme to bringing your product/service to markets. In your view, without the AAL Programme, what would you have been able to achieve?



- A majority found that the funding acquired via the AAL project has accelerated the development of solutions to a moderate (37 %) or great (52 %) extent.
- 8 out of 19 respondents (42 %) with an already launched product/service or component state that these would not have been brought to market without the AAL Programme (5 out 11 with an already launched product and 5 out of 6 with an already launched component).
- The AAL Programme has been successful in helping companies to find new customers, with 63 % of those surveyed saying that they have done so.
- Participants in AAL2Business reported significant improvements in business and marketing skills. 91 % saw an improvement in business model development, 74 % in commercialisation strategy to great or moderate extent.
- Four of the thirteen projects with an introduced AAL product/service and four of the six projects with introduced components would have generated 10 to 75 % less revenue without the support of the AAL Programme.
- The majority (88 %) of respondents consider their learning experiences in AAL as being relevant to other markets and regions (Figure 5). Only 12 % of respondents do not see their experiences as relevant beyond national borders – possibly because their solutions are highly context-specific or locally anchored. For respondents who have launched a product, service or product range, this share is 100 % (13 out of 13). Similar results were found in the two previous impact assessments in 2021 and 2023.

Figure 5: Do you think that your learning is relevant to bringing AAL solutions to markets in other regions, countries, and across the EU?



The results indicate that the insights gained from AAL projects are relevant to European markets. The high level of agreement – especially among those who already launched a product or service – shows that AAL stakeholders benefit from the programme when bringing solutions to supra-regional markets. However, a smaller proportion of projects still have additional learning needs in the area of internationalisation.

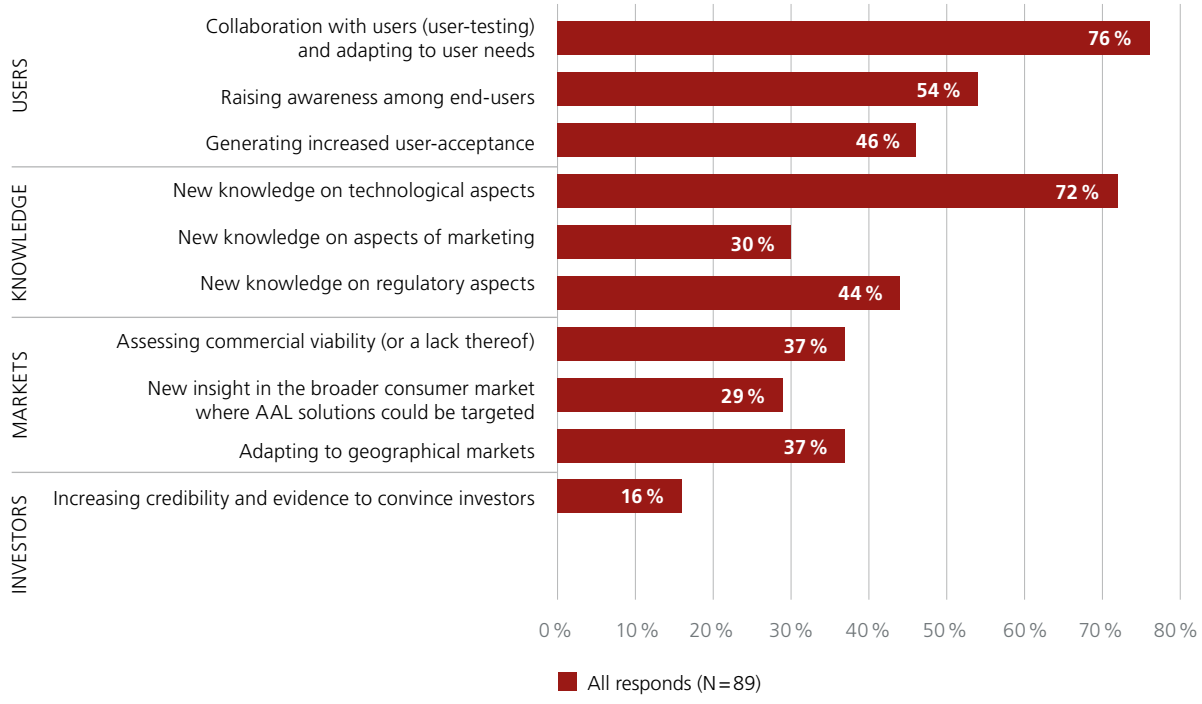
3.1.2 Contribution to knowledge base and networking

The impact assessment shows that the AAL Programme is making an important contribution to developing a knowledge base and network in the field of AAL. In particular, knowledge is being built up with regard to cooperation with users and adapting to their needs, as well as marketing and technological aspects. The AAL Programme also enables participants to benefit from the cooperation and networks established within AAL projects.

The results confirm the nature of the AAL Programme in terms of capacity building and innovation promotion. The AAL Programme also contributes to partnerships and cooperation throughout Europe and between industry, research institutions and end users. This promotes a cross-border AAL ecosystem. The increased knowledge base also facilitates technology transfer between stakeholders in Europe and at a national level (Figure 6).

- Impact on organization: AAL participation primarily has an impact on learning and expertise within the participating organisations. It primarily strengthens competencies, reputation and networks. 93 % of respondents report moderate to strong effects in terms of new know-how and knowledge, 88 % report new abilities and skills. 70 % report an improved visibility and reputation, 65 % have gained new partners, 60 % have expanded their social and professional networks.
- Learnings in the context of the AAL project: The results show that AAL projects trigger learning processes and knowledge growth primarily in the areas of technological development and user integration. While all AAL projects benefit greatly from user and technology experience, those with successful launches have greater learning gains, particularly in the areas of market, financing and regulatory knowledge.
- Benefits from collaboration and networks: Almost two-thirds (59 %) of all respondents benefit greatly or moderately from the networks and collaborations that have been established during the AAL project. Further 31 % report at least minor effects.
- Mutual learning: Participants in the AAL Forum and/or European Week for Active and Healthy Ageing largely agree that the AAL Programme provides an opportunity for mutual learning (97 %) and broadens the perspectives of national research and development in this field (93 %). The majority (88 %) of participants also agree that the insights gained from participation are relevant for broader market orientation. These results are comparable to those of previous assessments in 2021 and 2023.

Figure 6: What did you learn from developing your solution(s) in the context of an AAL project?



N = 89

3.1.3 Contribution of AAL support actions to develop knowledge and a market-oriented mindset

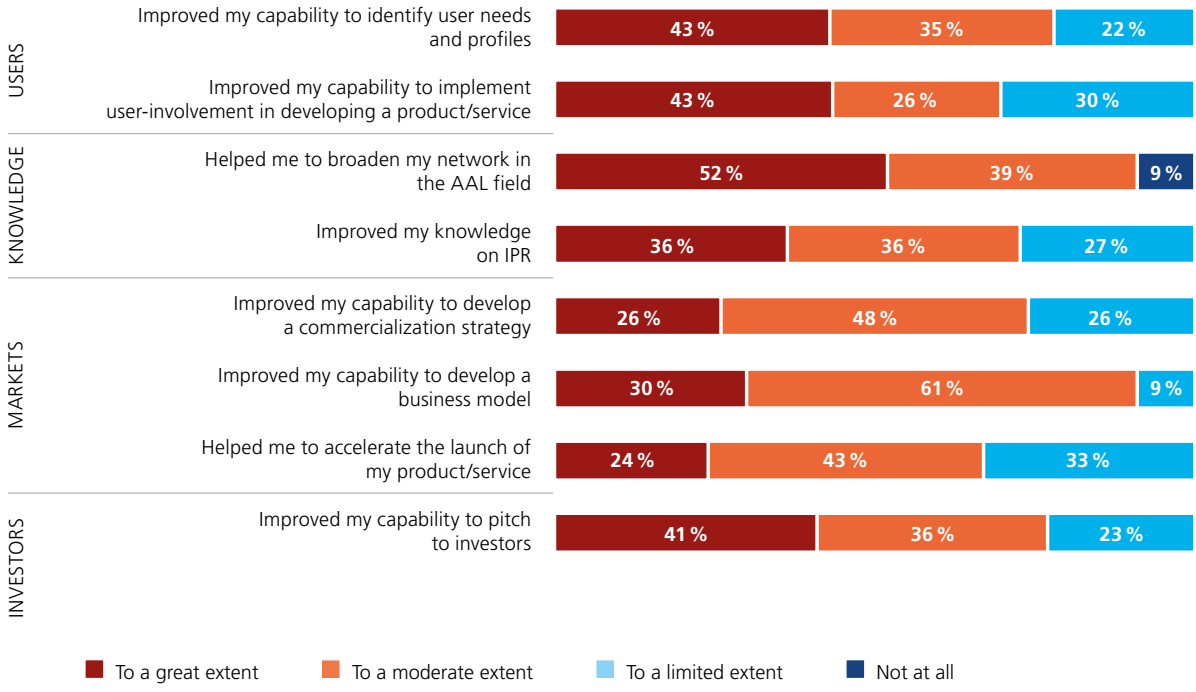
The AAL2Business and AAL Forum and/or the European Week for Active and Healthy Ageing as well as the Smart Ageing Prize/AAL Challenge Prize improve participants' skills in commercialisation, financing and user involvement. They also contribute to knowledge acquisition and network building.

The individual support measures target various aspects intended to facilitate market access and the transfer of results. More specifically, they aim to improve understanding of the user perspective, as well as knowledge of investor access, business modelling, commercialisation and scaling. 51 % (68) of respondents to the 2025 impact assessment survey participated in AAL support measures, namely AAL2Business (23), the AAL Forum (37) and the Prizes (8).

AAL2Business

- 74 % of participants in the AAL2Business Support Actions (n = 23, 26 %) reported a strong or moderate improvement in their ability to develop a commercialisation strategy as a result of their participation (Figure 7). Additionally, 91 % of respondents agreed that their participation had helped them to improve their business model development. These results have improved in the current survey compared to previous ones (62 % of participants reported an improvement in 2023 and 70 % reported improvements with regard to business models)
- As with the 2021 and 2023 surveys, 70 % of participants agreed that AAL2Business improved their ability to engage users in product or service development or identify user needs and profiles (78 %).
- Support actions also contribute to accelerating the launch of products to market. Here, 59 % observe significant effects, for instance in terms of speeding up product launches. Contribution to IPR management and commercialisation is rated slightly lower at 72 % and 68 % respectively, but is still significant.

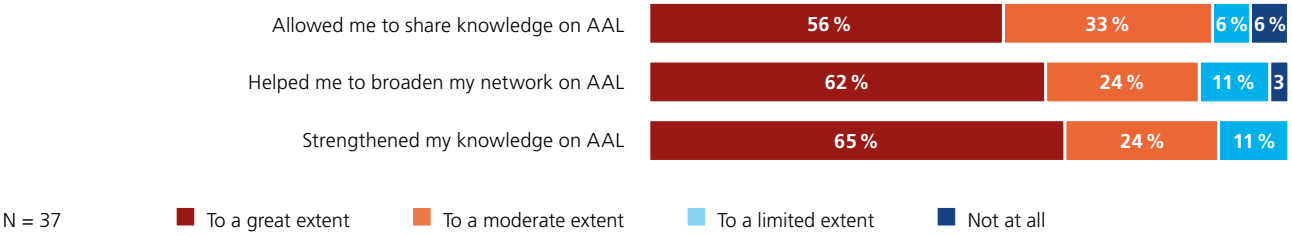
Figure 7: To what extent do you agree with the following statements? My participation in activities of AAL2Business has:



AAL Forum and/or European Week of Active and Healthy Ageing

- While the "AAL2Business" support measure focuses primarily on promoting commercialization and user involvement, the "AAL Forum" support measure makes an important contribution to networking. Participation in the "AAL Forum and/or the European Week for Active and Healthy Aging" has helped to expand the AAL network of 86 % of respondents who participated in the support measure (N = 37) (compared to 94 % in the 2023 survey and 89 % in the 2021 survey).
- Knowledge sharing also remains at a similarly high level as in the previous impact assessment survey with 89 % of respondents reporting this (Figure 8; 92 % in 2023). The assessment in the 2021 survey was slightly lower at 80 %. In addition, 89 % of respondents were able to acquire new knowledge in the context of AAL through the support measures (2023: 92 %, 2021: 75 %).

Figure 8: To what extent do you agree with the following statements? My participation in the AAL Forum and/or European Week of Active and Healthy Ageing has:



3.2 How AAL contributes to better quality of life of older people and their networks

3.2.1 Contribution of launched products to quality of life

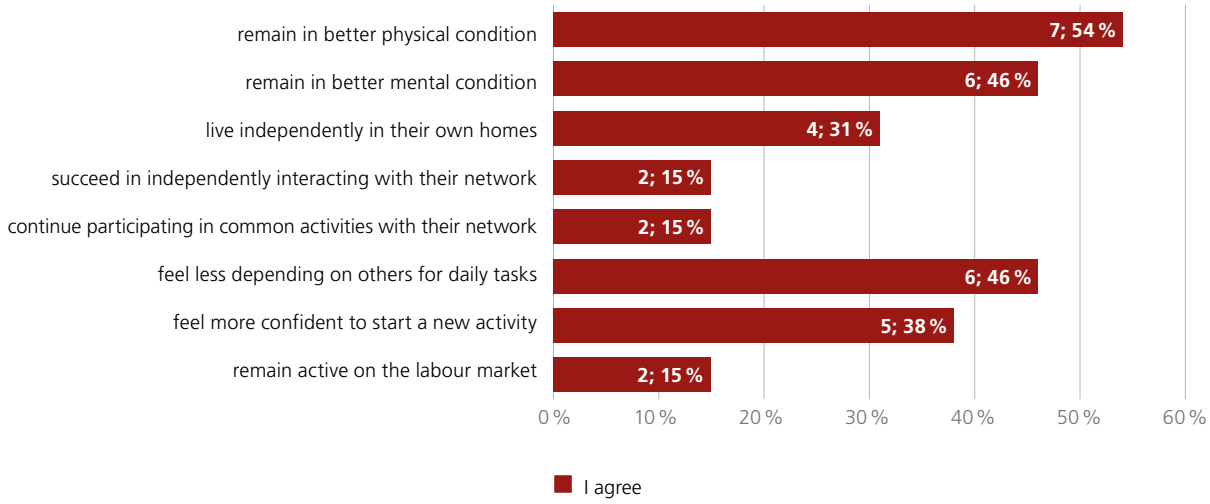
The survey data suggests that the AAL Programme has a positive impact on older adults and their networks. In particular, it enables older adults to remain mentally fit and active and to interact with their familiar environment.

AAL solutions are designed to help older people feel safer and more confident in their familiar surroundings. They are intended to enable them to maintain their abilities and continue their usual activities in familiar surroundings. The aim is to enable older people to live as autonomously and independently as possible while participating in society.

These solutions are also intended to provide better support for informal caregivers working with older people. This has a direct positive impact on the care environment and an indirect positive effect on older people, for example by promoting their autonomy and independence (Figure 9).

- 6 of the 13 respondents (46 %) agree with the statement that the majority of older adults who use their product or service" for at least one year or longer „remain in better mental health" and „feel less depending on others for daily tasks".
- 7 of the 13 respondents (54 %) also believe that the majority of older adults who use their product or service will "remain in better physical condition".
- 5 of the 13 respondents (38 %) say that users of their product/service" feel more confident to start a new activity".

Figure 9: Do you agree with the following statements? More than 50 % of the older adults using my product/service for at least one year or longer ...



N = 13

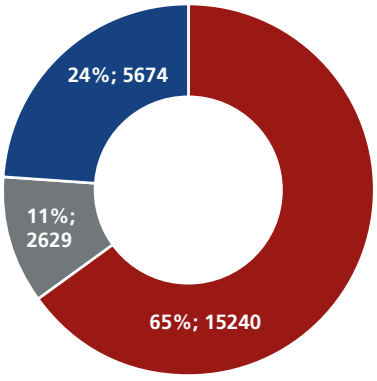
3.2.2 Impact on Society: individual end users and paying customers

The survey results show that the AAL Programme continues to generate societal value by reaching large and diverse groups of end users and by enabling first steps toward sustainable customer uptake. Compared to previous assessment rounds, the estimated number of end users benefitting from AAL-funded solutions has grown markedly, with older adults representing a significantly larger share than in 2021 and 2023.

The growing share of end users indicates growing relevance and acceptance of AAL technologies among those whom the programme ultimately aims to support. At the same time, the profile of paying customers confirms that institutional actors – particularly care providers – remain central drivers of early market adoption, while individual older adults increasingly appear as direct beneficiaries of launched solutions. Taken together, these findings underscore that AAL projects not only reach a rising number of users but also demonstrate stable potential for monetisation across key customer groups.

- The respondents with launched products and services indicate 23,543 potential end users in the last year, of which 65 % are older people, 24 % are formal caregivers, and 11 % are informal caregivers (Figure 10). The average total number of end users is significantly higher than in the impact studies from 2023 (4,268) and 2021 (1,855 end users). The proportion of older adults was also lower in previous assessments: in 2023 it was 38 %, and in 2021 it was 37 %.
- It is estimated that around 250 paying customers will be reached among those surveyed, of whom 12 % are older adults, 65 % are care facilities and 23 % are public institutions (Figure 11). As in the 2023 survey, institutional care facilities account for the largest share of potential paying customers. The total number of estimated paying customers in the current survey is similar in magnitude to both surveys 2023 (238) and 2021 (771).

Figure 10: Please estimate the total number of individual end-users in the last year, by type.

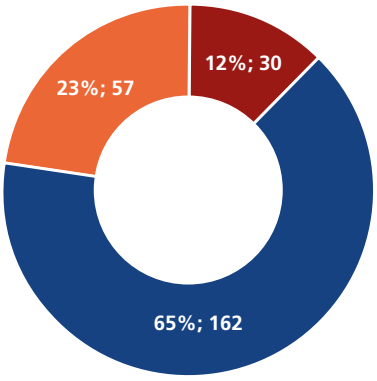


N = 4

End-users

Older adults | Formal carers | Informal carers

Figure 11: Please estimate the total number of paying customers in the last year, by type.



N = 4

Paying customers

Care organisation | Public authorities | Older adults

3.2.3 User-involvement, adoption and relevance of AAL solutions

The current survey suggests that the AAL solutions have contributed significantly to improving acceptance and willingness to use among the target groups, i. e. older people and formal and informal caregivers.

User-oriented development lies at the heart of the AAL Programme. This allows AAL projects to create products and services that are highly relevant and practical for users. This facilitates their commercialisation at a national and international level. Furthermore, user-centred product development fosters acceptance of products and services, thereby enhancing their potential impact on older individuals and their networks.

- For the majority of respondents, the most important aspects of AAL projects were learning from user tests and then adapting the solutions to be developed to the needs of users (76 %). Raising awareness among end users and increasing user acceptance were also important (46 % each). These results are comparable to those of the 2023 and 2021 surveys.
- Participation in AAL2Business support measures has also improved the ability of beneficiaries to identify user needs and profiles (88 % agreement) and to involve users in the development of products or services (69 % agreement). This is consistent with the results of the 2023 and 2021 surveys.
- According to respondents, involving end users in the development phase has a significant impact on the acceptance and willingness to adopt products/services (84 % agreement) as well as on their relevance (93 %, Figure 12). This applies in particular to older people (89 % agreement) and also to formal caregivers (84 % agreement, Figure 13). This shows that the user-centered approach of the AAL Programme promotes acceptance. The results of the current survey are comparable to those of previous surveys: 2023 Adoption: 82 %, Relevance: 88 %; 2021 Adoption: 74 %, Relevance: 85 %.

Figure 12: Overall, to what extent do you agree with the following statements:

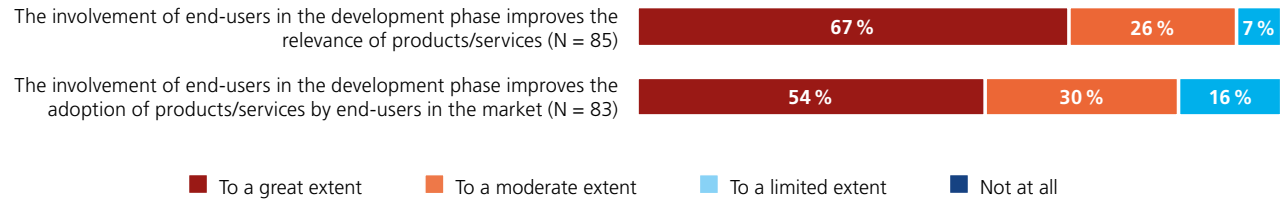
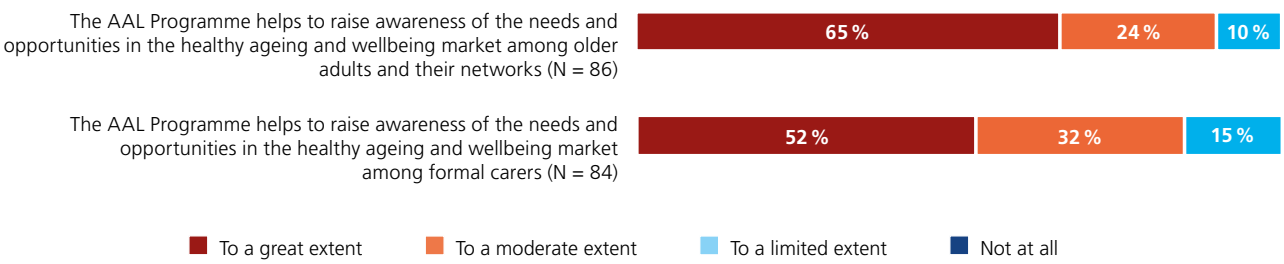


Figure 13: Overall, to what extent do you agree with the following statements:



3.3 How AAL contributes to increased efficiency and sustainability of support and care systems

3.3.1 Contribution to support and care systems

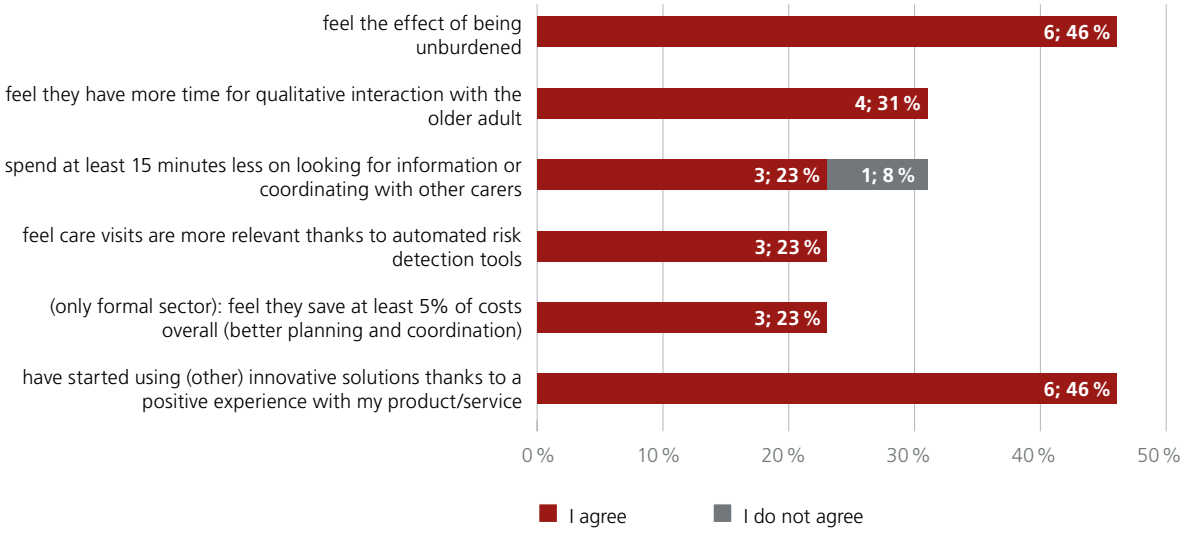
The survey data indicates that both formal and informal carers gain more time for human interaction thanks to AAL solutions. This improves the general acceptance of the use of technical solutions. In addition, formal carers are made aware of the opportunities and possibilities in the area of healthy ageing and wellbeing.

The projects funded by AAL are intended to lead to solutions that enable early detection of risks in care and provide better support for formal and informal carers. In addition, cost efficiency in the formal sector is to be improved in order to reduce pressure on healthcare providers.

- Of the 13 projects in which a product or service was introduced, 31 % agree that end-users of their product (i.e. formal or informal carers) now have more time for quality interactions with older people. Almost half (46 %) feel that the use of AAL solutions has reduced their workload, while just under a quarter (23 %) estimate them to save time on administration and coordination with other carers (Figure 14).
- In addition, respondents felt that care visits were more relevant thanks to automated risk detection tools (23 %). Opinions on this aspect varied across the different surveys (2023: 11 %, 2021: 69 %).
- Furthermore, approximately 23 % of respondents expect cost savings of at least 5 % in the formal care sector
- Almost half (46 %) of respondents say that the use of their products and services has contributed to a generally greater openness to other innovative solutions among informal and formal carers. In previous surveys, this figure was 56 % (2023) and 23 % (2021) respectively.

The impact analysis has shown that the products and services already on the market make an important contribution to reducing the burden on formal and informal carers. This is also reflected in the fact that older people feel safer, exercise their physical and mental abilities and thus remain fitter overall. This in turn reduces the burden on carers.

Figure 14: Do you agree with the following statements? More than 50 % of the (formal or informal) carers of older adults using my product/service …



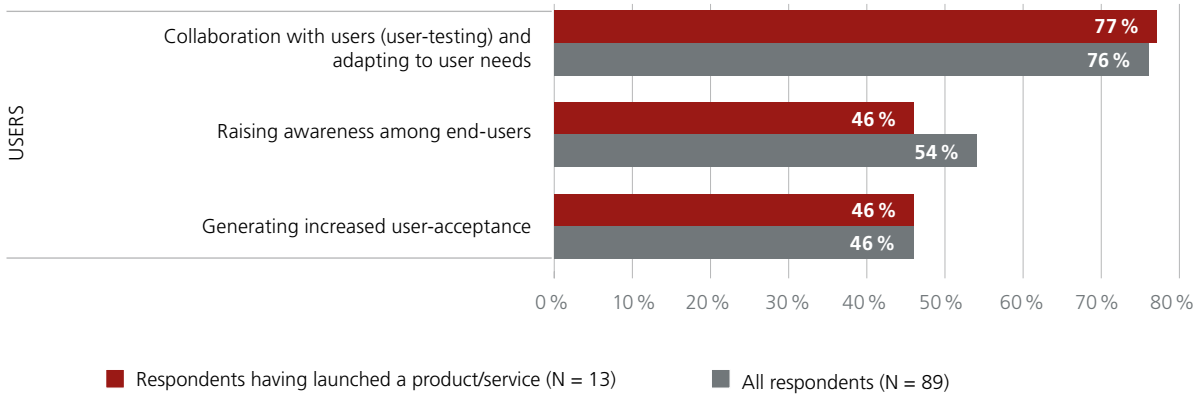
N = 13

3.3.2 Contribution to raising awareness of the needs and opportunities in the field of healthy ageing and well-being

Another important aspect for the success of AAL solutions in the formal and informal care system is a general awareness among care workers of the needs and opportunities in the area of healthy ageing and well-being. The survey shows that the AAL Programme has helped to raise awareness among both groups.

– 85 % of respondents who have already launched a product or service on the market believe that the AAL Programme helps to raise awareness of the needs and opportunities in the field of healthy ageing and well-being among professional carers. This is consistent with the results of previous surveys conducted in 2023 (71 %) and 2021 (86 %).

Figure 15: What did you learn from developing your solution(s) in the context of an AAL project?



3.3.3 Adoption and integration of AAL solutions in care systems

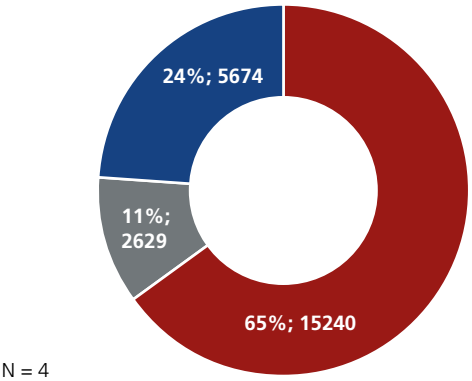
The introduction of the solutions developed in the AAL Programme into care systems is an important medium-term goal. The impact analysis shows that the primary beneficiaries are older people (as end users and paying customers) as well as formal and informal caregivers.

Over the years, it has become apparent that the target groups reached vary greatly depending on the project. This can fluctuate significantly between projects.

An interesting point is that, although the end users are predominantly older people, it is institutional facilities that pay for the services. Private end users still appear reluctant to pay for AAL solutions (Figure 16).

The number of end-users reached by AAL projects varied a lot: ranging from 30 to 10.000 and a median of 565 end-users per project (note: only four projects reported on this topic). The focus is primarily on older adults, formal caregivers and to a small portion informal caregivers, which is in line with the programme's objectives. It also indicates that institutional and informal care systems are still less integrated in AAL solutions.

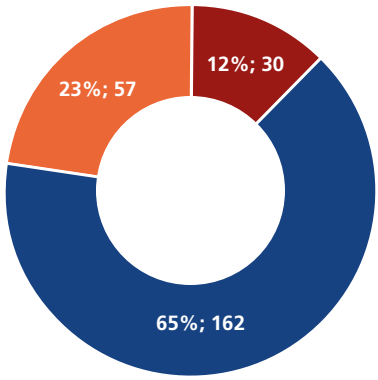
Figure 16. Please estimate the total number of individual end-users in the last year, by type. Please estimate the total number of paying customers in the last year, by type.



N = 4

End-users

Older adults | Formal carers | Informal carers



N = 4

Paying customers

Care organisation | Public authorities | Older adults

3.4 European added value through strengthening the wider AAL ecosystem and AAL community

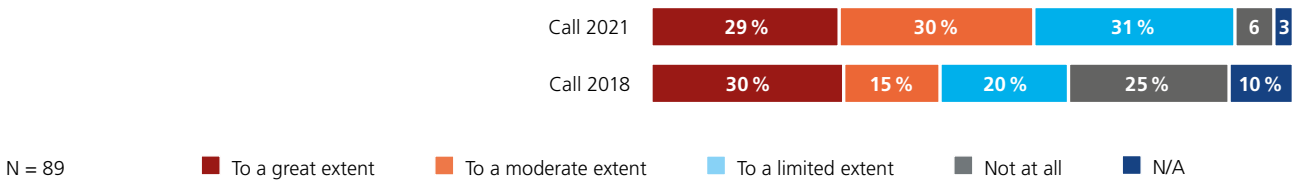
3.4.1 Contribution of the AAL Programme to strengthening European networks

Participants in the AAL Programme benefited particularly from the establishment of partnerships and networks. Respondents reported positive learning experiences from international cooperation. Their understanding of national and regional characteristics of care markets and regulatory requirements was enhanced. The vast majority of participants confirmed that the AAL Programme contributes to strengthening the entire AAL ecosystem and the AAL community.

While the AAL Programme initially focused on promoting innovation for active and healthy ageing through collaborative projects, it became increasingly important to consolidate the innovation initiatives that had been launched and to establish local communities in the countries. The AAL Programme therefore aims to integrate networks and interest groups that together form an AAL ecosystem and an AAL community. A positive contribution was confirmed in the current survey as well as in the surveys conducted in 2023 and 2021.

- A large majority of respondents (88 %) agreed that the knowledge gained from an AAL project is relevant for the market introduction of AAL solutions in other regions and countries, as well as across the EU. Among respondents who have introduced one or more product or service, this figure is as high as 100 % (N = 13). This result is slightly better than in the previous evaluation in 2023 (77 %). Comments from some respondents indicate that participating in the AAL Programme and collaborating with European partners has helped them to better understand the markets.
- 59 % state that they benefit moderately or greatly from the cooperation and networks that have developed during their AAL project. The result was slightly higher in 2023, at 70 %.
- Participants in this survey also confirm that the AAL Programme has enabled them to gain new partners and strengthen their networks (Figure 17).
- In addition, the AAL support measures have contributed to the formation of European networks. In the survey, 91 % of AAL2Business participants agreed that the measures had a positive effect on the formation of their networks in the AAL field. This view was also shared by 86 % of those who participated in the AAL Forum. The positive effects in terms of cooperation, attracting new partners and expanding networks were similarly high in the 2023 and 2021 surveys.

Figure 17: The AAL Programme aims to create new networks across key actors of the AAL community. To what extent are you currently benefiting from the collaborations and networks that were established during your AAL project?



3.4.2 Contribution of the AAL Programme to strengthening the AAL ecosystem and community

The survey provides direct evidence that the AAL Programme strengthens the entire AAL ecosystem and the AAL community. This impact can be explained by increased knowledge sharing and capacity building, cooperation and coordination, and better understanding between user or stakeholder groups and countries.

– 91 % of participants agree that the AAL Programme makes a significant contribution to strengthening the ecosystem and community in the AAL field (N = 89, Figure 18). This result is comparable to the results of the surveys conducted in 2023 and 2021.

3.5 Challenges and reducing barriers – lessons learnt

3.5.1 Barriers faced by participants

The results show that AAL projects are primarily confronted with financial and market-related barriers when entering the market. The biggest challenges lie in financing the commercialisation phase and the still insufficient technological maturity of the products. Classic market barriers such as competition or user acceptance are less significant, presumably due to the lack of technological maturity. According to respondents, the AAL Programme is making a significant contribution to removing entry barriers.

Financing difficulties and lack of product maturity together account for approximately 80 % of all responses. This confirms the results of the impact evaluations from previous years (2023 and 2021), although the assessment in the current survey is slightly more optimistic. While most of the difficulties mentioned remain comparable over the years, dealing with regulations and standards is considered significantly more difficult in this year's survey. The proportion of respondents who see this as an obstacle has tripled from 7 % in 2023 to 22 % in 2025 (Figure 19).

One possible explanation lies in the varying market maturity of the AAL solutions under consideration. Around 50 % of the projects were only launched in 2021, while the rest were already initiated between 2018 and 2020. At the same time, key European regulations for the healthcare sector underwent comprehensive reform between 2012 and 2022. Particularly relevant is the EU Regulation on Health Technology Assessment (HTA Regulation), which replaced the previously informal, project-based cooperation between national HTA bodies with a binding, EU-wide harmonised assessment framework. The adaptation of already developed AAL solutions to these new, in some cases stricter requirements presented many providers with additional challenges. This could be reflected in the observed results.

All participants in the 2025 impact analysis survey (N=89) mention challenges relating to the market launch of AAL solutions. The biggest obstacles concern:

– A lack of external funding in order to bring solutions to market
– Insufficient level of product or technology maturity by the end of the project
– Difficulties in developing a business plan for commercialisation
– Dependence on consortium partners for components
– Stringent regulation of health markets and the absence of a wider supporting ecosystem

Among those who have already launched a product, service or product range (N = 13), the main challenges cited were lack of product maturity, upscaling and difficulties with regulation and standards. This is in line with the results from previous years (2023 and 2021). However, this group cited challenges with standards and regulation as a more significant hurdle compared to previous years. In addition, this group pointed out problems that can arise, for example, from data protection or security concerns.

Figure 18: Evaluation of the programme's effectiveness in contributing to the strengthening of ecosystems and communities.

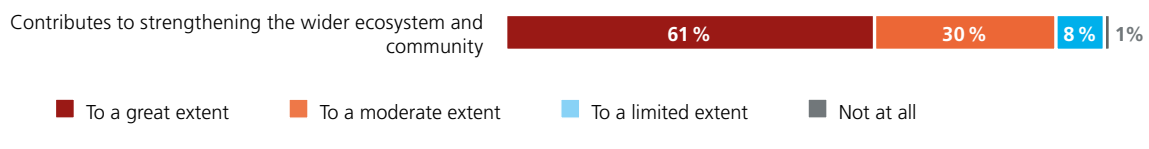
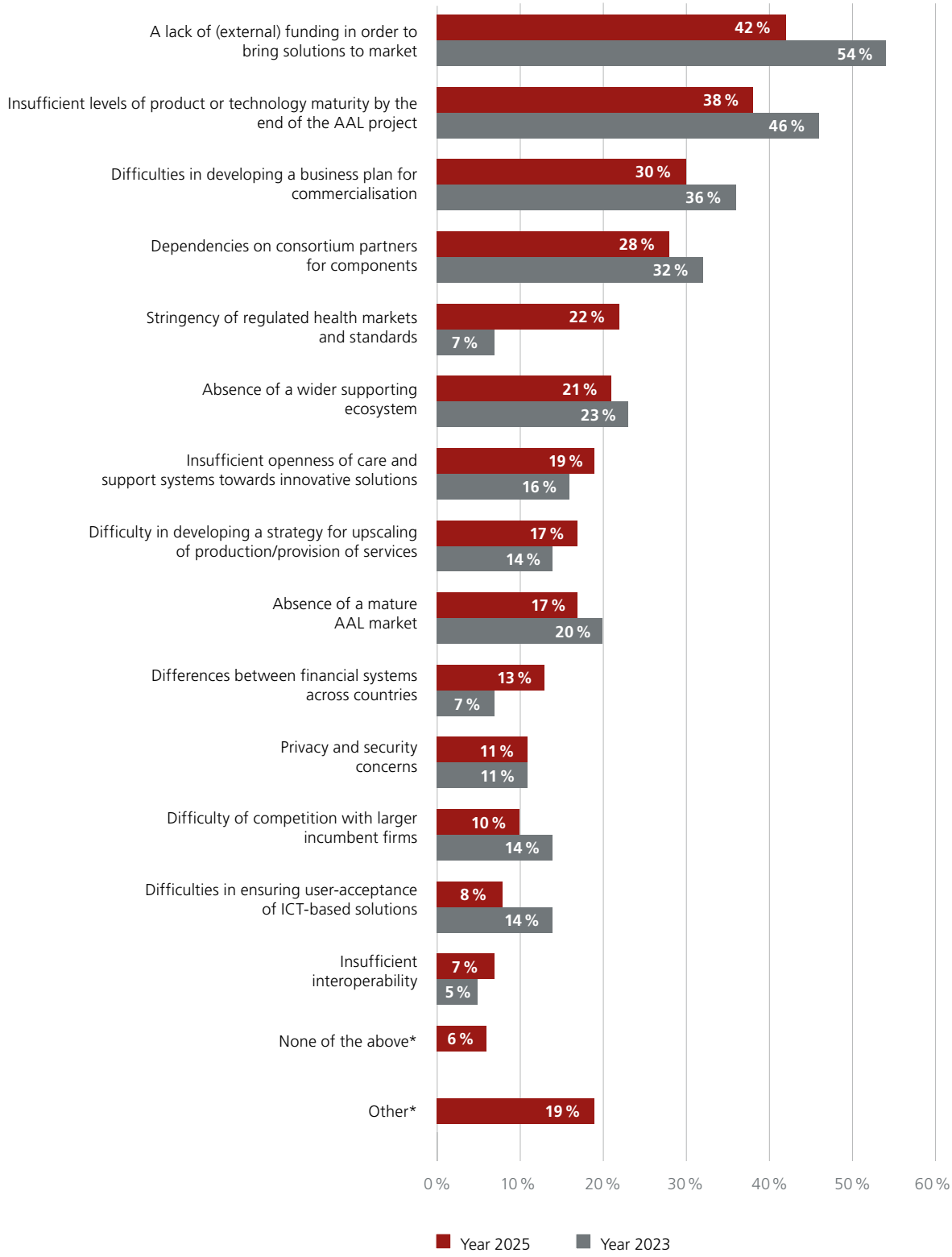


Figure 19: Which of the following challenges did you encounter in bringing your AAL solution(s) to market?



N = 89 (2025)

N = 56 (2023)

*Options "Other" and "None of the above" only in year 2025

3.5.2 Contribution of the AAL Programme to reduce barriers

One of the AAL Programme's primary objectives is to identify existing barriers and facilitate their reduction and elimination. The majority of respondents confirm that the AAL Programme has helped to remove barriers to the market launch of their AAL solution.

According to the respondents, the AAL Programme made an important contribution in this regard for almost 90 % of all participants, helping to translate the knowledge gained into marketable solutions and effectively supporting entry into EU markets. The group that has already launched an AAL solution on the market confirms this to an even greater extent, at 100 %. The results of the current survey show that the contribution of the AAL Programme is viewed even more positively than in the previous year (approx. 83 %) from the perspective of all respondents.

In addition, responses to the open-ended question about which barriers to the market introduction of AAL solutions could be reduced by the AAL Programme were also evaluated. Cooperation and information barriers were mentioned most frequently. The programme enabled connections to be established with cooperation partners with whom there had previously been no contact. It also provided insights into other countries and a better understanding of the organisational and financial framework conditions of different national health systems. Furthermore, the respondents noted that the funding made research in this area possible in the first place and enabled pilot and validation projects to be carried out, which allowed practical and technical risks to be identified at an early stage. Another hurdle that was overcome was the programme's strong user focus. This made it possible to obtain feedback from older people, informal carers and care organisations, which would otherwise have been difficult or impossible. The responses also mentioned that the visibility of AAL and awareness in the care sector as a whole had been increased, which is a fundamental hurdle. However, weaknesses are evident in the clarification of regulatory challenges and, above all, in the continuation and further development of projects until market launch.

3.5.3 Opportunities for further reducing barriers and future development

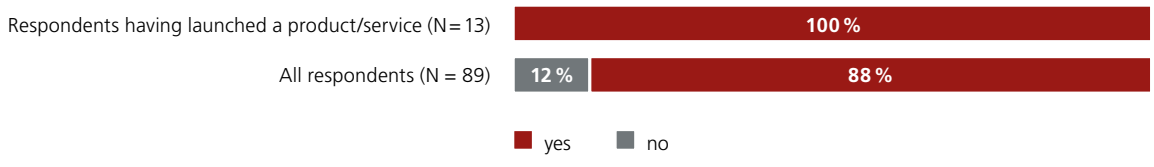
Participants were then asked how existing barriers could be overcome in the future and what would be needed to achieve this. Participants primarily referred to support with financing and improvements in funding. They lamented the large financing gap between pilot projects and commercial launch, as well as the need for funds for scaling up. With regard to funding modalities, more funds were requested for selected projects with special funding needs (e. g. clinical trials, certifications) as well as longer or multi-phase funding programmes that build on each other and allow for flexible partner selection. In addition, as in previous studies, participants pointed to opportunities for targeted support in commercialisation, for example in the development of business models or pricing and the development of cost reimbursement models. At a higher level, there was a desire for EU-wide harmonisation in healthcare and less regulatory fragmentation.

In addition to these proposals, respondents wanted, among other things, the networks to have a stronger practical focus in their exchanges with supervisory authorities, cost bearers/insurance companies or clinical centres, and further promotion of technical development and validation, for example with regard to interoperability and stress tests, as well as tests in a practical environment.

In summary, the proposals relate to the following categories:

- Follow-up funding and financing of certifications
- Support measures for business development, scaling and commercialisation
- More flexible funding modalities (e. g. funding amounts, terms, administrative burden)
- Networking with market players (e. g. regulatory bodies, policy makers, cost bearers, industry)
- Strengthening of practical and validation tests
- Political support for greater awareness of AAL and EU-wide harmonisation

Figure 20: Do you think that your learning is relevant to bringing AAL solutions to markets in other regions, countries, and across the EU?



This largely corresponds to the suggestions made by the group that has already launched an AAL solution when asked how the effective launch of AAL products or services could be promoted. Respondents (N = 14) cited additional funding opportunities from investors (71 %) and the establishment of networks with strategically important partners (64 %) as the two most important hurdles to overcome.

The results show that although progress has been made, individual hurdles, particularly market-related ones, still exist at the system level. Although AAL solutions have been introduced to the market in parts, it has not yet been possible to establish a mature AAL market. Overall, the perception of AAL participants with regard to market readiness has improved in recent years. However, gaps remain in the area of regulation and the lack of EU-wide harmonisation. These have been consistently cited as obstacles in recent years.

4 AAL Project Success Stories

This chapter examines how a selected set of AAL-funded projects – referred to as "success stories" – have contributed to the programme's overarching objectives and how they address the societal and care challenges that shaped the AAL Programme during its implementation period. The analysis focuses on two central questions:

(1) In what ways did the projects contribute to the AAL Programme objectives of strengthening Europe's industrial base, improving the quality of life of older people and their networks, and increasing the efficiency and sustainability of support and care systems?

(2) In what ways did projects address societal challenges and how did they create impact?

To answer these questions, a sample of 15 projects was identified as AAL success stories. Selection was based on desk research, insights from the quantitative impact assessment, final review reports, and close consultation with the AAL Association Central Management Unit and National Contact Points. The selected projects represent particularly illustrative examples of how AAL-funded initiatives generated value beyond their formal project period – whether through commercialisation, organisational learning, strengthened research capacity, or improved practices in care and community settings.

By distributing the sample across three maturity stages, the set intentionally differs from the list of 13 launched products and services identified in the quantitative assessment (see Table 4). This broader approach allows the study to capture the diverse ways in which "success" manifests in AAL – from spin-off creation and commercial integration to enhanced research infrastructures, improved service models and strengthened participation of end users in innovation processes.

The success story assessment followed a qualitative approach based on semi-structured interviews with project coordinators or key representatives. Interviews lasted approximately 30 minutes and were conducted in November and December 2025. To support preparation, interviewees received a tailored topic list reflecting the specific maturity type of the project. The interviewers reviewed relevant project documentation, AAL survey responses and final review reports prior to each conversation. Following the interviews, draft case studies and consolidated impact messages were prepared and submitted to interviewees for validation, ensuring accuracy and alignment with project experience.

Across the 15 projects, the success stories collectively address all societal challenge areas identified by the AAL Legacy Study[5], though the intensity and nature of contributions varied widely. Several projects engaged with multiple challenge dimensions simultaneously – a reflection of the inherently interconnected nature of ageing, care and digital support systems. The challenges most frequently addressed by the sample were reducing social isolation, reducing caregiver burden, managing chronic diseases and sustaining daily living and autonomy.

A detailed description of each of the 15 success stories – including their technological components, service models, user groups and intended benefits – is presented in a separate publication dedicated exclusively to these cases. The present chapter, by contrast, synthesises cross-project insights to highlight common patterns, mechanisms through which impact emerged and the types of added value generated through AAL funding. In doing so, it examines how the success stories collectively contribute to the programme's three overarching objectives: strengthening Europe's industrial base; improving the quality of life, autonomy and social participation of older adults and their networks; and increasing the efficiency, sustainability and digital readiness of support and care structures.

Table 4: Overview of the 15 selected AAL success stories by type

Type 1 Products and Solutions	Type 2 Projects	Type 3 Concepts
AAL Products and Solutions, referring to projects close to market or already achieving commercial uptake	AAL Projects, referring to initiatives that require an additional push – through investment, partnerships or further validation– to reach the market	AAL Concepts, referring to promising prototypes and ideas that are not yet market-ready but have generated important knowledge, strengthened capabilities or informed future development pathways
frAAgiLe	Care about Care, C^C	ReMember-Me
DIANA	APH-ALARM	GUARDIAN
Recovery Fun	PREPARIO	AGAPE
Project Alpha	T4ME2	engAGE
	ORACIA	BeauCoup
	CleverGuard	

5 Salvador, Eduardo; Carbonnelle, Quentin; Braito, Nazareno; Durinck, Eveline (2025): AAL Legacy Study. Final report – Commissioned by AAL Association.

4.1 Contributing to AAL's key objectives

4.1.1 Strengthening Europe's industrial base

Across the portfolio, the success stories demonstrate that AAL funding has contributed to the competitiveness and innovation capacity of European SMEs, research institutions and service providers. The programme helped companies expand into new domains, upgrade existing products and strengthen their technological readiness.

Several SMEs integrated project results into market-ready or already commercialised solutions. TELU and Cartesio/MEMAS incorporated new interoperability, remote-monitoring or cognitive-support modules developed in engAGE. Tech4Care expanded its Virtual Reality (VR) rehabilitation offering beyond the AAL period, informed by the prototypes and clinical evidence generated in RecoveryFun. Cogvis extended its market presence by integrating behavioural-analytics insights from DIANA into its commercial safety-monitoring products. In ALPHA, scientific outputs (protein-quality algorithms and datasets) contributed to a professional-grade tool already used in hospitals and food innovation settings.

Projects with a strong technical foundation also benefitted from AAL's collaborative environment. T4ME2 yielded modular components – motorised toilet bases, safety sensors, adaptive controls – which industrial partners continue to refine. BeauCoup stimulated new forms of cultural-technology products, particularly the multisensory tools developed at the University of Siena. Even early-stage projects such as PREPARIO encouraged SME engagement with household-appliance manufacturers and validated user demand for safer kitchen designs.

AAL also strengthened Europe's industrial base by enabling internationalisation. New consortia emerged across countries and continued through follow-up projects, such as engAGE leading to the follow-up project TransCare. Several SMEs expanded their networks beyond national borders, gaining visibility in international markets and care systems.

Overall, the portfolio shows that AAL supported industrial strengthening primarily by (1) de-risking early innovation, (2) enabling user-driven product refinement, and (3) facilitating access to cross-country markets and partners.

4.1.2 Improving quality of life for older adults and their networks

Across all case studies, the primary contribution lies in enhancing autonomy, participation and wellbeing of older adults.

Many solutions increased independence in daily routines. T4ME2 reduced physical strain during toileting, enabling users to move more safely outside their homes. GUARDIAN provided the care network with insights into daily routines of elderly without constant supervision, based on assisted digital interaction. PREPARIO supported safe and confident meal preparation, a key activity for ageing in place. APH-ALARM allowed individuals with aphasia to request emergency support using gesture- or motion-based triggers when speech is not possible.

Rehabilitation and cognitive-support projects contributed to maintaining functional and cognitive abilities. ORACIA strengthened communication skills for people post-stroke. ReMember-Me and engAGE provided cognitive games, monitoring and creative engagement that many participants perceived as beneficial. RecoveryFun used immersive VR exercises to increase motivation and adherence in rehabilitation.

Quality of life was also improved through social inclusion. BeauCoup brought museum experiences to older adults unable to visit cultural institutions, and engAGE facilitated group interactions mediated by social robots. Several projects reduced feelings of isolation by offering regular, stimulating activity – either at home or in group settings.

Family members and caregivers benefitted indirectly. PREPARIO and T4ME2 reduced the need for supervision; APH-ALARM increased reassurance in emergencies; DIANA provided insights into behaviour that help staff and relatives understand changes more quickly. In each case, users reported that technology made them feel more secure, more engaged or more able to navigate everyday challenges.

Taken together, the portfolio evidences AAL's contribution to meaningful improvements in older adults' quality of life by enabling independence, maintaining cognitive and physical function and supporting emotional and social wellbeing.

4.1.3 Increasing efficiency and sustainability of support and care systems

The success stories show multiple pathways through which AAL projects contributed to more efficient and sustainable care.

A recurrent contribution is data-driven insight. DIANA's behavioural heatmaps help care staff detect anomalies and intervene earlier. engAGE and ReMember-Me provide remote-monitoring data that support clinical decision-making. CleverGuard explored how electricity usage patterns can be analysed to detect deviations from routines and provide caregivers with meaningful information. ALPHA equips dietitians with protein-quality analysis tools, reducing manual calculation and supporting personalised nutrition

plans. ORACIA enables therapists to follow rehabilitation progress remotely, reducing travel burden and extending care beyond clinical settings.

Solutions also reduced the need for hands-on assistance. T4ME2's supportive toileting reduced physical strain and staff involvement. PREPARIO's microwave intended to reduce caregiver intervention in meal reheating. APH-ALARM supports emergency response without requiring a caregiver to be present. In all these cases, independence for users translates into reduced workload for professionals and family members.

Several projects aligned well with existing care workflows. PREPARIO connected behavioural data (e. g. whether meals were heated) with community meal services. DIANA integrated into routine nursing practices through visual dashboards. BeauCoup collaborated with museums and care providers to create easily deployable cultural modules.

Across the portfolio, efficiency gains emerge where solutions (1) complement existing practices, (2) reduce supervision, or (3) provide real-time information that supports earlier and more targeted interventions.

4.2 Addressing key societal challenges of the funding period

The portfolio of success stories collectively demonstrates how AAL-funded projects responded to the societal challenges associated with Europe's ageing population. Although each initiative operated with its own objectives and contexts, together they form a multidimensional landscape of solutions addressing caregiver strain, chronic disease trajectories, cognitive decline, daily autonomy, environmental adaptation, mobility, safety, sensory limitations and social isolation. The following chapters analyse these contributions based on the thematic spread described in the AAL Legacy Study. Across the 15 analysed projects, the entirety of the thematic spread was observed.

4.2.1 Reducing caregiver burden

Several projects directly alleviated the physical and emotional strain experienced by formal and informal caregivers by improving communication, increasing user autonomy and providing structured support.

Care about Care strengthened coordination between care workers, relatives and older adults by offering intuitive communication channels and mixed-reality guidance, thus reducing time-consuming information gaps and ad-hoc problem solving. ReMember-Me and GUARDIAN supported remote cognitive engagement and monitoring, enabling family members and professionals to distribute care effort more evenly and avoid unnecessary in-person visits. PREPARIO reduced supervisory duties around meal preparation, easing caregiver workload in both family households and community meal-delivery systems. AGAPE reduced caregiver burden by guiding older adults through behavioural change and helping them adopt digital solutions more effectively; this support minimised confusion, reduced reliance on informal help and created smoother care routines.

Collectively, these contributions demonstrate that caregiver burden is reduced most effectively when older adults receive tools and guidance that enable them to manage daily activities with confidence, when communication across care networks is improved and when cognitive or behavioural routines become more predictable and transparent.

4.2.2 Managing chronic diseases

Chronic disease management emerged as a central challenge across the portfolio, addressed by innovations ranging from rehabilitation to nutrition and emergency support. RecoveryFun provided sustained motor and cognitive rehabilitation through virtual reality, supporting long-term neurological conditions that require continuous engagement. Project ALPHA equipped dietitians and healthcare providers with a scientifically grounded tool to evaluate protein quality in meals, addressing nutrition-related risks such as frailty and sarcopenia that often accompany chronic disease. ORACIA contributed to chronic disease pathways by supporting communication recovery after stroke – a key determinant of long-term independence and psychosocial wellbeing. APH-ALARM added value by enabling people with aphasia to trigger help reliably during acute episodes, thereby reducing the long-term risks associated with unmanaged emergencies in chronic neurological conditions.

Together, these projects illustrate how chronic-disease management benefits from personalised digital support that strengthens autonomy, extends clinical insight into the home and enables faster response to emerging risks.

4.2.3 Mitigating cognitive decline and mental health issues

Cognition and emotional wellbeing were addressed through stimulating, structured and user-friendly interventions. ReMember-Me offered daily cognitive exercises supported by sleep and activity insights, helping maintain routines and detect early decline. engAGE combined creative theatre-inspired activities, robot-supported interaction and AI-based assessment to foster engagement, reduce loneliness and stimulate cognitive function. PREPARIO, though centred on kitchen usability,

indirectly addressed mental wellbeing by reducing anxiety and enhancing confidence in performing everyday tasks – both important contributors to psychological resilience.

These contributions show that mitigating cognitive decline requires solutions that combine enjoyment, structure and clinical relevance, enabling older adults to participate actively and meaningfully in daily life.

4.2.4 Sustaining daily living and autonomy

Autonomy in daily activities was reinforced through innovations that directly targeted the tasks older adults struggle with most frequently. DIANA enhanced autonomy by providing behavioural insights that helped users and caregivers understand sleep disturbances, agitation and routines, thereby supporting more self-managed daily living. BeauCoup enabled participation in cultural activities even for those who could not leave home, thereby sustaining personal agency and engagement. T4ME2 transformed toileting – a core determinant of independence – by adding personalised mechanical support and safety monitoring that encouraged confident use both at home and in semi-public environments.

These projects highlight that autonomy is strengthened when technologies adapt to individuals' environments and capacities, rather than requiring older adults to adapt to technological complexity.

4.2.5 Adapting the home and care environment

Environmental adaptation emerged as a powerful enabler of ageing in place. frAAgiLe provided structured assessment tools that helped care providers understand frailty risks within the home context, informing adaptations and targeted support. CleverGuard explored an unobtrusive monitoring system by analysing electricity usage patterns with AI to detect deviations from normal routines. PREPARIO introduced a redesigned microwave that addressed common household barriers such as confusing controls and safety concerns, making meal preparation more accessible.

Across these cases, environmental adaptation – whether through redesigned appliances, risk-awareness tools or more intuitive interfaces – proved essential for maintaining independence and reducing safety risks.

4.2.6 Preserving physical function and mobility

Mobility and physical function were supported by several interventions that combined therapeutic activity with usability. RecoveryFun engaged users in immersive VR rehabilitation, enhancing motivation and adherence. ORACIA contributed by supporting post-stroke language recovery, a foundational element for regaining mobility, confidence and social participation. engAGE integrated movement-based activities into its social-robot and theatre-inspired programmes, stimulating physical and cognitive engagement simultaneously.

The projects illustrate that mobility preservation benefits from consistent, engaging routines that are integrated into meaningful activities rather than isolated exercise programmes alone.

4.2.7 Improving safety and emergency response

Safety innovations played a crucial role across the portfolio. RecoveryFun's ecosystem included monitoring components that supported safer rehabilitation routines, while APH-ALARM provided gesture- and movement-based emergency alerts for people unable to speak during crises. T4ME2 adapted fall-detection sensors to one of the most hazardous domestic spaces – the bathroom – allowing for swift response when incidents occur.

These examples demonstrate that effective emergency response emerges when technologies blend unobtrusively into daily life and respond to real behaviours rather than theoretical scenarios.

4.2.8 Compensating for sensory impairments

Although fewer projects addressed sensory loss directly, APH-ALARM provided a meaningful contribution by offering an alternative to voice-based emergency communication. Its gesture-based activation method supported individuals whose sensory or motor limitations make traditional communication channels unreliable.

This targeted contribution shows that sensory compensation can be achieved through inclusive design that anticipates functional limitations rather than treating them as exceptions.

4.2.9 Reducing social isolation

Social isolation was addressed through a diverse set of innovations. frAAgiLe strengthened interaction between older adults and care providers by enabling structured assessments and personalised support pathways. Care about Care enhanced communication between families, care workers and older adults, reducing fragmentation and enabling more coordinated atten-

tion. ReMember-Me encouraged engagement through cognitive games and family-supported monitoring. AGAPE fostered confidence and participation by helping older adults adopt digital tools and access services. engAGE created social experiences mediated by robots and creative activities, enhancing group cohesion in care settings. BeauCoup delivered cultural participation to people unable to visit museums, strengthening connection to heritage and community.

Collectively, these initiatives demonstrate that social isolation can be reduced not only through direct communication tools but also through meaningful activities, improved self-efficacy and the strengthening of care networks.

4.3 Structural patterns across the portfolio

Across all success stories, three structural patterns emerge that cut across technologies, countries and maturity levels. These patterns offer insight not only into what made individual projects successful, but also into how future ageing and care innovation programmes should be designed.

4.3.1 User involvement as the central determinant of success

A clear pattern across the portfolio is that projects with early, continuous and meaningful user involvement produced solutions with higher usability, stronger adoption potential and greater social relevance. BeauCoup, T4ME2, PREPARIO, GUARDIAN, ORACIA and engAGE all illustrate how deep engagement with older adults, caregivers, clinicians and service providers can reveal needs and constraints that are rarely captured through desk research alone.

In these projects, co-creation was not limited to periodic feedback sessions but shaped the conceptualisation, design and iterative refinement of the technologies. BeauCoup's multisensory cultural tools were shaped through workshops with museum mediators, curators and older adults, resulting in products that addressed real cognitive and sensory needs. T4ME2's supportive toilet prototype was iteratively adjusted through participatory piloting in care homes, where users demonstrated how transfer movements, balance and confidence changed under different mechanical conditions. PREPARIO's simplified microwave emerged from careful observation of how older adults actually interact with appliances and where confusion or anxiety arises. ORACIA's language-therapy pathways and engAGE's creative robot-mediated sessions similarly evolved through sustained testing with patients and therapists.

By contrast, projects with limited or late-stage user involvement faced slower adoption, more rework and lower readiness for exploitation. The portfolio therefore confirms a key principle of ageing innovation: solutions succeed when they adapt to users' real abilities, emotions and environments – not the other way around. This insight holds particular importance in heterogeneous user groups where mobility, cognition, sensory function and digital literacy vary widely.

4.3.2 Modular and integrative technical architectures accelerate exploitation

A second structural pattern concerns technical architecture. Projects that built on existing commercial platforms or developed modular components demonstrated faster progress toward exploitation. SMEs that entered AAL projects with established systems – such as TELU and MEMAS in engAGE, Tech4Care in RecoveryFun, or cogvis in DIAN – were able to integrate new functionalities, validate them in real-world trials and bring them near market immediately after the project.

This approach allowed teams to focus on added value rather than building entire infrastructures from scratch. In engAGE, new AI-based evaluation methods and robot-mediated interventions were layered onto pre-existing telecare systems, allowing rapid deployment in care settings. RecoveryFun benefitted from Tech4Care's existing VR ecosystem, enabling integration of new exercises and monitoring features. DIANA adapted cogvis' safety-monitoring solution to behavioural analytics and dementia contexts, later bringing those features into the company's commercial portfolio.

Modularity also facilitated incremental exploitation. Certain components of T4ME2 (e. g. motorised lifting mechanisms or fall-detection adaptations) and BeauCoup (e. g. Magic Casket) can reach markets individually even if the full concepts are too ambitious for immediate commercialisation. Similarly, frAAgiLe informed the evolution of a broader geriatric assessment tool rather than a standalone frailty product.

Overall, the pattern indicates that incremental integration and modularity improve feasibility, reduce risk and enable SMEs to pursue commercialisation step by step. Projects attempting to deliver complete ecosystems within short timeframes faced more barriers and lower maturity at project end.

4.3.3 Sustainability depends on robust post-project pathways

The third structural pattern reveals that most barriers to long-term sustainability do not stem from lack of innovation quality but from weaknesses in post-project pathways. Several challenges are recurrent.

First, certification requirements, especially for medical or safety devices, pose significant cost and documentation burdens. ORACIA, RecoveryFun, and APH-ALARM all illustrate how technically promising prototypes face regulatory hurdles that small companies cannot navigate without additional investment or specialised partners.

Second, the funding gap between prototype and product is consistently cited as the main reason why solutions with clear societal value do not reach market. AAL funding is well suited to early validation, but most SMEs lack capital to undertake industrialisation, certification, large-scale refinement or multi-country deployment.

Third, the lack of strong industrial champions limits scalability. When projects depend on small or overstretched SMEs or when key commercial partners change strategies (e. g. in BeauCoup or PREPARIO), exploitation stalls despite good user feedback. Conversely, solutions integrated into existing SME portfolios (Tech4Care, cogvis, TELU/MEMAS) enjoy more robust pathways to continuity.

Fourth, fragmented European care markets complicate exploitation. Interoperability requirements, diverse reimbursement structures, and differing organisational cultures mean that solutions validated in one country require adaptation before scaling to another.

Despite these systemic barriers, AAL created clear value by strengthening knowledge, networks and early-stage validation. It enabled SMEs to refine concepts with real users, provided visibility for institutional cooperation and led to several follow-up projects and product integrations. However, the analysis underscores that commercialisation beyond prototype stage requires complementary instruments – including certification support, bridge financing, investor engagement and industrial partnerships.

5 Overall lessons learnt for future innovation AAL partnerships

5.1 Key findings across the three overarching programme objectives

The findings of this assessment provide a clear picture of how the AAL Programme contributed to its three overarching objectives: strengthening Europe's industrial base, improving the quality of life of older adults and their networks, and increasing the efficiency and sustainability of support and care systems. Across all three dimensions, AAL-generated impacts are visible and tangible, though their depth and scalability depend strongly on the maturity of the solutions, the stability of partnerships and the enabling conditions within national markets.

With regard to industrial strengthening, the programme has effectively stimulated early-stage innovation and supported the development of market-oriented technologies. A substantial share of projects achieved concrete commercial progress, with 15 % bringing at least one product or service to market and over half reporting substantial advancement in business or technological development. The AAL2Business support actions played an important role in this regard, helping participants to refine their business models, improve their commercialisation strategies and understand the perspectives of investors. Insights from the success stories further illustrate that projects building on existing platforms and pursuing modular architectures were particularly well positioned to progress toward market entry, indicating a maturing industrial landscape in which incremental innovation is both viable and effective.

In terms of improving the quality of life of older adults and their networks, the programme demonstrated a consistent ability to deliver solutions that support autonomy, safety, social participation and cognitive wellbeing. Survey respondents reported positive impacts on both the physical and mental health of older adults, including extended periods of independence and reduced reliance on caregivers. These findings were mirrored in the success story sample, where solutions that were co-designed with older adults and caregivers showed especially high levels of acceptance and practical relevance. The programme's user-centred approach has therefore proven critical in ensuring that innovations align with real needs and are perceived as meaningful and usable by their intended beneficiaries.

The programme also contributed to increasing the efficiency and sustainability of support and care systems. AAL solutions helped formal caregivers save time, identify risks earlier and focus more on meaningful interactions with older adults. Respondents reported reduced workload, improved coordination and enhanced openness to other digital solutions. These effects suggest that AAL-funded innovations can support systemic improvements when they are embedded into existing workflows and organisational practices. Several success stories illustrate this point by showing how solutions that fit naturally into care routines – such as behavioural monitoring tools or rehabilitation applications – can enhance the work of professionals without adding complexity.

Taken together, the findings confirm that the AAL Programme achieved multiple forms of impact across its three main objectives, and that these impacts emerged through the interaction of technology development, user engagement, cross-border collaboration and ecosystem strengthening. For national and European innovation-funding stakeholders, the lessons derived from these results point toward the value of programmes that combine technological innovation with strong user involvement and long-term market orientation. At the same time, they highlight the need to address persistent systemic barriers in order to unlock the full potential of digital solutions for ageing and care.

- AAL generated measurable impact across all three objectives: industrial strengthening, better quality of life and more efficient care systems.
- User-centred innovation and cross-border collaboration were central drivers of these impacts.
- Future funding must extend beyond early R&I to address systemic barriers such as regulation, financing and scaling.

5.2 Lessons on supporting market creation and commercialisation

The assessment shows that AAL has been particularly effective in supporting early innovation phases, helping organisations to prototype ideas, carry out user tests and build initial business strategies. However, the results also make clear that commercialisation success is closely linked to the availability of follow-up support once a project leaves the funded phase. Many teams struggled to progress beyond a validated prototype, largely due to the substantial financial and organisational demands associated with industrialisation, certification and scaling. These stages typically fall outside the reach of short-term R&I funding, yet they are essential for realising the programme's ambition of strengthening Europe's industrial base.

The experiences of launched products reveal that commercial success was most likely when solutions were developed as extensions or modules of existing platforms rather than as completely new systems. These projects benefitted from pre-existing technical infrastructures, established customer bases and clearer pathways to market, allowing them to focus effort and resources on high-value additions instead of building full ecosystems from scratch. Conversely, projects attempting to develop fully integrated solutions often reached the limits of what could be achieved within the available timeframe and resources. This suggests that future innovation programmes should encourage modular, interoperable architectures and support SMEs in designing solutions that complement existing systems.

Commercial readiness was also strongly influenced by the extent to which teams invested in business development alongside technical progress. AAL2Business played a crucial role by helping participants to refine business models, identify customer groups, understand regulatory requirements and prepare for investor engagement. Still, many projects reported that they lacked the expertise or the financial means to pursue these activities at scale after project completion. Respondents emphasised the need for additional support instruments – such as market access coaching, matchmaking with strategic partners, and targeted funding for regulatory compliance and industrialisation – in order to transform promising prototypes into revenue-generating products.

Overall, the evidence indicates that early-stage support must be complemented by more structured late-stage instruments if innovation programmes aim to contribute meaningfully to market creation. This includes funding for certification and validation, dedicated pathways for scaling, and closer integration with the industrial actors and care organisations that ultimately drive market adoption. The AAL Programme laid a strong foundation in enabling organisations to mature their ideas; the next step for funders is to ensure continuity beyond the prototype phase so that innovation can translate into sustainable economic and societal value.

- AAL effectively supported early-stage innovation, but major hurdles arise at certification, industrialisation and scaling.
- Modular solutions built on existing platforms showed strong commercial progress.
- Sustained business development support and follow-up financing are essential for successful market entry.

5.3 Lessons on end-user involvement and ensuring relevance of solutions

User involvement is one of the strongest assets of the AAL Programme and a central reason why many of the funded solutions resonate with the needs and preferences of older adults, caregivers and service providers. Projects consistently reported that iterative co-design, field trials and continuous user feedback improved acceptance, relevance and adoption. The survey results confirm this: more than 80 % of respondents agreed that involving end users improved both the usability and the relevance of the developed solutions.

Examples from the success stories demonstrate how deep engagement with users leads to solutions that address actual daily challenges rather than abstract assumptions. Solutions that were refined through real-world interaction – whether in rehabilitation settings, home environments or care organisations – were able to overcome usability barriers, reduce stigma and foster trust among target groups. This reinforces the importance of designing funding frameworks that enable projects to work with users consistently and meaningfully, including through compensation models, access to diverse user groups and opportunities for long-term iterative testing.

At the same time, the assessment shows that user involvement alone is not sufficient to ensure market relevance. Successful solutions were those that not only understood the needs of individuals but also the structural and organisational realities of national and regional care systems. Understanding reimbursement structures, interoperability requirements, professional workflows and cultural expectations proved critical, especially for solutions aiming at multi-country deployment. This insight highlights the need for innovation programmes to integrate ecosystem knowledge into project design, for example through mandatory needs analyses, country-specific market entry plans or structured collaboration with care providers.

Finally, raising awareness among older adults and professional caregivers plays an important role in fostering acceptance and adoption. Many respondents reported that AAL helped increase visibility of the opportunities and benefits of digital solutions, both within user communities and among care professionals. Future partnerships should therefore consider including dedicated resources for awareness-raising activities, communication strategies and stakeholder mobilisation, ensuring that end-user engagement extends beyond testing phases and into broader societal uptake.

Taken together, these findings underscore that user-centric innovation must be anchored in real environments, informed by system-level insights and accompanied by strategies to build

awareness and trust. This combination is essential for creating solutions that are not only technically sound but also socially meaningful and sustainable.

- Continuous user involvement is a strong predictor of adoption, usability and acceptance.
- Real-world relevance requires understanding not only user needs but also local care pathways and system contexts.
- Awareness-raising among older adults and caregivers is key to enabling uptake.

5.4 Lessons on strengthening Europe's AAL innovation ecosystem

The AAL Programme has fostered a robust and dynamic ecosystem of companies, research institutions, end-user organisations and public stakeholders across Europe. Survey results show substantial improvements in knowledge, skills and collaborative networks, with over 90 % of respondents reporting increased expertise and nearly two-thirds noting lasting benefits from partnerships established during their projects. These effects are visible not only in individual organisations but also in the wider European AgeTech landscape, where cross-border cooperation and shared learning have become increasingly common.

A key factor in strengthening this ecosystem has been the programme's ability to bring together diverse actors who would otherwise not collaborate. Many success stories demonstrate that interdisciplinary and international partnerships generated new ideas, provided access to different markets and user groups, and allowed organisations to understand regulatory and systemic differences across countries. For funders, this underlines the importance of maintaining diverse consortia and fostering transnational collaboration as part of innovation funding strategies.

Yet the assessment also reveals that the sustainability of the ecosystem depends on the presence of strong, long-term partners capable of carrying solutions beyond the project lifespan. Projects in which SMEs had clear ownership of outcomes or in which industrial partners integrated solutions into existing portfolios were more likely to progress toward commercial success. Conversely, solutions that lacked a committed long-term owner often dissipated after project completion, even when user feedback and technical results were promising. This raises important considerations for future programmes, suggesting that funding frameworks should encourage early identification of exploitation owners and promote partnerships with organisations that possess the capacity and incentives to continue development.

Support actions contributed significantly to ecosystem strengthening by creating spaces for networking, knowledge exchange and ecosystem visibility. The AAL Forum, the European Week for Active and Healthy Ageing and the AAL2Business programme were especially valued by participants, not only for generating learning opportunities but also for enhancing organisational reputation and access to partners. For future innovation initiatives, maintaining or expanding such support structures will be important to ensure that project-level work is embedded in a broader community of practice.

Overall, AAL has demonstrated that innovation ecosystems thrive when they are nurtured through long-term collaboration, non-technological support structures and clear pathways for sustainability. Future programmes should build on this legacy by deepening ecosystem integration, strengthening industry linkages and enabling more continuous collaboration beyond project funding cycles.

- AAL built strong European networks and improved knowledge and skills across organisations.
- Long-term sustainability depends on identifying committed "owners" capable of continuing development post-project.
- Support actions such as AAL2Business and AAL Forum were crucial for networking, visibility and capability building.

5.5 Lessons on barriers and systemic challenges

Despite the broad range of positive outcomes, the assessment also highlights persistent systemic challenges that limit the scalability and long-term impact of AAL-funded solutions. These challenges are particularly relevant for funders, as they point to structural issues that cannot be solved by individual projects alone but require coordinated policy, regulatory and financial interventions.

Regulatory complexity emerged as one of the most significant barriers. The share of respondents identifying regulatory hurdles as a challenge tripled compared to the 2023 assessment, with many pointing to evolving EU regulations on medical devices, data protection and health technology assessment. Projects that

had progressed furthest toward market introduction were most affected, underscoring that regulatory navigation becomes a critical bottleneck at later maturity stages. Success stories corroborate this picture, with several teams reporting the need for extensive certification processes that exceed the capacity of small organisations. Future innovation partnerships should therefore consider integrating regulatory guidance, harmonisation efforts or even regulatory sandboxes to lower these barriers.

A second major challenge lies in the funding gap that follows the project period. Around 80 % of respondents noted difficulties in securing external investment to continue development, especially for scaling activities, industrialisation and certification. This "second valley of death" prevents many promising prototypes from reaching market maturity despite strong user feedback and societal relevance. Success stories highlight that teams with access to investors, industrial partners or follow-up projects were more likely to continue development. For funders, this points to the need for multi-stage funding models, co-investment mechanisms or targeted grants for go-to-market activities.

A third challenge relates to Europe's fragmented care markets. Differences in reimbursement models, professional practices, digital maturity and regulatory frameworks make it difficult to transfer solutions across borders. Teams often needed to adapt their solutions substantially for new markets, resulting in increased cost and complexity. This fragmentation limits the scalability of innovations that might otherwise have pan-European relevance. Addressing this challenge requires coordinated European efforts to harmonise standards, support cross-country pilots and develop shared frameworks for data, interoperability and quality assurance.

Overall, the results show that systemic conditions – in particular regulation, financing and market fragmentation – shape the extent to which project-level innovations can deliver wide-reaching impact. Future innovation programmes will need to complement R&I funding with broader measures that foster alignment, reduce structural barriers and support sustainable scaling across Europe

- Regulatory requirements for health-related technologies have become a major barrier for many projects approaching market entry.
- A significant financing gap after project completion limits the ability to industrialise, certify and scale promising solutions.
- Differences between national care markets make cross-country adoption difficult and increase adaptation costs.

5.6 Concluding reflections: AAL's impact and future directions

The AAL Programme leaves behind a strong impact in the European innovation landscape. It has demonstrated how user-centred, cross-border and market-oriented research can generate tangible social and economic value. The programme has strengthened Europe's AgeTech ecosystem, enabled organisations to build capabilities and partnerships, and delivered a wide array of solutions that enhance autonomy, wellbeing and care quality for older adults. At the same time, it exposed the systemic conditions that determine whether early innovation can translate into sustainable market uptake and widespread societal benefit.

For future innovation partnerships – whether at European or national level – the lessons from AAL point toward the need for a more integrated, system-oriented approach. Programmes should continue to support user-centred R&I while extending support to later stages of the innovation cycle, including validation, certification and commercialisation. They should reinforce ecosystem-building activities, promote long-term partnerships with industry and care organisations, and provide targeted assistance for navigating regulatory frameworks. Equally important is addressing fragmentation across European care systems by supporting interoperability, cross-country piloting and shared evidence standards.

AAL has shown that meaningful impact emerges when technology development, user needs and system conditions are considered together. Building on this legacy, future initiatives have the opportunity to shape a more coherent and scalable European innovation environment – one that enables digital solutions for ageing and care not only to be developed, but also to thrive, spread and deliver long-lasting benefits across society.

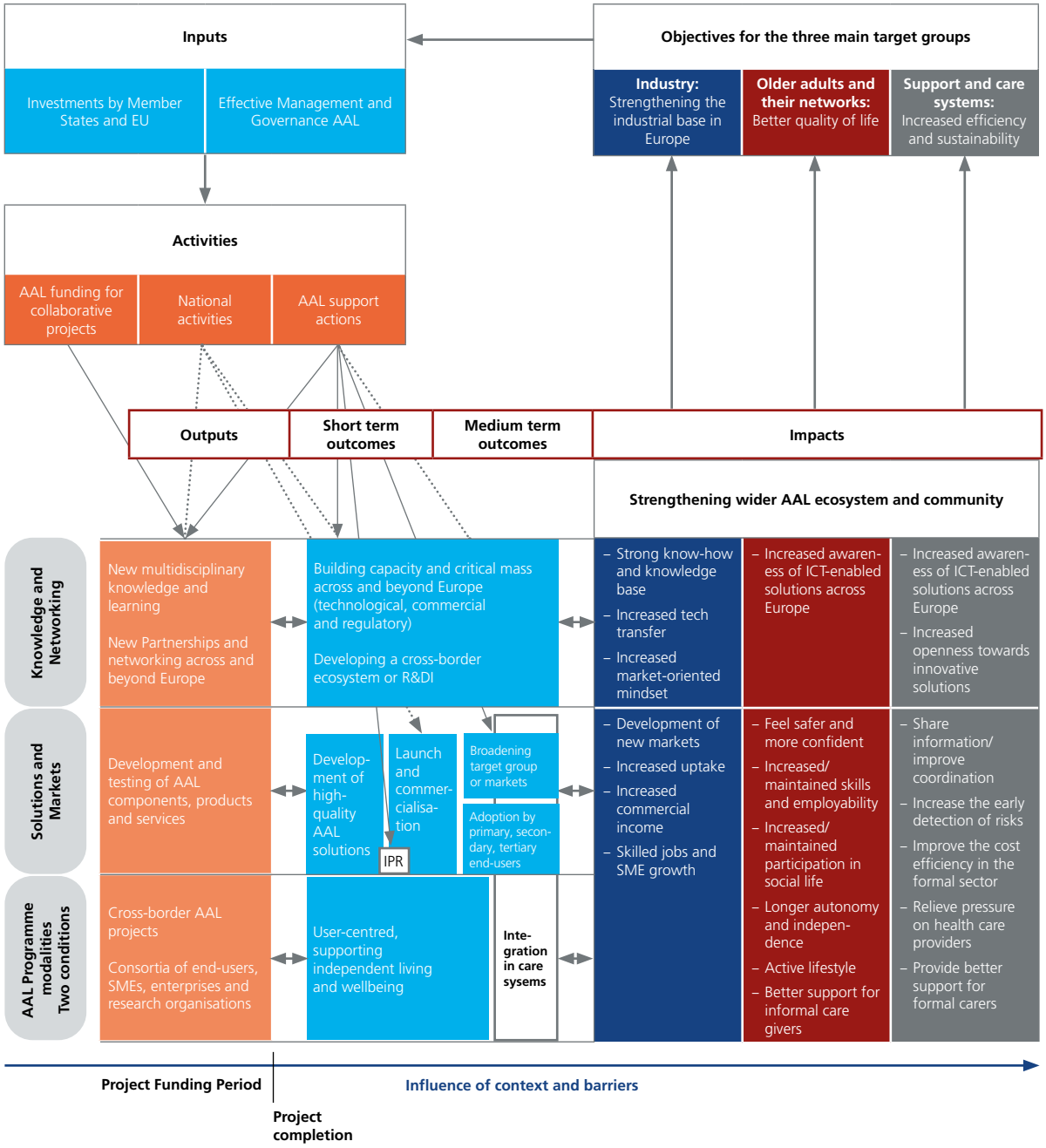
- The programme helped establish a strong, user-centred and internationally connected innovation ecosystem in the field of ageing and care.
- The main obstacles to wider impact are structural conditions such as regulation, financing and fragmented care markets, not technological limitations.
- Future partnerships must combine R&I funding with regulatory guidance, scaling instruments and system-level alignment to unlock full societal value.

Annexes

A.1 Impact assessment framework for the AAL Programme

The following figure visualises the intervention logic of the AAL Programme. This model was originally developed for the 2021 impact assessment and subsequently served as the basis for the impact analyses conducted in 2023 and 2025. It follows an established impact logic, distinguishing between inputs, activities, outputs, outcomes and impacts. Based on this framework, the programme's objectives and intended effects were defined, and the corresponding questions for the online survey were derived.

Figure 21: Overall impact assessment framework of the AAL Programme (adapted from van Hoed et al. 2023)



A.2 Survey methodology and responses

As part of the impact assessment, online surveys were conducted to collect data on the effects of the AAL Programme on project participants. To ensure comparability over time, the structure of the questionnaire was largely retained, with only minor adjustments compared to the 2021 and 2023 survey waves.

The online survey for the 2025 AAL Impact Assessment was conducted between 8 and 29 September 2025. The iit – Institute for Innovation and Technology, in close cooperation with the AAL Central Management Unit, ensured active follow-up in order to maximise participation and enhance the reliability of the analysis. In individual cases, survey deadlines were therefore extended.

Structure of the questionnaire

Products, services and components:
- Number
- Characteristics
- Impact on target groups
- Impact on revenues
- Number and type of end users/paying customers, or in the case of components, organisa-tions or sectors

Expected products or services:

- Timing
- Characteristics
- Expected impact on revenues
- Expected number of end users/paying customers
- Barriers, learnings and general outcomes/impacts of the programme
- Participation in and contribution of Support Actions

A total of 52 projects with 344 project contacts were contacted. The projects examined were funded as part of the AAL calls for proposals between 2018 and 2021. Of these, three projects originate from the 2018 call for proposals, 13 from 2019, 16 from 2020 and 20 from the 2021 call for proposals. With the exception of one project (project completion in 2025), all other projects were already completed by the end of 2024. The response rate in terms of project coverage reached 100 % – each of the 52 funded projects participated in the online survey and submitted at least one, and in some cases up to four, fully completed questionnaires. The following table shows the number of fully completed questionnaires per project.

Table 5: Overview of the number of respondents for each project in the 2025 survey.

Acronym	#	Acronym	#
AAL4ALL (A4A)	1	frAAgiLe	3
ACESO	1	GUARDIAN	2
AGAPE	1	GUIDed	1
ALTO	1	H2HCare	1
Anathema	1	HAAL	1
APH-ALARM	3	HEROES	2
BeauCoup	2	iCan	1
Buddy4All	1	ISHA	2
Care about Care, C^C	3	LEAVES	4
CAREUP	2	mHealthINX	2
ChroNoct	2	NEST	1
CleverGuard	2	ORACIA	2
CoachMyLife	1	PerciLight	1
COCARE	1	PRECISE	1
CoSoPhy_FX	1	PREPARIO	2
COTIDIANA	1	Project Alpha	2
CREATE	1	QEoL	2
DemiCare	2	Recovery Fun	3
DIANA	2	ReMember-Me	1
Easierphone	2	SAVE	2
Emilio	4	Sens4ME	2
engAGE	3	SI4SI	1
eSticky	2	SOAPTIMIST	2
EXERGETIC	2	SOLARIA	1
FaceRehab	1	T4ME2	2
FORTO 2.0	1	WisdomOfAge	1

Of the 344 people contacted, 89 completed the questionnaire in full and in a manner that allowed it to be evaluated. This corresponds to a response rate of 26 %. This rate can be considered reasonably high. As these are projects that were completed some time ago, the response rates for surveys are typically lower than for surveys of projects that are still ongoing.

Of those respondents who completed the questionnaire on their participation in the AAL programme, 76 % also participated in AAL support measures (AAL2 Business, AAL Forum and/or European Week of active and healthy ageing, Smart Ageing Prize/ AAL Challenge Prize).

Figure 23: Key figures of the survey 2025

89	**Number of respondents with complete questionnaires**
26 %	**Response rate (in relation to total number of participants – 344)**
52 out of 52	**Projects covered in total**
76 %	**Respondents who participated in Support Actions**

The following table shows the number of respondents who participated in AAL support measures.

Participation in the survey varied across the different calls. The 2019 and 2020 calls accounted for 27 % and 25 % of responses, respectively. With 42 %, the 2021 call had the highest participation rate, which can be explained by the fact that the project ended more recently.

Table 6: Participation of respondents in the AAL Actions

Year	AAL2Business	AAL Forum and / or European Week of active and healthy ageing	Smart Ageing Prize / AAL Challenge Prize
2025	23	37	8
2023	30	36	5

Figure 24: Number of participants per call in the survey 2025

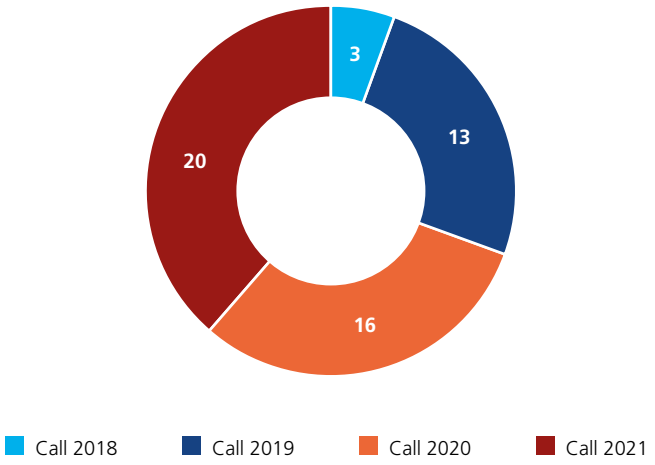
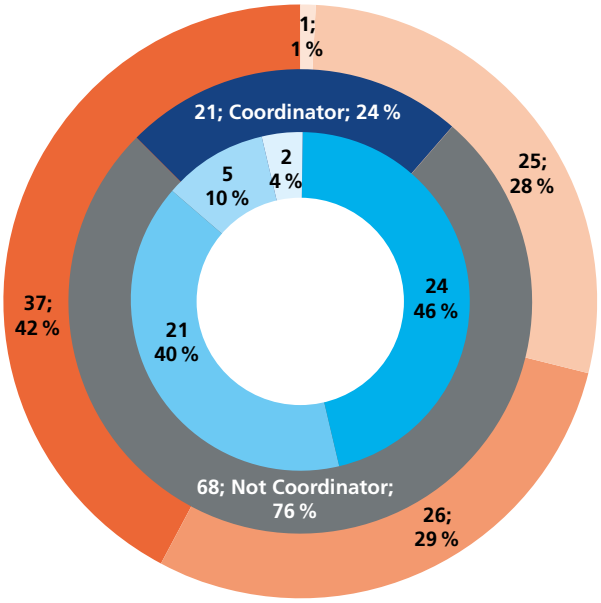


Figure 25: Participants per project role



N (Projects) = 52, N = 89

SME = Small and Medium Enterprises
USR = End-User Organisation
RES = Research Organisation
BUS = Business

only one project partner has taken part in the survey
three partners have taken part in the survey
two partners have taken part in the survey
more than three partners have taken part in the survey

Strengths and limitations of the survey data

As with the previous assessments in 2023 and 2021, a good response rate was achieved with 26 % of questionnaires completed in full (30 % including incomplete responses). The data provides an accurate picture of the current status of project implementation.

The data is characterised by:

- 100 % coverage of all projects and thus a very high level of representativeness.
- A broad sample of respondents.
- Comparability with previous surveys due to consistent questions across the various surveys.
- Consistency of results over the course of the 2023 and 2021 surveys. This confirms the validity of the data.

However, there are also some limitations: very few participants responded to some questions, which means that the data in the report must be interpreted with caution in some places. This applies in particular to the following questions: – Estimates of the number of end users, paying customers and revenue. This also applies to all questions in which the group of those with a product, service or product portfolio on the market was surveyed (approx. 13 to 19 respondents).

A.3 List of solutions developed based on participation in the AAL Programme

Name of product/service as on market	Description	Launch Date	Website
Room Activity and Bed Mobility Add-on Licenses	Licenses cover a suite of alarms and collection of statistical data regarding: Pressure ulcer prevention, sleep quality analysis, care effort analysis, restlessness alert, wandering around, day/night reversal, sun-downing effect	01.10.2024	https://cogvis.ai/product/
easierphone	Smartphone solution for seniors	01.09.2023	https://easierphone.com
KWIDO HOME	A solution for monitoring elderly people that live alone, using sensors & AI	07.04.2020	https://kwido.com/en/home-monitoring/
Memas	Memas is a life mastering assistant for people with MCI, it has become a web app	01.01.2025	adminweb.eu and memas.app
Application for iPad (unclear name)	health service	15.09.2025 (unclear)	www.ulsba.pt (not available)
Alpha-Tool	A webtool that calculates and optimised protein quality of vegan meals	01.09.2025	https://alpha-tool.eu/
Relab	Relab is a revolutionary product for supporting cognitive and physical rehabilitation. Bended is based on a gamification concept which exploits Virtual Reality (VR), offering a multitude of rehabilitation exercises as engaging serious games. The system and the method used by Bended are unique and proprietary.	01.07.2024	https://bended.it/
SENS4ME	SENS4ME offers a unique combination of physical activity tracking and personalized motivation to enable elderly individuals to maintain an active lifestyle beyond clinical settings. By supporting physical autonomy and reducing dependency on formal care, SENS4ME responds to key socio-economic challenges tied to an aging population. The clinical validation and market-focused design ensure high scalability and relevance across Europe.	02.02.2026	www.sens.dk
4Mvideo E-sport cycling	Virtual cycling for seniors exercising at home (tablet and web-apps)	-	https://4mvideo.com
SARA	Sara means Social Assistance for Residences in Aging (Italian Marketplace)	15.10.2025	under development

A.4 Interview guide for AAL success stories

Duration: ~30 minutes
Interviewees: Project coordinator(s) and/or key partner(s)
Format: Semi-structured online interview

1. Introduction (2–3 min)

- Briefly introduce the interviewer and purpose of the interview.
- Clarify how the information will be used (AAL publication, validation before publication).
- Confirm consent for citation and visuals if applicable.

2. About the Project (5 min)

Objective: Capture concise background for the story template.

- Could you briefly describe your project in your own words?
- What challenge or societal need did it address?
- What makes your approach distinctive compared to other initiatives?
- Who were your main partners (types, roles, countries)?
- What is the current status of your AAL solution or concept (market-ready, in preparation, under development)?

(Note for interviewer: Verify story type – Product/Solution/ Project/Concept.)

3. From Project to Impact (10 min)

A. Organisational & Learning Impact

- What were the most important learnings for your organisation from participating in the AAL project?
- Did AAL participation strengthen your visibility, reputation, or network? In what ways?
- Have you established new partnerships or collaborations that continue beyond the project?

B. Solution Development & AAL Contribution

- What did AAL participation enable that would not have happened otherwise (e. g., access to partners, users, markets)?
- How did user involvement shape your solution?
- Did AAL support actions (e. g., AAL2Business, AAL Forum) contribute to your progress?

4. Market, Users and Impact (8–10 min)

Depending on story type:

For Type 1 – Products/Solutions (market-ready):

- Where is your product/service currently available?
- Who are your main end-users and customers?
- What impact do you see among users (examples welcome)?
- What are your plans for scaling or entering new markets?

For Type 2 – Projects (nearing market):

- What are the next steps to bring your solution to the market (investments, partnerships, pilots)?
- Which markets or user groups do you target first?
- How did AAL prepare you for market launch?

For Type 3 – Concepts (early stage):

- What has been achieved so far and what comes next in your development?
- What kind of partners or support are you currently looking for?
- What impact do you expect your concept to have once implemented?

5. Looking Ahead & Lessons Learned (3–4 min)

- What were the biggest challenges and how did you overcome them?
- What advice would you give to other innovation teams in ageing and care technology?
- Any final thoughts or messages about the value of AAL for your work?

Visuals and Quotes

- Please provide picture, incl. credits and permission to use
- Please provide key visual, incl. credits and permission to use