



EUROPEAN SENIOR FRIENDLY COMMUNITIES

PROJECT GUIDEBOOK

In collaboration with:



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the European Union**

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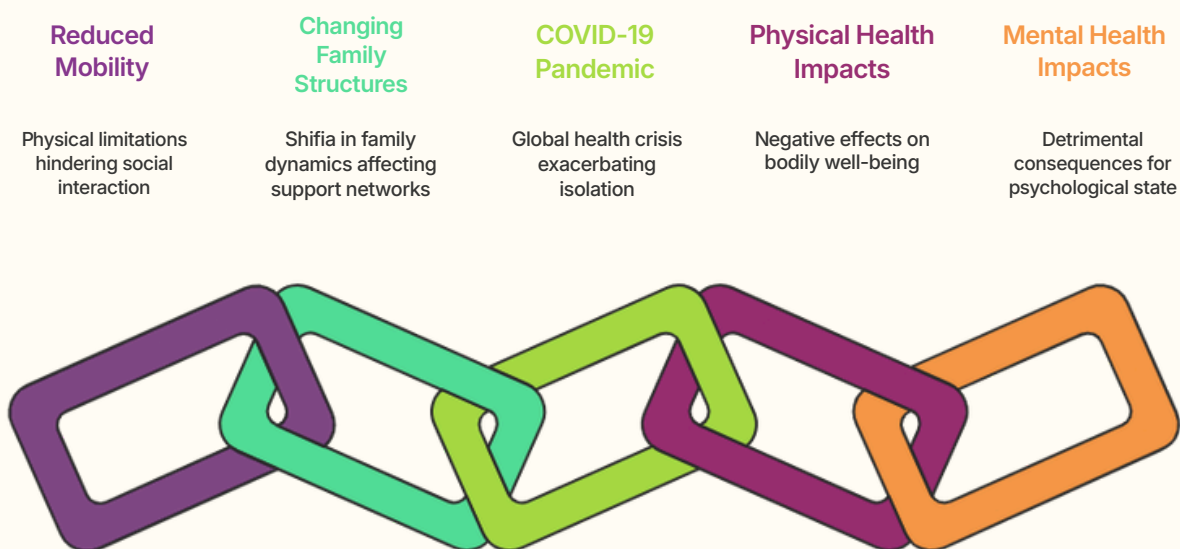
Introduction to ESFC Project



Context and Background

Europe is undergoing a significant demographic transformation. The proportion of senior adults within the population continues to grow steadily, reflecting improvements in healthcare, living conditions, and life expectancy. According to Eurostat data, in 2020 approximately 20.6% of the European Union's population was aged 65 or older, representing an increase of around 3% compared to the previous decade. This trend is expected to continue in the coming years, making population ageing one of the most important societal developments across Europe.

The Growing Challenge of Senior Social Isolation



While longer life expectancy is a major achievement, it also presents new social challenges. One of the most pressing issues affecting senior adults is social isolation and loneliness, which can have significant consequences for both physical and mental health. This situation has been further intensified in recent years by factors such as reduced mobility, changes in family structures, and particularly the impact of the COVID-19 pandemic, which increased the distance between individuals and communities.

Social isolation not only affects the wellbeing of senior people but also represents a loss for society as a whole. Seniors possess valuable knowledge, life experience, and cultural memory, which can contribute positively to communities and to intergenerational learning. Ensuring that senior adults remain active participants in society is therefore essential for building inclusive and resilient communities.

For this reason, European policies increasingly emphasise the importance of active ageing, social participation, and age-friendly environments. These priorities are closely aligned with the fundamental values of the European Union, as expressed in the Treaty of Lisbon and the EU Charter of Fundamental Rights, which highlight dignity, equality, non-discrimination, and solidarity between generations. In particular:

ARTICLE 1

**Prohibits
discrimination
based on age.**



ARTICLE 25

**Recognises the right of
senior persons to lead a life
of dignity and independence
and to participate in social
and cultural life.**

Promoting inclusive communities where senior adults feel respected, safe, and able to contribute actively to society is therefore a shared responsibility for local authorities, organisations, and citizens across Europe.

The ESFC project is also inspired by the principles of the WHO Age-Friendly Cities and Communities Framework, which identifies key domains that influence the quality of life of senior adults. These include areas such as community and health services, transportation, housing, social participation, outdoor spaces, and respect and social inclusion.



**WHO Global Network
for Age-friendly Cities
and Communities**

ESFC Project

The ESFC – European Senior Friendly Communities project was developed to respond to the challenges associated with population ageing and to promote more inclusive and supportive communities for senior adults.

The project aims to strengthen the role of seniors within local communities by encouraging participation, fostering collaboration between different community actors, and promoting age-friendly environments. Through the development of training modules, practical resources, and community-based initiatives, ESFC seeks to empower seniors while also supporting educators, stakeholders, and local organisations in understanding and responding to the needs of an ageing population. More specifically, the project focuses on:

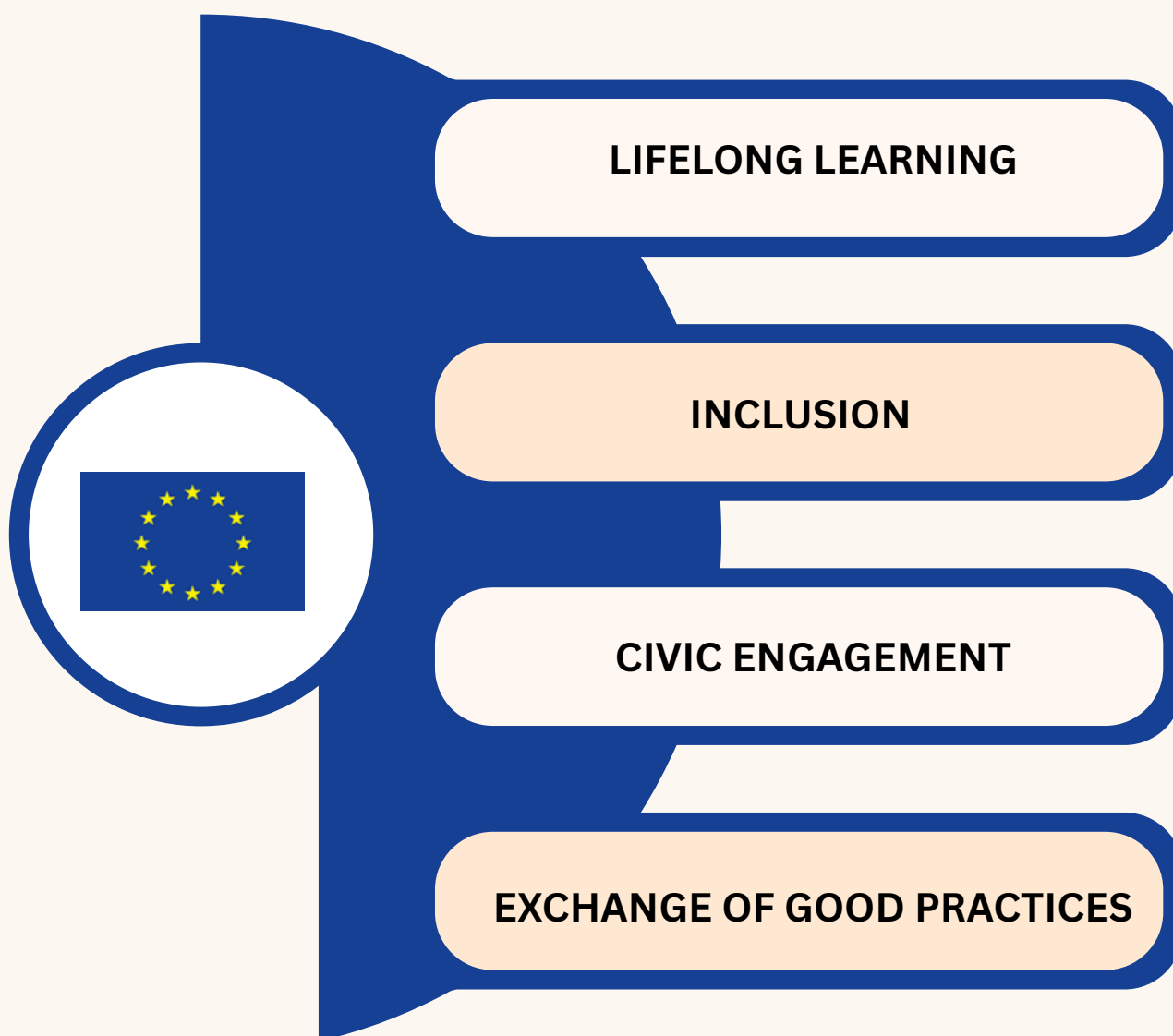
Promoting learning opportunities tailored to the needs of seniors

Strengthening local partnerships that provide social, cultural, and educational opportunities

Encouraging civic participation and engagement among senior adults

Sharing experiences and good practices between European partners

Developing practical tools to support the creation of more inclusive and age-friendly communities



The ESFC project is co-funded by the **Erasmus+ Programme of the European Union**, which supports international cooperation in the fields of education, training, youth, and sport.

Erasmus+ aims to promote lifelong learning, inclusion, civic engagement, and the exchange of good practices between organisations across Europe. Through collaborative projects, the programme encourages the development of innovative educational tools and approaches that respond to societal challenges.

Within this framework, ESFC contributes to Erasmus+ priorities related to inclusion and diversity, active citizenship, and community participation, particularly focusing on the needs and potential of senior adults as active members of society.

Project Partnership

The ESFC project is implemented by a consortium of European organisations working together to promote senior inclusion, community development, and lifelong learning.

The project coordinator, **Aging to the Future (Spain)**, is a non-profit organisation dedicated to promoting the wellbeing, rights, and active participation of senior adults in an evolving and increasingly digital society. The organisation develops innovative initiatives focused on digital inclusion, intergenerational learning, and community-based solutions that support seniors, particularly those living in rural or vulnerable contexts.

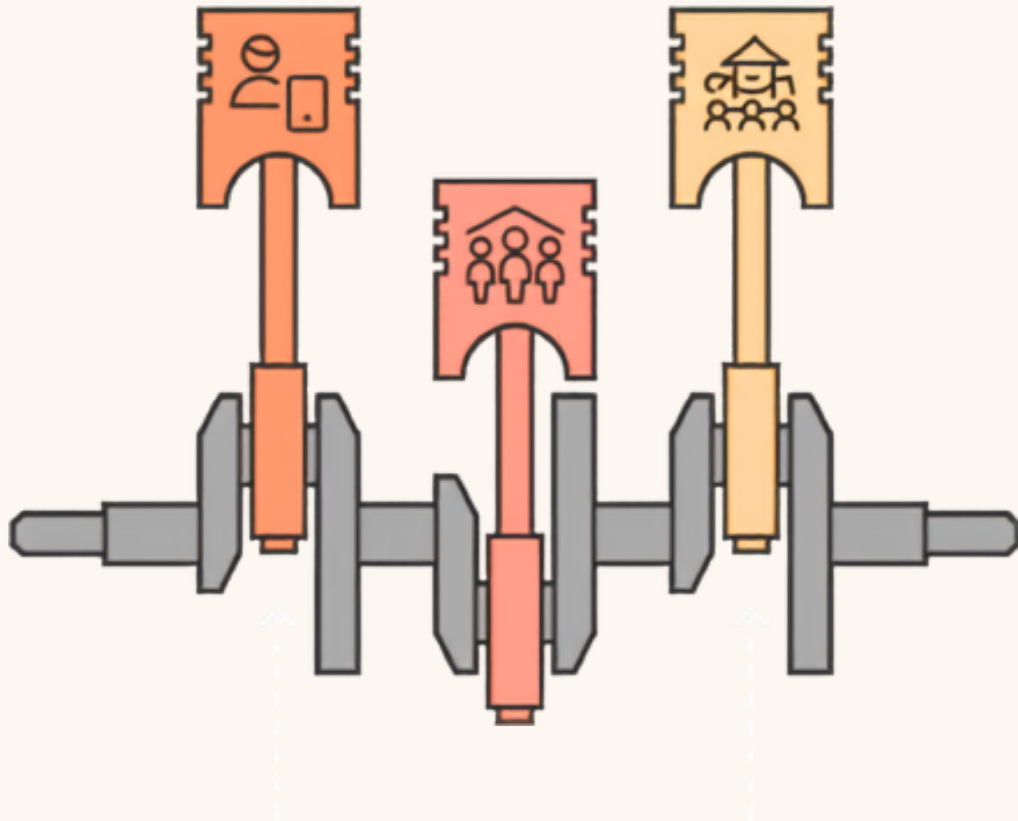
The consortium also includes **Sinergia (Italy)**, an NGO committed to promoting social inclusion, human rights, and social innovation through non-formal education and community engagement. Sinergia has extensive experience in activating vulnerable groups and fostering social participation through innovative educational approaches.

Another partner is **Meath Partnership (Ireland)**, a well-established organisation specialising in rural and community development. With extensive experience in European cooperation projects, Meath Partnership works to address social exclusion and promote lifelong learning, volunteering, and community engagement through a wide range of local and international programmes.

Together, these organisations combined their expertise in adult education, social inclusion, and community development to create practical resources that support the development of **senior-friendly communities across Europe**.



ESFC Consortium



Project Coordinator

Aging to the Future (Spain) focuses on digital inclusion and intergenerational learning for seniors.

Project Partner

Sinergia (Italy) promotes social inclusion and human rights through non-formal education.

Project Partner

Meath Partnership (Ireland) addresses social exclusion and promotes lifelong learning in rural areas.

A Collaborative consortium of European Expertise

Node 1: Italy (Sinergia)

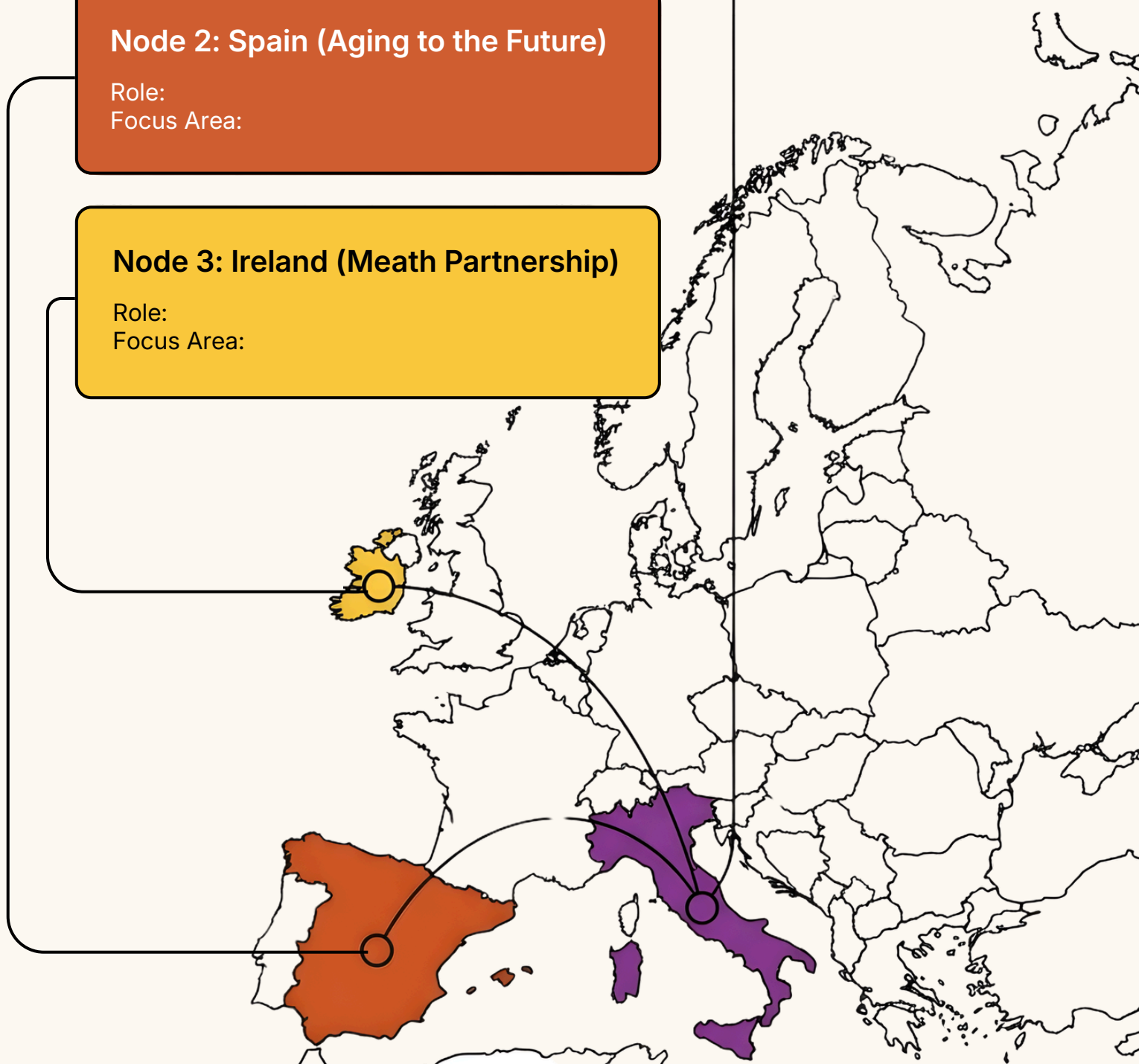
Role:
Focus Area:

Node 2: Spain (Aging to the Future)

Role:
Focus Area:

Node 3: Ireland (Meath Partnership)

Role:
Focus Area:



Guidebook Overview



Aim of the Guide

Purpose and Intended Use

The European Senior Friendly Communities (ESFC) Guide has been developed as a practical and educational resource to support the creation and strengthening of age-friendly communities across Europe. Its main purpose is to provide a structured framework that helps local actors understand the key dimensions of senior-friendly environments and develop concrete actions to improve the quality of life, participation, and well-being of older people.

The guide is designed to translate the principles of age-friendly communities into accessible learning modules and practical activities that can be implemented in different local contexts. Drawing on the framework of the World Health Organisation on age-friendly cities and communities, the ESFC Guide focuses on six thematic areas that are particularly relevant to the daily lives of seniors: community and health care, transportation, housing, social participation, outdoor spaces and buildings, and respect and social inclusion.

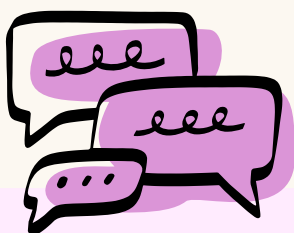
The guide supports communities in:



Understanding the challenges and opportunities related to population ageing.



Promoting active ageing and social inclusion of seniors.



Encouraging collaboration between citizens, local authorities, educators, and service providers.



Developing learning activities and community initiatives that foster senior-friendly environments.

Beyond providing knowledge, the guide serves as a practical tool for training, community engagement, and policy dialogue. It can be used to organise workshops, stimulate discussion among community actors, and support the development of local initiatives and agreements aimed at improving the age-friendliness of communities.

The ESFC Guide has also been designed to support the piloting and testing of educational modules in real community settings, allowing partners and stakeholders to assess the effectiveness and adaptability of the proposed activities while gathering feedback from participants.



Target Audience

The ESFC Guide addresses three main groups that play a crucial role in building senior-friendly communities. Each group can use the guide according to its specific role, interests, and level of engagement.

Seniors

Older adults are at the center of the ESFC approach. The guide provides accessible training content and participatory activities that encourage seniors to reflect on their community environment, share their experiences, and actively contribute to identifying solutions that improve everyday life. Through these activities, seniors are empowered to become active participants in shaping more inclusive and supportive communities.



Educators and facilitators

Educators working in adult education, community learning, or intergenerational initiatives can use the guide as a pedagogical resource. It offers training materials, methodological guidance, and practical activities that can be implemented in workshops or learning programs involving seniors and other community members. The guide supports educators in facilitating dialogue, promoting participatory learning, and raising awareness about the concept of senior-friendly communities.



Stakeholders and community actors

Local stakeholders—including public authorities, service providers, civil society organisations, businesses, and community leaders—can use the guide to better understand the needs and perspectives of seniors and to explore practical ways to improve policies, services, and infrastructures. The activities and resources included in the guide encourage stakeholders to engage in collaborative processes and to contribute to the development of local agreements and initiatives that support age-friendly environments.



In addition, the guide can also be useful for local communities and citizens, who play an important role in creating inclusive and supportive environments where older people can remain active, connected, and respected members of society.

How to Navigate and Use the Guide

The ESFC Guide has been structured to be user-friendly and adaptable to different learning and community contexts. Readers can explore the guide sequentially or focus on specific sections according to their interests and needs.

After the introductory section presenting the project context and objectives, the guide is organized into six thematic modules, each addressing a key dimension of senior-friendly communities:



Community & Health Care



Transportation



Housing



Social Participation



Outdoor Spaces and Buildings



Respect and Social Inclusion

Each module contains several elements designed to support learning and practical implementation:

Theoretical introduction: providing key concepts and background information on the topic.

Status quo analysis, summarising insights gathered through focus groups conducted with seniors, citizens, and service providers.

Learning outcomes, identifying the knowledge, skills, and attitudes that participants can develop.

Training resources, offering references and materials for further learning.

Educational tools and activities, designed specifically for seniors, educators, and stakeholders.

Users can select activities according to the target group they are working with and adapt them to the specific characteristics of their local context.

At the end of the guide, an Assessment Section provides tools for evaluating the learning process and the impact of the activities. These include feedback forms, questionnaires, and templates to help educators and project partners assess participants' experiences and measure the outcomes of the training modules.

This modular structure allows the guide to function both as a training manual and a community engagement tool, supporting educators, stakeholders, and seniors in jointly exploring solutions that contribute to more inclusive and age-friendly communities.



MODULE 1

Community & Healthcare



EUROPEAN SENIORS FRIENDLY COMMUNITIES GUIDELINE

MODULE: COMMUNITY AND HEALTH CARE

THEORETICAL INTRODUCTION

Community health care is a vital aspect of public health, focusing on improving the well-being of populations by addressing health disparities, promoting preventive care, and ensuring accessibility to essential health services. It integrates multiple theoretical concepts, including **Primary Health Care (PHC)**, **Social Determinants of Health (SDOH)**, **Health Promotion**, and **Community Participation**.

Primary Health Care (PHC) is a foundational concept emphasising universal access to essential health services, equity, and preventive care. It was formalised in the Alma-Ata Declaration (1978), highlighting the importance of community-based approaches in healthcare delivery.

Social Determinants of Health (SDOH) refers to non-medical factors influencing health outcomes, such as socioeconomic status, education, environment, and access to healthcare services. The WHO identifies SDOH as key contributors to health inequities, requiring interventions beyond clinical settings to ensure holistic care.

Health Promotion involves strategies that empower individuals and communities to take control of their health. The Ottawa Charter for Health Promotion (1986) emphasises enabling, mediating, and advocating for health through policies, education, and community initiatives. Preventive measures such as vaccinations, screening programs, and lifestyle modifications are integral to this concept.





Community Participation is crucial for effective health interventions. Theories like Freire's Empowerment Model emphasise participatory education, where communities actively engage in identifying and solving health issues. The Social Ecological Model also highlights the influence of individual, interpersonal, organisational, and societal factors on health outcomes.

In summary, community health care is a multidisciplinary field that integrates social, economic, and environmental factors to achieve equitable health outcomes. By applying these theoretical concepts, health professionals can design sustainable interventions that improve community well-being.



STATUS QUO

Across Europe, seniors face significant barriers in accessing healthcare services, highlighting a pressing need for more inclusive and senior-friendly systems. Long waiting times, a shortage of medical professionals, and an increasing reliance on digital platforms for appointments create substantial obstacles for older adults who require timely and accessible care. The lack of available doctors, particularly in rural areas, means that many seniors must wait extended periods to receive basic medical attention, impacting their overall well-being.

Furthermore, home-based healthcare services remain largely insufficient, leaving seniors with mobility challenges struggling to reach hospitals and clinics. While aging populations increasingly require medical support at home, current healthcare systems rely heavily on in-person visits to medical facilities, which are often difficult or impractical for seniors with limited mobility. The absence of widespread home visit programs adds to the burden on older adults and their families, reinforcing a sense of dependency that many wish to avoid.

Another critical issue is the digitalisation of healthcare services, which, while beneficial for some, disproportionately excludes seniors. Many essential services, including appointment booking, prescription renewals, and medical consultations, are now managed through online platforms and mobile applications. However, a significant portion of the elderly population lacks digital literacy skills or access to the necessary technology, leaving them unable to navigate these systems independently. As a result, many seniors depend on family members or caregivers to access healthcare, undermining their autonomy and creating additional stress for caregivers.

Compounding these issues is the fragmentation of healthcare services, where a lack of coordination among different providers leaves seniors confused about where to seek assistance. Medical, social, and community-based services often operate in isolation, making it difficult for older individuals to find the support they need. Without clear communication channels and a streamlined approach to healthcare, seniors frequently encounter gaps in service delivery, delaying treatment and increasing their vulnerability.

Additionally, mental health and social well-being remain largely overlooked in discussions about senior healthcare. Loneliness and social isolation have a profound impact on seniors' emotional and physical health, yet mental health services tailored to older adults are scarce. While social participation is essential for maintaining cognitive and emotional well-being, many seniors experience limited engagement opportunities, contributing to increased stress, anxiety, and depression.

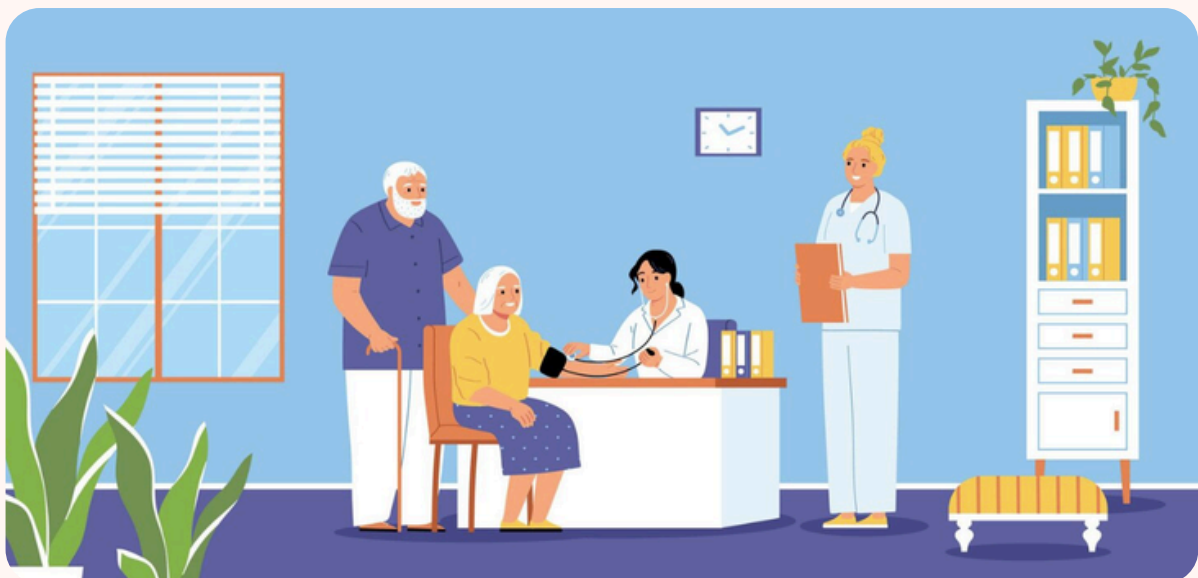
STATUS QUO

The stigma surrounding mental health in older populations further discourages them from seeking the help they need, resulting in unmet psychological and emotional needs

In summary, the current healthcare landscape presents numerous challenges for older adults, many of whom struggle to access timely, affordable, and inclusive medical support. Addressing these barriers requires a more integrated approach, incorporating home-based care, digital accessibility training, improved service coordination, and greater attention to mental health and social inclusion. Only by tackling these fundamental issues can European communities become truly senior-friendly and support the well-being of aging populations.

Country-Specific Findings

- Italy: Public healthcare is underfunded, leading to long waits and dependence on private care. Many seniors don't know about available healthcare services.
- Ireland: Although medical cards provide entitlement to healthcare services, many older adults still face difficulties accessing care because of long waiting lists, shortages of GPs and specialists, and limited availability of providers participating in public schemes. Access to dental, hearing, therapy, and non-urgent GP services can therefore be delayed or uneven depending on the region.
- Spain: Doctor shortages and age discrimination make healthcare inaccessible. Appointments are often digital-only, excluding seniors who cannot use technology.





LEARNING OUTCOMES	
EDUCATORS	
Knowledge	
• Understand key concepts of community health care, including Primary Health Care (PHC), Social Determinants of Health (SDOH), and health promotion strategies. • Recognise the importance of preventive care, chronic disease management, and mental health in community settings. • Learn about evidence-based methods for educating diverse populations on health-related issues.	
Skills	
• Develop and implement community health education programs tailored to different age groups and cultural backgrounds. • Use interactive and participatory teaching strategies to engage learners effectively. • Assess health literacy levels and adapt communication to improve understanding and behavior change.	
Attitudes	
• Promote inclusivity and respect for diverse cultural and socioeconomic backgrounds. • Encourage lifelong learning and adaptation to evolving public health challenges. • Foster collaboration with health professionals, stakeholders, and local actors.	

LEARNING OUTCOMES

STAKEHOLDERS AND LOCAL ACTORS

Knowledge

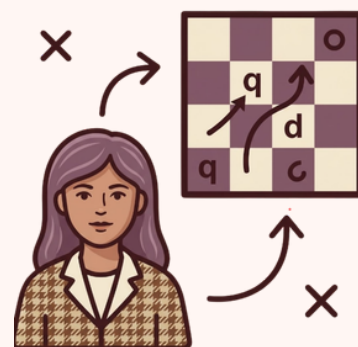
- Gain insight into public health policies, healthcare accessibility, and the impact of community-based interventions.
- Understand the role of local governance, NGOs, and healthcare institutions in promoting community health.
- Learn about funding opportunities and resources for sustainable health initiatives.

Skills

- Develop partnerships with healthcare providers, educators, and community members to implement effective programs.
- Advocate for policies that improve community health and reduce inequalities.
- Use data-driven decision-making to allocate resources efficiently.

Attitudes

- Commit to ethical leadership and social responsibility in healthcare initiatives.
- Prioritise community engagement and participation in health-related decision-making.
- Support innovative and sustainable solutions for long-term health improvement.





LEARNING OUTCOMES

SENIORS

Knowledge

- Increase awareness of healthy aging practices, including nutrition, physical activity, and mental health care.
- Understand common age-related health conditions and preventive strategies.
- Learn about available healthcare services and community resources.

Skills

- Apply self-care techniques to maintain independence and well-being.
- Navigate the healthcare system and advocate for personal health needs.
- Participate in community activities that promote social engagement and mental well-being.

Attitudes

- Develop a proactive and positive approach to aging.
- Foster resilience and adaptability in managing health challenges.
- Encourage intergenerational learning and sharing of experiences within the community.

These objectives ensure that each group contributes to and benefits from a strong, health-focused community ecosystem.

EDUCATIONAL TOOLS	
ACTIVITY TITLE: "Communication and Health: Simulation Workshop for Educators"	
Target: <i>for educators</i>	
Duration	75 Minutes
Materials*	1. Cards with simulated situations 2. Role-play props (canes, simulated glasses, etc.) 3. Clock or stopwatch 4. Observation forms with evaluation criteria
Description (2000 characters):	Activity: Role-Playing Communication Scenarios Objective: To help educators practice clear, empathetic, and adaptive communication with older adults by simulating real-life challenges. Step 1: Introduction to Communication Barriers (10–15 minutes) Start with a brief group discussion or mini-lecture introducing common barriers to communication with older adults, such as: • Hearing and vision impairments • Memory difficulties • Fear or mistrust (e.g., of technology or health interventions) • Emotional factors (e.g., isolation, fear, frustration) Step 2: Role-Play in Pairs or Trios (40 minutes) Participants form small groups (2–3 people). They rotate roles between "educator," "senior," and "observer." Each group receives a scenario card, such as: • A senior who doesn't understand how to renew their digital prescription • A senior who is afraid of getting vaccinated • An isolated older adult who refuses to join community health activities

	The “educator” must: • Use clear, slow, and adapted language • Maintain eye contact and use visual examples • Build trust and encourage participation Each simulation lasts 5–7 minutes, followed by brief structured feedback from the “observer.” Step 3: Group Feedback and Reflection (15–20 minutes) After the simulations, come together as a group to share: • What communication strategies worked best? • What challenges came up repeatedly? • How did the role of the “senior” feel? What did observers notice that helped or hindered effective communication?
Tips for trainers	• Provide examples of good communication at the beginning (you can use a short video or demonstrate it in person). • Make sure roles rotate so everyone experiences different points of view. • Encourage reflection afterward: What did they feel? What worked? What can be improved? • Validate the use of empathy and active listening as key tools, beyond the technical content. • Invite participants to share real-life experiences if they feel comfortable, enriching collective learning.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Learning Circle: Planning Community Interventions"	
Target: <i>for educators</i>	
Duration	90 Minutes
Materials*	1. Whiteboard or flipchart 2. Markers 3. A3 sheets or flipcharts 4. Cards with fictitious community/senior profiles 5. Computers or tablets (optional for quick search)
Description (2000 characters):	Activity: Designing Health Interventions for Senior Adults Objective: To provide educators with hands-on experience planning community-based health interventions collaboratively and contextually. Step 1: Introduction to the Scenario (10–15 minutes) Participants are divided into small groups. Each group receives a fictional but realistic community profile, which includes: • Sociodemographic data • Local health and social challenges • Health literacy levels • Available resources and stakeholders Step 2: Group Work – Planning the Intervention (45 minutes) Each group takes on the role of a community health program planning team. Their task is to design a short, educational intervention targeting older adults in the assigned community. They will answer the following guiding questions: • What is the priority health issue in this community? • Which stakeholders need to be involved? • What educational methods will they use? (talks, visual materials, games, etc.) • How will they ensure the active participation of seniors? • How will they evaluate the impact of the intervention? Step 3: Group Presentations (20 minutes) Each group presents their proposal to the full group (5 minutes per group). Encourage brief follow-up questions or peer feedback.

	Step 4: Group Reflection and Debrief (10 minutes) Facilitated discussion to reflect on: • Which proposals were the most creative or feasible? • Common patterns or gaps across group strategies • Key takeaways about adapting interventions to real-life community needs
Tips for trainers	• Encourage proposals that are not exclusively clinical, but rather address psychosocial and structural issues (such as social isolation or digital barriers). • Encourage materials to be inclusive and adapted to people with low literacy or digital skills.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Open Talk: Citizen Listening on Health and Well-being in Old Age"	
Target: <i>for stakeholders and local actors</i>	
Duration	90 Minutes
Materials*	1. Open or visible space (square, market, cultural center, fair) 2. Tables and chairs 3. Visible signs with key questions 4. Cards for writing opinions or suggestions 5. Voice recorder (optional, with consent) 6. Ballot box or mailbox for anonymous proposals
Description (2000 characters):	Activity: Stakeholders engage in dialogue with older adults through an informal listening space Objective: To gather first-hand insights from older adults about their experiences with health, well-being, and community life, while building trust between stakeholders and citizens. Step 1: Setting Up the Citizen Clinic (15 minutes) Stakeholders organise an open, informal space in a public setting commonly used by seniors (e.g., a community center, park, or clinic waiting area). Several thematic panels are displayed, each with a guiding question such as: • "What helps you stay well in your daily life?" • "What is most difficult when visiting a doctor or asking for help?" • "What would you like your neighborhood to be like in 10 years if you're still living here?" Step 2: Gathering Voices (45 minutes) Seniors are invited to engage in short, informal conversations with facilitators or to write their answers on sticky notes or cards posted on the panels. The tone should be respectful, friendly, and non-institutional, creating a safe space for open expression.

	• What educational methods will they use? (talks, visual materials, games, etc.) • How will they ensure the active participation of seniors? • How will they evaluate the impact of the intervention? Step 3: Feedback Collection and Observation (15 minutes) Stakeholders take notes, observe recurring themes, and collect all written contributions. Special attention is paid to expressions of unmet needs, hidden barriers, or aspirations that can inform future planning. Step 4: Sharing Back with the Community (15 minutes) Responses are compiled into a citizen report or transformed into a participatory mural or visual display. This material is shared with the local community and used to support policy dialogue, planning, or advocacy.
Tips for trainers	• Choose a location that is highly accessible, safe, and familiar to the senior population. • Offer a welcoming space: coffee, water, comfortable chairs, and good signage. • Train stakeholders in active listening, without promising immediate solutions. • Publicly validate each contribution ("what you say is important, and we will include it in our final report"). • Document the results and, if possible, provide public feedback to the community to close the participatory cycle.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	

ACTIVITY TITLE: "Neighbourhood Walk: Detecting Obstacles to Healthy Aging"	
Target: <i>for stakeholders and local actors</i>	
Duration	2 hours (1 hour of walking + 1 hour of reflection)
Materials*	1. Neighbourhood/area map (can be printed or used as an app like Google Maps) 2. Camera phones or digital cameras 3. Notebooks or observation sheets (with categories: accessibility, signage, transportation, community resources, etc.) 4. Reflective vests if using public spaces
Description (2000 characters):	Activity: Participatory walk and reflection with older adults Objective: To assess the age-friendliness of a neighborhood by walking through it with seniors and stakeholders, identifying barriers, resources, and opportunities for healthy aging. Step 1: Introduction and Team Formation (10 minutes) • Participants (stakeholders, local authorities, health professionals, NGOs) are introduced to the purpose of the activity. • Mixed small groups are formed, each including older adults and stakeholders. • Each group receives simple data collection tools (clipboards, phones/cameras, map outlines, post-its). Step 2: Participatory Walkthrough (60 minutes) Groups walk through a predefined area of the community, documenting: • Physical barriers (e.g., broken sidewalks, lack of benches or ramps) • Existing resources (e.g., pharmacies, parks, community centers) • Underused spaces that could serve health or social purposes • Real-time comments and stories from older adults about the neighborhood • Photos and notes are collected as evidence.

	Step 3: Debrief and Mapping Session (35 minutes) Back at the meeting point (e.g., city hall or civic center), the groups: • Share their findings verbally • Create a mind map or poster organizing barriers, assets, and opportunities • Group the ideas into short-term, medium-term, and long-term solutions Step 4: Final Reflection (15 minutes) Open circle question: • "What could we improve with a low budget and a strong will?" • Encourage each participant to propose at least one feasible action.
Tips for trainers	• Invite active seniors from the neighborhood to participate as "experience guides." • Ensure accessibility along the route and frequent breaks (seating, hydration). • Provide simple data collection sheets with pictograms or concrete items. • Encourage active listening without interrupting or justifying seniors' comments. • Encourage them to translate what they observe into real actions, even small ones (e.g., adding a bench, improving signage, opening a community space on weekends).
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Wellness Recipe Book: Knowledge and Flavors for a Healthy Life"	
Target: <i>for seniors</i>	
Duration	2 sessions of 90 minutes each
Materials*	1. Printed or blank recipe sheets 2. Markers, colored pencils, scissors, glue 3. Magazine clippings or printed images (food, people, nature, etc.) 4. Large table for group work 5. Recorder or cell phone for recording stories (optional)
Description (2000 characters):	Objective: To celebrate and share health-promoting traditions by combining food, memory, and emotional well-being through a participatory creative process. Session 1: Sharing Recipes and Wellness Practices (90 minutes) Step 1: Welcome and Warm-up (10–15 minutes) Ask participants: • What food reminds you of feeling well? • What small daily habit helps you feel good emotionally? • Create a relaxed, storytelling atmosphere. Step 2: Collecting the Recipes (50–60 minutes) Participants are invited to share: • A healthy traditional recipe (e.g., herbal tea, light dish, home remedy) • A personal wellness practice (e.g., gardening, walking with friends, dancing, etc.) • Each person writes or draws their recipe on a recipe card and decorates it freely with pens, stickers, or cutouts. Optional: Record a short audio story to go with it.

	Step 3: Wrap-Up and Teaser for Next Session (10–15 minutes) Briefly present a few examples. Explain that next time the group will turn their creations into a shared cookbook and celebrate their collective knowledge. Session 2: Creating and Celebrating the Cookbook (90 minutes) Step 1: Welcome Back and Review (10 minutes) Recall the recipes and practices shared. Arrange them on a table or wall for all to see. Step 2: Collective Assembly and Sharing (45–50 minutes) • Work in small groups to name the cookbook, finalise the recipes, and bind or assemble the materials. • Each group can present a few entries, explain their meaning, or show a demo (e.g., tea preparation, breathing technique). • Optional: display some printed versions or digital slides. Step 3: Celebration and Distribution (25–30 minutes) • Give a printed or digital copy of the cookbook to each participant. • Discuss ways to share it with others (e.g., local health center, community library). • Close with a round of appreciation: ◦ What did you enjoy most? ◦ What practice from someone else will you try this week?
Tips for trainers	• Value all contributions without medical judgment, including traditional knowledge. • Provide healthy suggestions if there is an openness to it (for example, salt-free or lower-sugar versions). • Encourage peer-to-peer sharing, humor, and mutual recognition. • If someone has difficulties writing, they can dictate their recipe to someone else. • This activity can lead to a community publication or intergenerational health fair.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	

ACTIVITY TITLE: "Memory Trail: A Walk with Memory and Movement"	
Target: <i>for seniors</i>	
Duration	1 session of 2 hours
Materials*	1. Map of the neighborhood or town (can be printed or hand-drawn) 2. Post-its or colored cards 3. Adhesive tape 4. Camera or cell phone for recording 5. Optional: portable audio for background music
Description (2000 characters):	Objective: To combine light physical activity with storytelling and collective memory, strengthening social bonds and community identity. Step 1: Welcome and Introduction (15–20 minutes) • Meet at an accessible starting point (e.g., neighborhood center, plaza). • Distribute a simple map or outline of the walking route. • Explain the activity: Participants will walk through familiar streets and be invited to share personal stories tied to specific locations. Provide blank memory cards with prompts like: • "I used to go here with my children..." • "This is where I met my partner..." • "This building meant a lot to me because..." Participants can write or draw on their cards. Step 2: Guided Memory Walk (60 minutes) • The group takes a gentle walk through the neighborhood. • At each designated stop, participants may: ◦ Share a memory out loud Place their card at the location as a symbolic "memory footprint" • Optional: Play background music from their youth or pause for short chats and rest stops.

	Step 3: Reflection and Mural Creation (30–35 minutes) • Return to the starting point. • Collect all cards, photos, and thoughts. • In small groups, assemble a "Memory Map" mural: ◦ Glue the cards to a large map ◦ Add printed or drawn images from the walk ◦ Decorate with colors, symbols, and key words from the stories shared • Display the mural in the community center or local facility. Final reflection: Ask the group: ◦ How did it feel to remember and share those places? ◦ Did you learn something new about your neighborhood or each other? ◦ What space felt most meaningful to you?
Tips for trainers	• Make sure the route is safe, short, and accessible (avoid uneven ground and heavy traffic). • Allow frequent breaks for rest and conversation. • Validate and celebrate each story as part of the community's heritage. • This activity can also be done in an intergenerational format with children or young people. • Encourage them to continue walking with peers or neighbours as a healthy habit.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



TRAINING RESOURCES

LE CONDIZIONI DI SALUTE DELLA POPOLAZIONE ANZIANA IN ITALIA REPORT ISTAT ANNO 2019	Official Report 2019 on health conditions of the elderly population in Italy	https://www.istat.it/it/files/2021/07/Report-anziani-2019.pdf
Superare il modello delle RSAcura, territorio, domiciliarità	A critical analysis of the RSA model in Piedmont, with proposals to strengthen community care, home-based services, and a more humane, sustainable, and personalized care system.	https://www.cislpiemonte.it/pensionati-fnp/wp-content/uploads/sites/6/2021/02/Documento-Unitario-sulle-RSA.pdf
Acción comunitaria para ganar salud... o cómo trabajar en común para mejorar las condiciones de vida	This guide is a response to the commitment to strengthen community orientation within Strategy D of the Strategic Framework for Primary and Community Care.	https://www.sanidad.gob.es/areas/promocionPreencion/entornosSaludables/local/estrategia/herramientas/docs/Guia_Accion_Comunitaria_Ganar_Salud.pdf
Estrategia de Salud Comunitaria de Extremadura	The Extremadura Community Health Strategy provides a common working model adapted to the reality of our region. It integrates the various actions necessary to strengthen the community-oriented nature of Primary Care and enables the involvement of its various stakeholders, including citizens, throughout the entire process.	https://saludextremadura.ses.es/saludcomunitaria/estrategia-salud-comunitaria-extremadurahttps://saludextremadura.ses.es/saludcomunitaria/assets/pdf/estrategia_de_salud_comunitaria_de_extremadura.pdf

TRAINING RESOURCES

Integrated care for older people: guidelines on community-level interventions to manage declines in intrinsic capacity	The provision of integrated care is key for older people. The WHO Guidelines on Integrated Care for Older People (ICOPE) propose evidence-based recommendations for health care professionals to prevent, slow or reverse declines in the physical and mental capacities of older people. These recommendations require countries to place the needs and preferences of older adults at the centre and to coordinate care.	https://iris.who.int/bitstream/handle/10665/258981/9789241550109-eng.pdf?sequence=1
Delivering Integrated Community Care for the Elderly: A Qualitative Case Study in Southern China	The rapid aging and increasing care demands among the elderly population present challenges to China's health and social care system. The concept of aging in place has prompted the implementation of integrated community care (ICC) in the country. This study aims to provide empirical insights into the practices of integrated care policies and approaches at the community level. Data for this study were collected through six months of participatory observations at a local community health service center in a southern Chinese city	https://pmc.ncbi.nlm.nih.gov/articles/PMC11203458/pdf/ijerph-21-00680.pdf

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Assessments Section



MODULE: COMMUNITY AND HEALTH CARE

EDUCATORS

Theme: Health Literacy, Preventive Care, and Communication

1. What is Primary Health Care (PHC)?

- A. Only hospital care for serious illness
- B. Homeopathic treatments
- C. A basic and universal approach to essential healthcare
- D. Emergency medical services

2. True or False: The Ottawa Charter is related to promoting health and empowering communities.

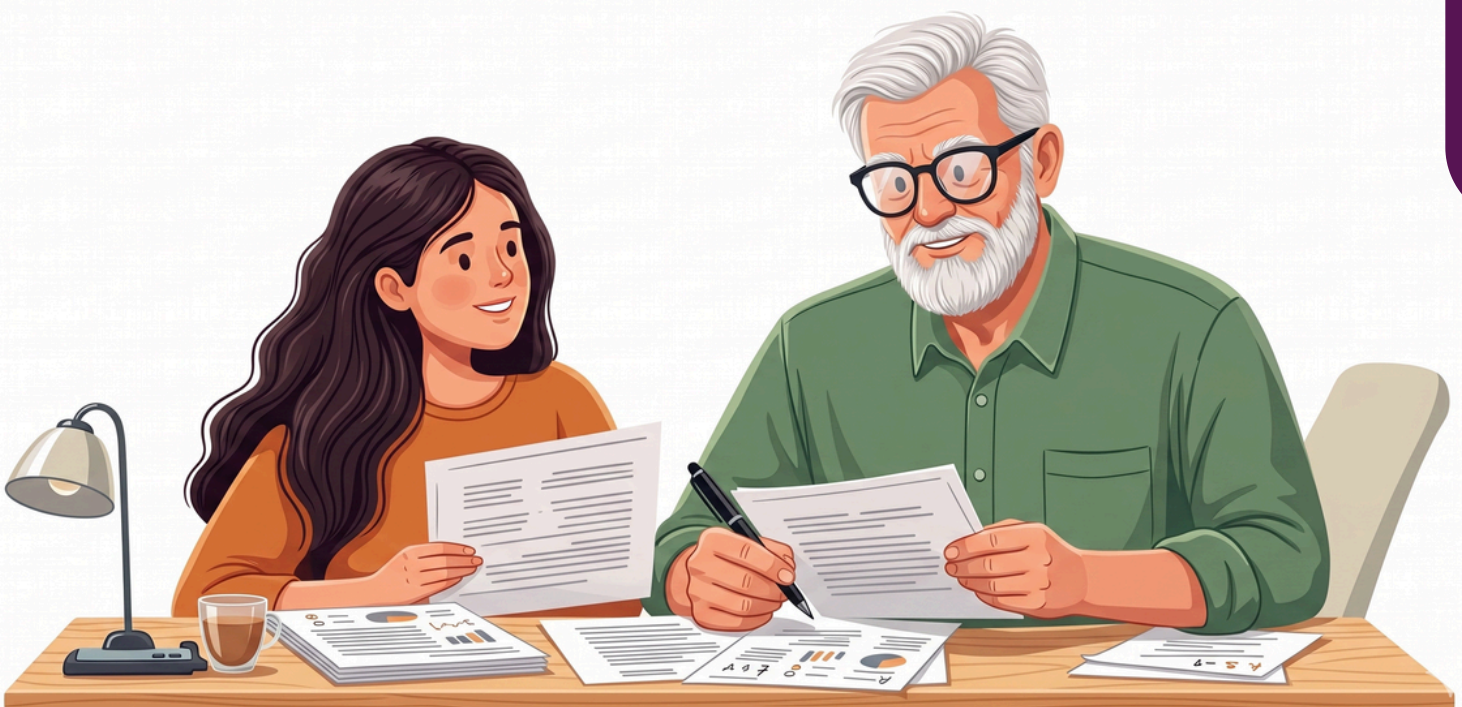
– Yes / No

3. Which of the following is not a Social Determinant of Health (SDOH)?

- A. Education
- B. Internet connection speed
- C. Income
- D. Housing

4. Do you feel confident designing educational strategies adapted to low health literacy among seniors?

– Yes / No



MODULE: COMMUNITY AND HEALTH CARE

STAKEHOLDERS AND LOCAL ACTORS

Theme: Policy Integration, Access, and Participation

5. Which issue most commonly affects seniors in accessing healthcare in Europe?

- A. Too much home care
- B. Digital-only systems and long wait times
- C. Excessive physical activity
- D. Shortage of walking groups

6. True or False: Mental health is often overlooked in aging care systems.

– Yes / No

7. Which of the following best defines an inclusive healthcare system?

- A. One that provides only in-person care
- B. One designed by policymakers without user input
- C. One that offers physical, mental, and social health services adapted to user

needs

- D. One that prioritizes efficiency over communication

8. Would you involve senior citizens directly in evaluating local healthcare services?

– Yes / No



MODULE: COMMUNITY AND HEALTH CARE

SENIORS

Theme: Autonomy, Self-care, and Support Access

9. What is a sign of healthy aging?
- A. Avoiding physical movement
 - B. Staying isolated
 - C. Maintaining social, physical, and emotional activity.
 - D. Refusing medical care
10. True or False: You have the right to understand and question medical instructions.
– Yes / No
11. Have you ever used a community service (e.g., health info point, local clinic) to improve your well-being?
– Yes / No
12. What could help you feel more independent in managing your health?
- A. Clear, simple information
 - B. Relying only on family
 - C. Skipping checkups
 - D. Avoiding new technologies
13. Would you feel comfortable participating in community workshops about mental or physical health?
– Yes / No



MODULE 2

Transportation

Community &
Healthcare

Transportation

Housing

Social Participation

Outdoor Spaces &
Buildings

Respect and Social
Inclusion



European Seniors Friendly Communities Guideline

MODULE: TRANSPORTATION

THEORETICAL INTRODUCTION

Access to safe, accessible, and efficient transportation is a fundamental pillar for ensuring the autonomy and quality of life of older adults. Mobility is key to their active participation in society, allowing them access to essential services such as medical care, cultural activities, social spaces, and shops.

The main barriers older adults face in terms of transportation include a lack of adapted infrastructure (poor sidewalks, lack of ramps and elevators, insufficient lighting), difficulties using electronic payment systems, inadequate designs on buses and trains (such as high steps or lack of priority seating), and a transportation offering that does not always meet their needs (limited schedules, routes that do not reach senior residential areas, and high prices).

From a European perspective, several cities have begun to implement solutions to make transportation more accessible. In this regard, the World Health Organization's (WHO) Age-Friendly Cities Framework establishes guidelines for designing urban environments that promote the mobility of older adults, ensuring their inclusion and participation.

Within the framework of the European Seniors Friendly Communities (ESFC) project, transport is a key area for creating age-friendly communities. This module will analyse existing barriers and offer educational strategies and tools for educators, stakeholders, and seniors themselves to promote accessible transportation solutions tailored to their needs. Through the exchange of experiences and the development of innovative methodologies, ESFC seeks to strengthen collaboration between communities, policymakers, and transport providers, with the aim of ensuring that older people can move safely and independently in their environments.

STATUS QUO

Access to reliable and senior-friendly transportation is a critical issue for older adults across Europe. Public transport systems often fail to accommodate the mobility needs of seniors, making everyday travel a significant challenge. Buses and trains frequently lack age-friendly features, such as low steps, handrails, and designated priority seating, forcing many older individuals to struggle when boarding or finding a safe place to sit. The absence of real-time assistance from transport staff further complicates travel for those with reduced mobility, vision impairments, or other physical limitations.

For seniors living in rural areas or smaller towns, the lack of regular and well-connected transport links exacerbates social isolation and limits access to essential services, including healthcare, shopping, and social activities. Many villages and remote areas have few, if any, scheduled bus or train services, leaving older adults dependent on family members, friends, or expensive alternatives like taxis. Without affordable and accessible transport options, seniors in these regions are at a heightened risk of exclusion from community life, as simple activities such as visiting a doctor or attending a social event become increasingly difficult.

Another significant barrier is the shift toward digital ticketing and online booking systems, which has created a major accessibility gap for older populations. Many transport providers have phased out physical ticket offices in favour of self-service kiosks or app-based bookings, leaving seniors - many of whom are not digitally literate or do not own smartphones - struggling to secure tickets. In some cases, online bookings are the only way to access discounted fares, meaning that seniors without digital access end up paying more for transportation or missing out entirely.

For those unable to use public transport, alternative options such as taxis and volunteer driving programs remain insufficient. Taxi fares are often prohibitively expensive, making them an impractical daily solution for many seniors living on fixed incomes. While some communities have volunteer-led driving services that offer transport for medical visits or social outings, insurance and liability issues frequently limit the availability and reliability of these programs. As a result, seniors who do not drive and lack family support are left with few options for independent mobility.

In summary, inadequate transport infrastructure and evolving digital requirements are leaving many older adults disconnected from essential services and community life. Addressing these challenges requires more accessible public transport design, improved rural connectivity, senior-friendly ticketing solutions, and stronger community-based alternatives. Without these improvements, many seniors will continue to face isolation and mobility constraints, restricting their ability to live independently and actively participate in society.

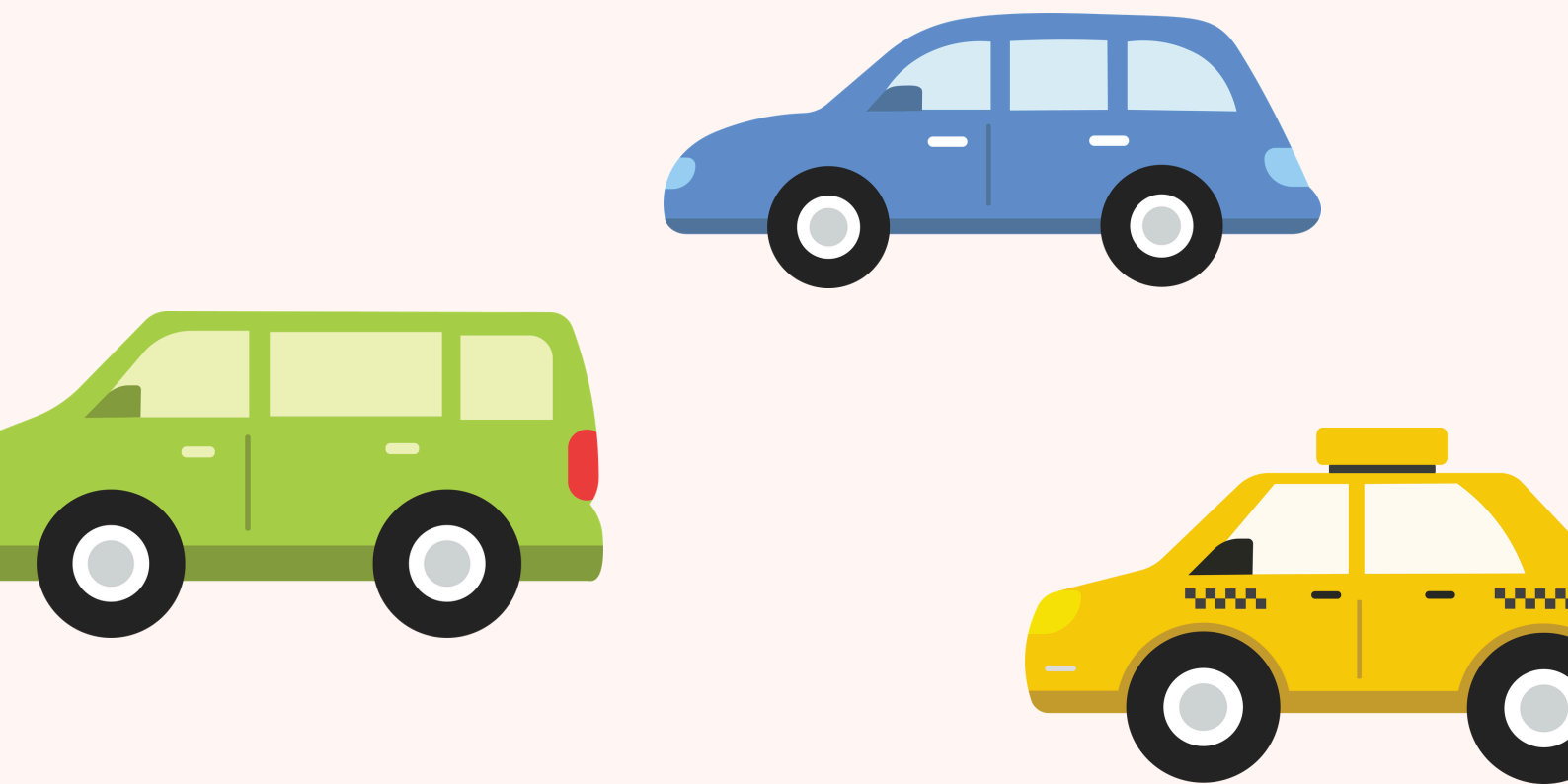
STATUS QUO

Country-Specific Findings

Italy: Some areas have social taxis for seniors, but overall, public transport is poorly adapted to their needs.

Ireland: Buses are crowded and difficult to board. Volunteer driving services exist but struggle with insurance issues.

Spain: Transport between towns is almost non-existent, leaving seniors isolated. Buying tickets online is mandatory, creating barriers for those unfamiliar with technology.



LEARNING OUTCOMES

Description of the main learning objectives and results to be achieved in terms of knowledge, skills and attitudes by:

- *Educators*
- *stakeholders and local actors*
- *seniors*

Educators: *Educators will learn to raise awareness and foster understanding of inclusive mobility in the context of older adults. Through this module, they will be able to identify and implement pedagogical strategies that promote equal access to transportation, developing skills to teach older adults about their mobility rights and how they can demand services appropriate to their needs. Educators will also be able to create educational environments that raise community awareness about the importance of accessible and safe transportation for older adults.*

Stakeholders and Local Actors: *Stakeholders and local actors will learn about the policies and strategies needed to improve older adults' access to transportation. This module will provide them with the key tools and knowledge to analyse the shortcomings of current public transportation and develop inclusive solutions at the local, regional, and national levels. Additionally, they will receive guidance on how to integrate older adults into decision-making and the creation of public policies that improve their mobility. They will learn how to use data and international best practices to implement changes in their community and ensure that infrastructure and services are accessible to all.*

Seniors: *Senior adults will learn about their rights and the options available to ensure their safe mobility. This module will allow them to learn about the different modes of transportation that are accessible and safe for them, as well as the existing policies that protect their mobility rights. Additionally, they will be provided with tools to improve their autonomy, helping them identify and use transportation services appropriate to their needs, thereby improving their quality of life and participation in society.*



EDUCATIONAL TOOLS

ACTIVITY TITLE: "Mapping Accessible Transportation Infrastructure"

Target: *for educators*

Duration

90 minutes

Materials*

1. Local maps
2. Transportation information (schedules, accessibility, available services)
3. Computer
4. Whiteboard

Description
(2000
characters):

Objective: To help educators identify accessible transportation options and barriers in their local area, and to create a practical tool to support seniors' mobility and independence.

Step 1: Introduction and Instructions (10–15 minutes)

Briefly discuss the importance of accessible transport for senior adults:

- How does transport affect autonomy and participation?
- What are common barriers seniors face?

Explain the activity: educators will create a community map that highlights accessible and inaccessible transport infrastructure.

Step 2: Group Work – Mapping the Environment (45–50 minutes)

Divide participants into small groups.

Provide each group with:

- A printed or digital map of the local area
- Colored markers or pins
- A checklist of accessible features (ramps, visual signs, audio announcements, elevators, shaded benches, etc.)

Each group will:

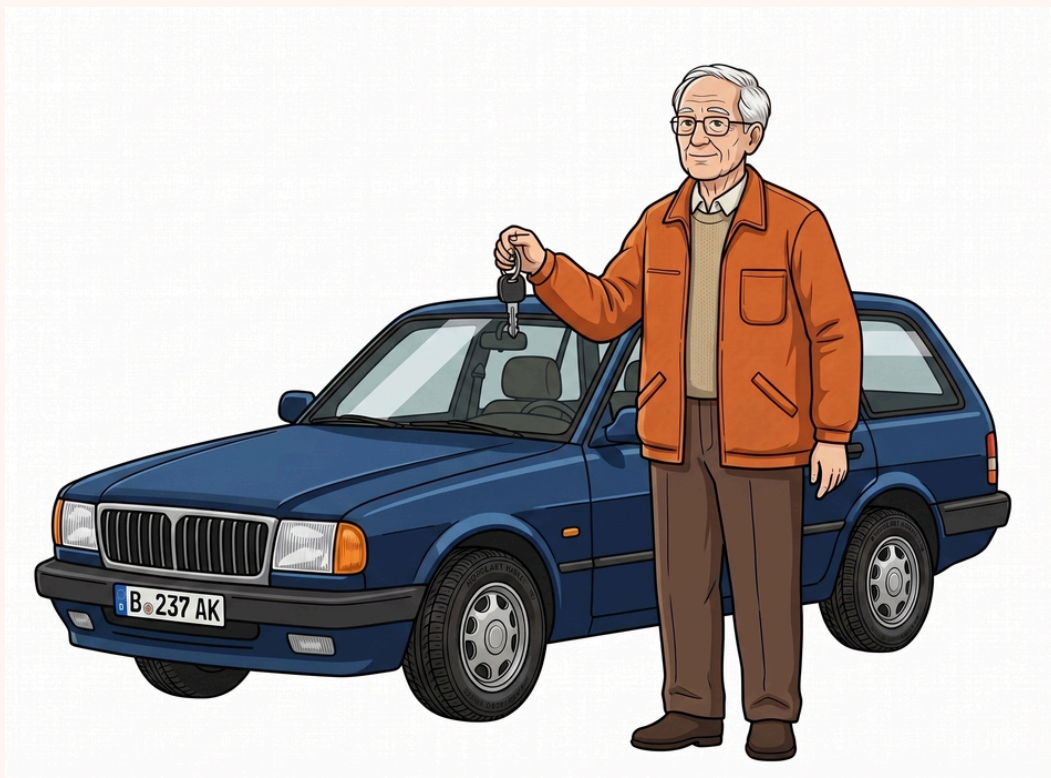
- *Mark accessible public transport locations (e.g., bus stops, train stations, taxi ranks)*
- *Identify missing elements or barriers (e.g., no ramps, no clear signage, broken pavements)*

	• Suggest small changes that could improve access • Encourage teams to think from a senior's perspective. Step 3: Presentation and Comparison (20 minutes) • Each group briefly presents their map and key observations. • Facilitator notes recurring issues and highlights good practices already in place. Step 4: Wrap-Up and Reflection (5–10 minutes) • Ask: ◦ What surprised you? ◦ What areas need urgent improvement? ◦ How can this mapping activity be turned into an educational tool for seniors? <i>Optional: Collect all maps and combine them into a shared resource for the community or for a senior center.</i>
Tips for trainers	• Ensure each group has access to the most up-to-date transportation data. • Promote collaboration among educators to identify new options that may not be documented.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Creation of an Accessible Local Transportation Guide"	
Target: <i>for educators</i>	
Duration	90 minutes
Materials*	Computers with internet access, local accessible transportation information (schedules, fares, accessibility), design software (optional).
Description (2000 characters):	Objective: To design a practical and easy-to-use visual guide of accessible transportation options to support senior mobility and independence. Step 1: Introduction and Instructions (10–15 minutes) Start with a short discussion: • Why is visual communication important for seniors? • What kind of transport information do older adults need to feel confident planning a trip? • Explain the goal: each group will design a simple visual guide with useful and senior-friendly information on accessible transport. Step 2: Data Gathering and Content Planning (30 minutes) Working in small groups, educators: • Review local transportation data (printed maps, transit apps, websites, schedules) • Identify accessible stations, adapted routes, elevator locations, shuttle services, etc. • Discuss what type of content and format would be most useful for seniors: e.g. pictograms, large print, route color codes, "step count" from entrances, icons for facilities Step 3: Designing the Visual Guide (30–35 minutes) Each group creates a draft version of their visual guide on paper or digitally. They must include at least: • 2–3 accessible routes

	• 3 accessible stops or stations • At least one additional service (e.g., adapted taxi, health transport service) Encourage clarity, readability, and visual simplicity. Step 4: Presentations and Feedback (10–15 minutes) Each group briefly presents their guide. The facilitator or other groups give feedback focusing on: • Usefulness for seniors • Visual clarity and organisation • How easily a senior could use it on their own Optional: Display all guides in the room and let participants vote for the most senior-friendly one.
Tips for trainers	• Ensure educators know how to access accurate and up-to-date information. • Encourage the use of images or maps that are easy for seniors to understand. • Review and validate the information before finalising the guide.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Analyzing Transportation Challenges for Seniors"	
Target: <i>for stakeholders and local actors</i>	
Duration	60 minutes
Materials*	Whiteboards, markers, transportation data (including survey results or complaints from seniors).
Description (2000 characters):	Objective: To raise awareness among stakeholders about transport-related challenges faced by older adults, and to collaboratively generate realistic, inclusive solutions. Step 1: Introduction and Instructions (10 minutes) <i>The facilitator briefly presents common transport-related challenges faced by seniors, based on recent surveys or community feedback:</i> • <i>Limited availability of adapted vehicles</i> • <i>Difficulty navigating online platforms or buying tickets digitally</i> • <i>High transport costs</i> • <i>Lack of communication about accessible services</i> <i>Participants are encouraged to reflect on whether they've seen or heard similar issues in their own area.</i> Step 2: Group Analysis of Challenges (25 minutes) Participants are divided into small groups. Each group receives a short summary of complaints or real quotes from seniors about transport problems in the community. Tasks: • Identify the key barriers mentioned • Categorise them into themes: physical accessibility, digital literacy, affordability, information gaps, etc. • Discuss which challenges are most urgent or most widespread

	Step 3: Developing Solutions (15 minutes) <i>Groups brainstorm and propose 2–3 possible solutions to address the most pressing barriers.</i> They are encouraged to think of both low-cost and long-term policy ideas, for example: • Printed transport guides for seniors • Regular “accessibility checks” at transport hubs • Subsidised transport for senior adults Step 4: Sharing and Reflection (10 minutes) Each group presents their ideas briefly. The facilitator leads a closing reflection: • Which solutions could be implemented quickly and locally? • Which would require coordination between sectors? • What would seniors themselves think of these ideas?
<i>Tips for trainers</i>	• Ensure all stakeholders actively participate and listen to the elders' concerns. • Encourage the group to propose a variety of possible solutions, even if they seem unconventional. • Use real data or elders' comments to support the discussion.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Simulation of Improvement Proposals for Accessible Transportation"	
Target: <i>for stakeholders and local actors</i>	
Duration	60 minutes
Materials*	Whiteboard, markers, case studies, complaints and comments from seniors.
Description (2000 characters):	Objective: To develop actionable and realistic solutions to transportation challenges faced by older adults, based on real feedback from the community. Step 1: Introduction and Distribution of Complaints (10 minutes) <i>The facilitator introduces the activity and distributes a selection of real or representative complaints, concerns, or quotes from older adults about transportation. Examples may include:</i> • <i>"There are no benches at the stop while I wait."</i> • <i>"I don't understand how to buy tickets online."</i> • <i>"The footpath near the bus station is broken."</i> <i>Participants are divided into small working groups.</i> Step 2: Brainstorming Solutions (30 minutes) Each group discusses the complaints they received and works to: • Identify the root causes of each issue • Propose practical and viable solutions Solutions may relate to: • Infrastructure (e.g., ramps, signage, seating) • Communication (e.g., printed guides, phone support) • Service delivery (e.g., community transport, better frequency) Groups are encouraged to consider both short-term fixes and longer-term strategies, depending on feasibility and local resources. Step 3: Group Presentations (15 minutes) Each group presents its proposed solutions to the larger group in a brief 3–4 minute pitch.

	Step 4: Collective Reflection and Prioritisation (5 minutes) Facilitator leads a short group reflection: • Which proposals are the most realistic given current budgets? • Which would have the greatest impact on seniors' lives? • What next steps could be taken to explore implementation?
Tips for trainers	• Ensure groups include people with experience in transportation and public service management. • Facilitate discussion to generate practical and sustainable short-term solutions.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Online Ticket Purchasing Workshop for Seniors"	
Target: <i>for seniors.</i>	
Duration	60 minutes
Materials*	Computer or smartphone with internet access, printed step-by-step guide.
Description (2000 characters):	Objective: To build seniors' digital confidence by teaching them how to search, select, and purchase transportation tickets online in a simple and secure way. Step 1: Introduction and Motivation (10 minutes) <i>The facilitator opens with a group discussion:</i> • "Have you ever bought a bus or train ticket online?" • "What worries or confuses you about it?" <i>Participants are reassured that the session is hands-on, at their pace, and designed to help them feel more independent when planning travel.</i> Step 2: Live Demonstration (15 minutes) The facilitator shares a projected or printed step-by-step example of how to: • Access a transportation website or app • Search for routes and schedules • Choose a ticket and seat • Enter basic details • Pay securely (or simulate it if real payment is not possible) Common tips are emphasised: using clear navigation buttons, being cautious with payments, and checking ticket confirmation. Step 3: Guided Practice in Pairs or Small Groups (25 minutes) <i>Participants are paired (or grouped 3 per device) to try the process themselves with facilitator support.</i>

	<i>They simulate the purchase of a round trip ticket to a familiar location, using:</i> • <i>A real website or app (in test mode)</i> • <i>Printed scenarios or goals (e.g., "I want to go to the city on Saturday at 10:00 AM and return at 5:00 PM")</i> <i>Facilitators provide help and encouragement as needed.</i> Step 4: Group Reflection and Tips (10 minutes) <i>Back in plenary, the group reflects on:</i> • <i>What parts were easier than expected?</i> • <i>What was confusing?</i> • <i>What tips would you give to someone trying this for the first time?</i> <i>Optional: Distribute a take-home visual guide with simple illustrated steps.</i>
<i>Tips for trainers</i>	• Make sure all participants have access to devices. • Explain each step slowly, offering individual support. • Allow time for questions and repeat demonstrations if necessary.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



ACTIVITY TITLE: "Recognizing Local Transportation"	
Target: <i>for seniors.</i>	
Duration	45 minutes
Materials*	Local transport information brochures, route maps, public transport images, and sample timetables.
Description (2000 characters):	Objective: To help older adults recognize, understand, and feel more confident using the public transportation options available in their community. Step 1: Introduction and Visual Discovery (10 minutes) The facilitator opens with a brief explanation of why knowing local transport options matters for independence and well-being. Participants are shown large printed or digital images of: ◦ Local buses, trains, or shuttles ◦ Stops, signs, maps, and ticket machines The group is asked: ◦ "Have you used this bus or train before?" ◦ "Do you know where the nearest stop is from your home?" Step 2: Understanding How It Works (15 minutes) The facilitator explains step by step: • How to read a basic schedule or timetable • How to find the right stop or platform • What information to look for (line number, direction, arrival time) Safety tips: where to wait, how to signal the driver, what to do if you miss a stop Simple handouts or illustrated examples are provided for seniors to follow along. Step 3: Group Sharing and Scenario Practice (15 minutes) <i>Participants are paired (or grouped 3 per device) to try the process themselves with facilitator support.</i>

	Participants are invited to share: • A recent positive or negative experience with public transport • Their main concern or barrier when trying to use it (e.g., steps, confusion, crowded spaces) Then, in pairs or small groups, they complete simple transport "missions" on paper, such as: • "How would you get from your house to the health center?" • "Which line would you take to go to the market?" Facilitators provide guidance as they navigate real maps or simulated transport layouts. Step 4: Closing Reflection (5 minutes) Ask: • "What was something new you learned today?" • "Do you feel more prepared to try a route on your own?" <i>Optionally, distribute a small laminated card with local transport contact info and key tips.</i>
Tips for trainers	• Make sure all materials are easy to understand (use clear images and large text). • Encourage active participation from seniors, allowing them to ask questions and share their experiences.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



TRAINING RESOURCES

Ciudad y territorio justo - Accesibilidad universal	"Universal accessibility is a fundamental pillar of a more just and cohesive society. Through it, our territory, towns, and cities, can build a new layer, an integrative skin for all people, one that goes beyond the physical environment.	https://observatorio2030.com/sites/default/files/2025-01/Documenta%201.2%20-%20Ciudad%20y%20Territorio%20justo%20-%20Accesibilidad%20universal%20%28Informe%20GT1.2%29%20%5BAccesible%5D_1.pdf
Itinerarios: Actividades para la seguridad vial de Mayores	The General Directorate of Traffic develops actions to protect the most vulnerable road users, those who, due to various circumstances, their physical characteristics, or the means of transportation used, are more likely to be involved in or be victims of a traffic accident, including the elderly.	https://drive.google.com/file/d/13bMaqAF_fifCXYZbMYOXQspShNLjfRA4/view
Abitudini di mobilità degli over 65. Il ruolo del TPL	Study from the HAPPY project on how older adults use public transport (TPL) in Varese, Milan, and Padua. Analyzes habits, barriers, and post-COVID scenarios to enhance age-friendly mobility.	https://www.uninsubria.it/sites/default/files/Documenti_Ricerca/Progetto%20HAPPY%2026-10-2021_%20Crotti%20Akhavan%20Bonvento%281%29.pdf

TRAINING RESOURCES

Il trasporto sociale in Toscana	Presents a survey of social transport in Tuscany, highlighting volunteer-driven local practices ensuring mobility for seniors and vulnerable people lacking autonomy or family support	https://www.cesvot.it/storage/7025/Il%20trasporto%20sociale%20in%20Toscana%20-%20Report%20completo.pdf
Building Better Lives – Cycling Without Age	We invite you to start up a chapter of Cycling Without Age, a worldwide movement that aims to provide joy and vitality to all through the magic of bicycle rides. Through the simple act of sharing a bike ride, it weaves a sense of community and gathers unique and invaluable stories, unlocked only by the wind and wheels.	https://cyclingwithoutage.org/
"GOAL: Growing Older, stAying mobiLe: The transport needs of an ageing society"	The GOAL project aimed at comprising current knowledge and identifying research gaps in order to develop an action plan to fulfill the transport needs of an ageing society. This action plan is being developed through the interaction with different stakeholders, state-of-the-art reviews, identification of possible and relevant societal developments and alternatives to transport. To achieve these objectives, GOAL has organised different workshops where the main findings from state-of-the-art reviews were presented to key stakeholders and interactive sessions were played to get their feedback.	https://cordis.europa.eu/project/id/284924

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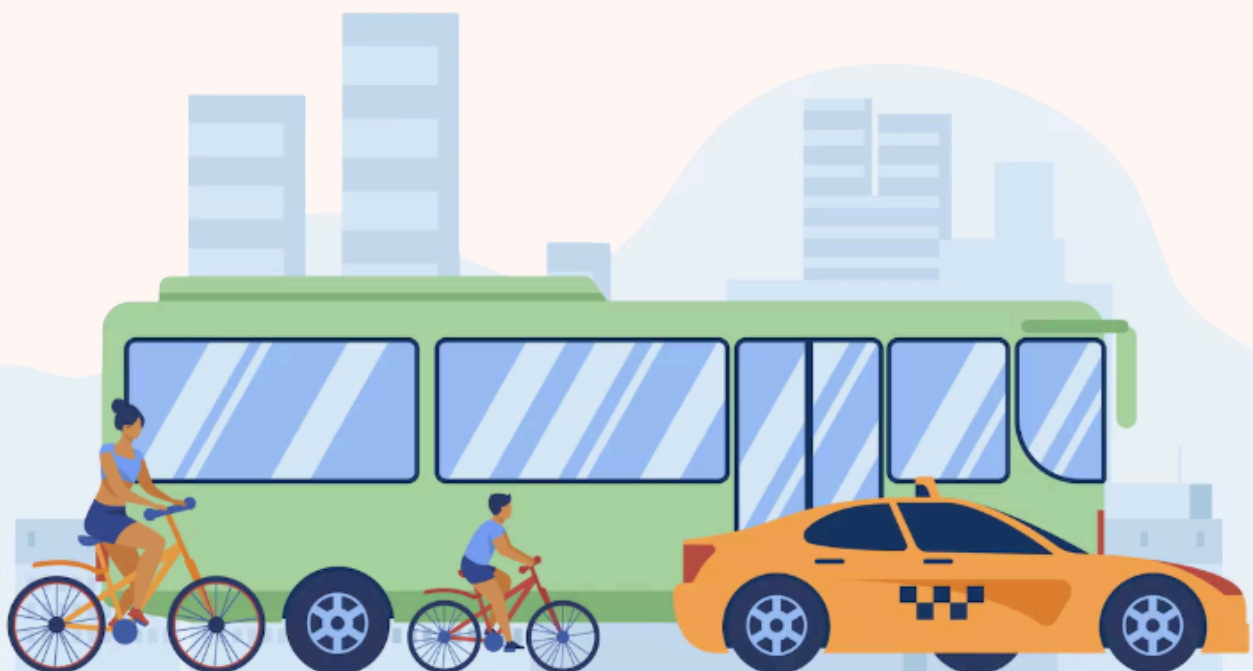
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Assessments Section



MODULE: TRANSPORTATION

EDUCATORS

Theme: Awareness and Teaching Inclusive Mobility

1. Why is accessible transportation important for older adults?

- A. To reduce environmental impact
- B. To increase traffic
- C. To support autonomy and social participation
- D. To avoid using digital devices

2. True or False: Educators should include content about mobility rights in senior education.

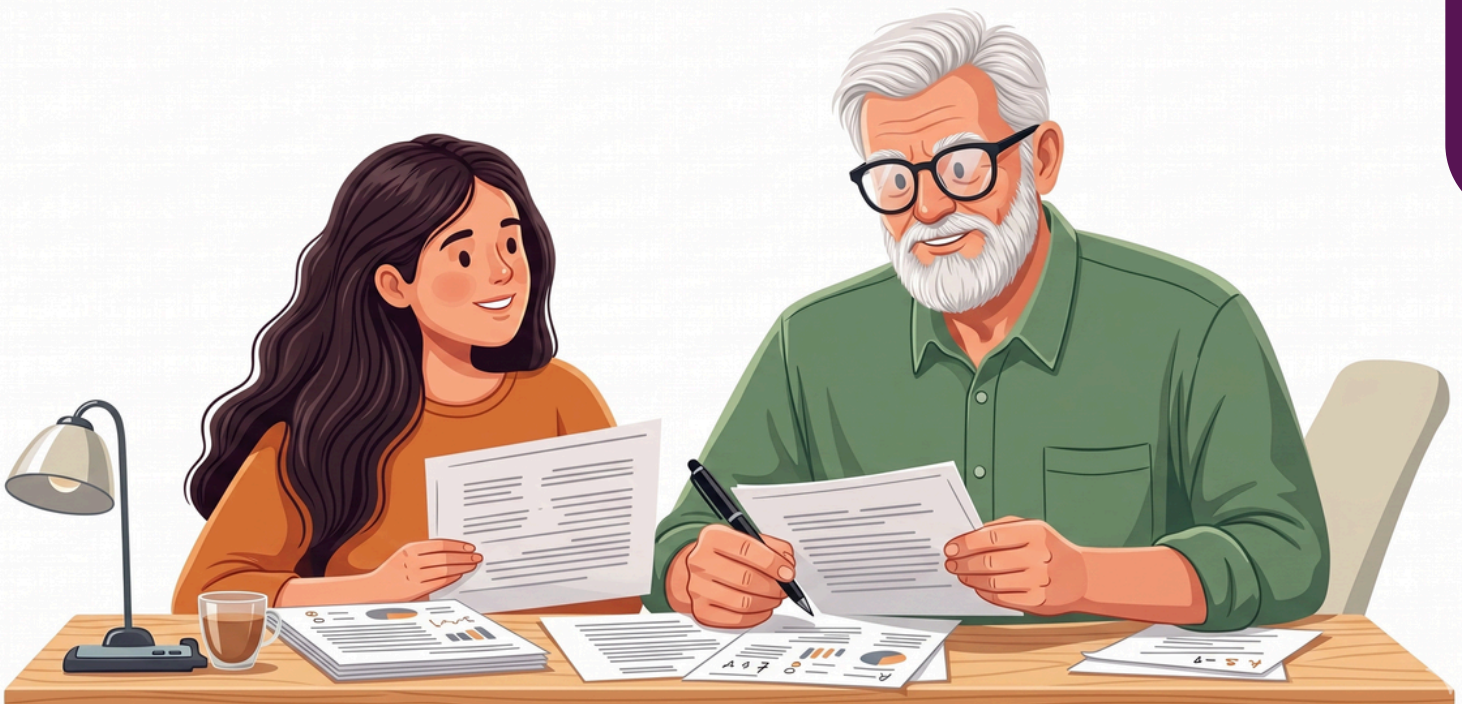
– Yes / No

3. Which element would you include in a transportation guide for seniors?

- A. Interactive games
- B. Route maps with color codes and large print
- C. Social media links only
- D. Long legal disclaimers

4. Do you feel able to design a teaching tool that supports seniors in using local transport services?

– Yes / No



MODULE: TRANSPORTATION

STAKEHOLDERS AND LOCAL ACTORS

Theme: Policy, Analysis, and Infrastructure Planning

5. Which of the following is a key barrier to transport for seniors?
- A. Frequent elevator access
 - B. Affordable and adaptive schedules
 - C. Broken sidewalks and lack of benches
 - D. Real-time staff support at all stops
6. True or False: Digital-only ticketing systems improve transport accessibility for seniors.
- Yes / No
7. What strategy could reduce digital exclusion in transportation?
- A. Remove all paper maps
 - B. Promote app-only ticketing
 - C. Offer printed guides and phone booking options
 - D. Close information counters
8. Would you consult older adults before redesigning local transportation policies?
- Yes / No



MODULE: TRANSPORTATION

SENIORS

Theme: Independence and Digital Confidence

9. Which of these helps seniors navigate transport independently?
- A. Small print timetables
 - B. Clear signage and priority seating
 - C. Exclusive digital ticket options
 - D. Complex online booking systems
10. True or False: Seniors have the right to accessible and safe transport services.
– Yes / No
11. Do you feel confident reading a basic bus or train timetable after this training?
– Yes / No
12. Which of the following actions can improve your mobility confidence?
- A. Avoiding public transport entirely
 - B. Learning to use a visual route guide
 - C. Depending only on family
 - D. Refusing digital help
13. Would you be open to learning how to buy tickets online with guided support?
– Yes / No



MODULE 3

Housing

Community &
Healthcare

Transportation

Housing

Social Participation

Outdoor Spaces &
Buildings

Respect and Social
Inclusion



European Seniors Friendly Communities Guideline

MODULE: HOUSING

THEORETICAL INTRODUCTION

Housing is a key pillar of age-friendly communities, directly influencing autonomy, health, and social participation in later life.

*According to the World Health Organization (2007), age-friendly housing should be safe, affordable, and well-located - facilitating access to services, mobility, and social interaction. As populations age, the concept of “**ageing in place**” becomes central: the ability to live in one’s own home and community safely, independently, and comfortably, regardless of age or ability level.*

Traditional housing models often fall short of meeting older adults’ evolving physical, emotional, and social needs. In response, new paradigms are emerging. Cohousing—collaborative living communities where private units are combined with shared spaces—promotes mutual support, reduces isolation, and fosters intergenerational exchange. Similarly, social condominiums offer an intermediate solution between public housing and the private market, integrating services such as assisted living and communal areas to encourage social cohesion and well-being.

Design features such as universal design, barrier-free access, and modular adaptation are essential to accommodate mobility limitations and cognitive decline. These principles benefit not only older people but also families, people with disabilities, and caregivers.

Beyond physical structures, housing policy must align with urban planning and community development. Promoting mixed-use neighbourhoods, integrated services, and participatory design approaches ensures that housing solutions reflect the diverse realities of aging. Ultimately, housing for age-friendly communities must be inclusive, sustainable, and embedded in a broader vision of social justice and active aging.

STATUS QUO

For many older adults, aging in place—remaining in their own homes for as long as possible—is a priority. However, the lack of age-friendly housing and insufficient support services make independent living increasingly difficult. Across Europe, most homes are not designed to accommodate the changing mobility and health needs of seniors. Many lack essential accessibility features, such as lifts, handrails, step-free entrances, and adapted bathrooms, forcing seniors to navigate unsafe environments. In colder regions, poor insulation and inadequate heating systems further compromise their well-being, particularly for those on fixed incomes who struggle to afford energy-efficient upgrades.

Although government programs exist to assist with home adaptations, these grants are often insufficient, difficult to access, and buried in bureaucratic processes. Many seniors, particularly those with limited digital literacy or no immediate family support, find it challenging to apply for funding or navigate the complex procedures required to obtain financial aid for home modifications. As a result, essential adaptations such as stairlifts, walk-in showers, and safer flooring remain out of reach for many older adults, increasing the risk of falls and injuries.

At the same time, affordable senior housing options are severely lacking. While some countries have introduced co-housing models or community-based living alternatives, these remain limited in scale and are often too expensive for the average pensioner. Many older adults wish to downsize to a more manageable home but find that there are few suitable options in their communities. In some cases, retirement housing is available but located far from city centers or essential services, leading to social isolation and a loss of independence.

For those who require daily assistance, home care services are often inconsistent, understaffed, and difficult to arrange. The shortage of trained caregivers means that many seniors face long waiting lists for home support, while others must rely on family members or expensive private care options. Even when home care is available, services are often limited in duration and scope, covering only basic needs such as meal preparation and hygiene, but failing to address broader social and emotional well-being.

STATUS QUO

In summary, the housing landscape for seniors presents multiple barriers to safe and independent living. The lack of accessible housing, insufficient financial support for adaptations, limited affordable senior housing, and inconsistent home care services make it increasingly difficult for older adults to maintain their quality of life. Addressing these challenges requires a multi-faceted approach, including greater investment in home adaptation programs, more affordable and community-integrated senior housing, and a stronger, better-funded home care sector to support aging populations in a dignified and sustainable way.

Country-Specific Findings

- *Italy: Seniors struggle with home modifications due to financial and bureaucratic barriers. Co-housing initiatives are rare and difficult to implement.*
- *Ireland: Housing adaptation grants do not cover all costs, and home help services are difficult to access.*
- *Spain: Many seniors live in old buildings without lifts, isolating them on upper floors. There is little financial support for home adaptations.*



LEARNING OUTCOMES

Description of the main learning objectives and results to be achieved in terms of knowledge, skills and attitudes by:

- *Educators*
- *Stakeholders and local actors*
- *Seniors*

Educators: *will gain a comprehensive understanding of the physical, sensory, and cognitive changes associated with ageing, as well as the concept of "ageing in place" and its significance for autonomy and active ageing. They will become familiar with age-friendly housing principles, including universal design and home modification strategies, and explore alternative housing models such as co-housing and social condominiums.*

This knowledge will enable them to develop observational, critical thinking, and problem-solving skills, helping them to assess barriers in the home environment and co-design user-centered solutions for safer, more inclusive living spaces.

Educators will also cultivate empathy for older adults, adopt a reflective mindset to question personal biases, and embrace a proactive attitude toward creating inclusive and supportive environments in both educational and caregiving contexts.

Stakeholders and local actors: *will learn how physical and social environments influence aging in place and will become familiar with national and WHO frameworks for age-friendly housing. They will explore the diverse housing needs of older adults, including aspects of mobility, isolation, and accessibility, and gain insight into effective housing policies and policy tools supported by national and international best practices.*

They will develop skills to observe and analyse the built environment, assess policy inclusiveness, and co-design tailored housing strategies. Cross-sector collaboration and strategic thinking will be emphasised to support the creation of inclusive housing models.

Through the module, they will foster empathy for older adults, take shared responsibility for age-inclusive planning, and adopt a forward-thinking, equity-driven approach to local policy and development.

LEARNING OUTCOMES

Seniors: will acquire knowledge about common household risks and learn affordable ways to enhance safety and autonomy at home. They will also become informed about co-housing and other shared living models, understanding the social and emotional benefits these offer.

They will be empowered to use tools such as home safety checklists, assess their current living conditions, and consider practical changes. The module will encourage them to reflect on their future housing preferences, communicate their needs, and explore new housing options that promote independence and well-being.

Seniors will build confidence in making informed decisions about their homes and lifestyles, develop a spirit of mutual support and peer learning, and cultivate a positive, empowered outlook on ageing and community living.



EDUCATIONAL TOOLS

LIVING THE AGE

Target:

- For educators

Duration

2 hours

Materials*

1. Glasses with blurred lenses or frosted plastic sheets
2. Gloves (garden/work gloves or surgical gloves filled with cotton)
3. Knee/elbow wraps or resistance bands (to limit mobility)
4. Earplugs or noise-canceling headphones
5. Weights (1–2 kg) or bags to simulate carrying loads
6. A mock "home environment" (classroom or room with furniture arranged as obstacles)
7. Paper and pens
8. Flipchart/board or projector

Description
(2000 characters):

This workshop is designed to help educators understand the physical, sensory, and cognitive challenges faced by older adults who age at home. Participants will be invited to experience everyday tasks from the perspective of an older person through a guided simulation.

After a short introduction to aging-related changes (mobility, vision, hearing, dexterity, balance), participants will be equipped with simulation materials that alter their sensory and motor functions.

They will perform daily activities such as:

- Walking across a room with obstacles
- Opening a jar or a medication container
- Picking up objects from the floor
- Writing a note
- Navigating stairs or getting into bed

Observers will note challenges and behaviors.

	Debrief: Following the simulation, participants will engage in a group debrief to reflect on their experience, emotions, and observations, discussing implications for home design, caregiving, and educational practice.
<i>Tips for trainers</i>	Ensure a safe environment. Facilitate a rich debrief by asking reflective questions: • How did it feel to perform simple tasks? • What was most surprising? • What changes would you recommend to improve home environments?
<i>*if needed add here tables, pictures or other materials to be used for the activity</i>	



A PLACE TO AGE WELL

Target:

- For educators

Duration

2.5 hours

Materials*

1. Blank home layout templates
2. Colored markers, post-its, scissors, glue
3. Photographs of real-life age-friendly and non-age-friendly spaces
4. Case studies (short descriptions of older adults' housing needs)
5. Flipchart/whiteboard
6. Access to online resources of universal design features
7. Optional: Lego for tactile learners

Description (2000 characters):

Introduction:

The session begins with a brief introduction to age-related changes and how these impact mobility, perception, and daily routines. Participants will be introduced to the concept of universal design, accessibility, and home adaptation strategies.

Co-design:

Using case studies of older adults with varying needs (e.g., vision impairment, reduced mobility, cognitive decline), participants will work in small groups to redesign a basic home layout. They will identify barriers (e.g., narrow doorways, slippery floors, poor lighting) and propose modifications such as no-step entries, grab bars, wider hallways, or multi-sensory cues.

Debriefing:

The activity will also include discussion about co-housing models, intergenerational living, and social condominiums as innovative solutions to support aging in place and community engagement. In a final reflection, groups will present their design solutions and reflect on feasibility, user-centered approaches, and ethical considerations.

Tips for trainers

- Start with a visual tour: show real examples of both supportive and problematic housing designs.
- Use real case scenarios.
- Close with a call-to-action: how can each participant apply what they've learned in their context?

Printable home layout:



Case Study Template

Name: [Insert persona name]

Age: [e.g., 78]

Living Situation: [e.g., Lives alone in a two-story house]

Health Considerations: [e.g., Reduced vision, arthritis, mild cognitive impairment]

Daily Routine: [e.g., Prepares meals, watches TV, goes for walks]

Challenges Faced:

[E.g., Difficulty using stairs]

[E.g., Struggles with lighting at night]

[E.g., Confusion with identical doors in hallway]

Goals:

[E.g., Remain independent]

[E.g., Receive occasional help from neighbours]

WALK THE TALK

Target:

- *For stakeholders & local actors*

Duration

2 to 2.5 hours

Materials*

1. Printed observation checklists (customised to local context)
2. Clipboards and pens
3. Smartphones/tablets for photo documentation (optional)
4. Bad weather alternatives (photos/videos of areas instead of walk)

Description
(2000 characters):

Participants are introduced to age-friendly criteria (based on WHO or national frameworks) and divided into small groups with observation guides. They will analyse elements such as:

- Step-free access to buildings
- Pavement conditions and lighting
- Proximity to healthcare, green spaces, and public transport
- Signage, seating, and safety in communal areas

After the walkthrough, participants regroup to share findings, photos, and impressions. The trainer facilitates a discussion on key gaps and opportunities, and how housing policies, urban planning, and intersectoral collaboration can be improved.

Tips for trainers

Select a neighborhood with diverse housing types and urban features. Make participants aware of safety protocols (footwear, group walking, street safety).

Include participants with diverse perspectives (urban planners, NGOs, older adults).

Prepare guiding questions like:

- What barriers would an older person face here?
- Are services accessible on foot or by public transport?
- Would this neighbourhood support aging in place?

OBSERVATION CHECKLIST

Use this checklist to assess the age-friendliness of the neighbourhood or housing area during the walkthrough. Rate or comment on each aspect:

Accessibility

- Are entrances to homes and buildings step-free or have ramps?
- Are sidewalks level, wide, and free from obstacles?
- Are there handrails or support structures where needed?

Safety

- Is the area well-lit during evening hours?
- Are pedestrian crossings clearly marked and safe?
- Are there any visible hazards (e.g., loose paving, overgrown paths)?

Connectivity and Services

- Is public transportation easily accessible?
- Are essential services (grocery, pharmacy, health center) within walking distance?
- Are there benches or resting areas along pathways?

Social and Communal Spaces

- Are there community spaces where older adults can gather?
- Is there visible information or signage to navigate the area?
- Do residents feel a sense of safety and belonging?



DESIGNING EQUITY	
Target: For stakeholders and local actors	
Duration	2.5 to 3 hours
Materials*	1. Flipcharts or whiteboards 2. Sticky notes and markers 3. Printed policy framework summaries (e.g., WHO, national aging strategies) 4. Case studies or best practice briefs (national and international) 5. Projector
Description (2000 characters):	Introduction The session begins with an overview of international and national policy frameworks that promote aging in place, universal design, and inclusive housing models (e.g., co-housing, social condominiums, integrated services). Analysis Participants will review real-world case studies of successful policy interventions - both local and global - then work in groups to assess current gaps, barriers, and opportunities in their own communities. Reflection Using a participatory approach, groups will identify key elements of senior-friendly policy, such as: • Accessibility standards in housing regulations • Incentives for adaptive renovations • Integration of care and housing • Intersectoral collaboration • Monitoring and evaluation mechanisms Closure The workshop closes with a "policy pitch" activity: each group presents a draft policy idea or strategy, followed by collective reflection.

<i>Tips for trainers</i>	Use data to ground the problem (e.g., local aging demographics, housing gaps). Invite a guest speaker or local expert to briefly share lived experiences or examples. Encourage participants to bring their own regulations, policies, or municipal plans for review. Facilitate group diversity
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POLICY ANALYSIS WORKSHEET

1. Policy Title:
2. Responsible Authority/Institution:
3. Target Population:
4. Key Provisions Related to Aging and Housing:
5. Strengths of the Policy:
6. Gaps/Barriers for Older Adults:
7. Suggestions for Improvement:
8. Stakeholders Involved in Implementation:

GROUP ACTION PLAN

1. Title of Your Proposed Policy or Program:
2. Objective (What challenge does it address?):
3. Key Components (Services, Incentives, Regulations):
4. Target Group(s):
5. Implementation Plan (Steps, Timeline, Partners):
6. Expected Impact on Older Adults:
7. How will you evaluate success? (Indicators, Feedback Tools)



MY SAFE HOME	
Target: For seniors.	
Duration	1.5 to 2 hours
Materials*	1. Printed Home Safety Checklists (room-by-room audit) 2. Pens, clipboards 3. Photos of "safe" and "unsafe" home settings (for discussion) 4. Sample safety tools (non-slip mats, grab bars, smoke alarms, night lights) 5. Colored stickers or markers 6. Flipchart or whiteboard 7. Optional: short video on fall prevention or home hazards
Description (2000 characters):	Introduction Participants will first engage in a brief discussion on common home risks (falls, poor lighting, loose rugs, hard-to-reach items, fire risks, etc.) and the consequences these may have. Home Safety checklist Next, they will be introduced to a room-by-room home safety checklist, guiding them through areas like bathrooms, kitchens, staircases, and entry ways. In small groups or pairs, participants will evaluate sample scenarios (photos, mock layouts, or personal experiences) and mark hazards using colored stickers or notes. Discussion They'll discuss affordable solutions and see examples of helpful tools or modifications. Trainers can present local services or funding programs available for home adjustments. Conclusions The session ends with participants setting a personal action plan: what small change will they make this week to improve their home safety?



**Tips for
trainers**

- Keep the tone positive and empowering, focus on solutions and independence.
- Encourage sharing of real experiences or "tips" among participants.

HOME SAFETY AUDIT CHECKLIST FOR SENIORS

1. Entrance and Hallways

- ☐ Is the entrance well-lit and free of steps or clutter?
- ☐ Are rugs secured or removed to prevent tripping?
- ☐ Are handrails present and sturdy where needed?

2. Living Room

- ☐ Are pathways clear and wide enough for easy movement?
- ☐ Is furniture arranged to avoid bumping or tripping?
- ☐ Are light switches and remote controls easy to reach?

3. Kitchen

- ☐ Are frequently used items stored at waist height?
- ☐ Is the stove area free from flammable objects?
- ☐ Is there a working smoke detector nearby?

4. Bathroom

- ☐ Are grab bars installed near the toilet and shower?
- ☐ Is there a non-slip mat in the bathtub or shower?
- ☐ Is the water temperature set to avoid burns?

5. Bedroom

- ☐ Can you easily reach a light from bed?
- ☐ Are cords and rugs secured to avoid falls?
- ☐ Is a phone or emergency alert system nearby?

6. Stairs (if applicable)

- ☐ Are steps in good condition and evenly sized?
- ☐ Are handrails on both sides and securely attached?
- ☐ Is the stairway well-lit at top and bottom?



LIVING TOGETHER, AGING TOGETHER

Target:

- *for seniors.*

Duration

1.5 to 2 hours

Materials*

1. Flipchart or whiteboard
2. Printed prompts or images representing co-housing models
3. Short video or photo slideshow of co-housing/community living examples
4. Sticky notes or colored cards

Description (2000 characters):

Introduction

Participants begin with a warm-up question: "What does a good home in old age look like?" followed by a short presentation on co-housing models—small communities where private living spaces are combined with shared resources and activities.

Real examples (videos or photos) of intergenerational co-housing, senior villages, and intentional communities are shown to spark ideas.

Group discussion

Through small group discussions, participants explore:

- Benefits of co-housing (companionship, mutual support, shared costs)
- Concerns or hesitations (privacy, personality fit, management)
- Dreams for ideal living arrangements in the future
- Community values they find most important

Conclusion

The session wraps up with each participant identifying one thing they'd like to change or pursue in their current or future housing experience. This could include visiting a co-housing project, talking to family, or joining a local group.

Tips for trainers

- Share real stories from older adults in shared housing models.
- Encourage group storytelling: "*Have you ever lived in community before?*"
- If possible, invite a guest (even via video) from a real co-housing initiative.

TRAINING RESOURCES

Anziani e diritto all'abitare	Explores the right to housing for older people from legal, urban, and social perspectives, advocating for inclusive and intergenerational living in the face of ageism and urban exclusion	https://library.oapen.org/bitstream/id/c07fc2c6-ee59-4f71-8961-f3c6b0a90c90/9788835157922.pdf
Examples of other Usa and European schemes	Collection of innovative intergenerational and age-friendly housing models from Europe and the USA, showing inclusive, supportive environments for seniors and youth.	https://intergeneration.alhousingblog.files.wordpress.com/2018/03/examples-of-other-usa-and-european-schemes.pdf
Sondaggio AeA Informa sulle esigenze abitative degli anziani	Survey of 370 older adults in Italy examining housing needs, accessibility barriers, social ties, and desires for community-based living solutions.	http://www.abitareeanziani.it/wp-content/uploads/2016/07/II-sondaggio-AeA-Informa-sulle-esigenze-abitative-degli-anziani.pdf
Ageing in place in UK	UK study on ageing in place: benefits include autonomy and familiarity, but risks include isolation and poor housing. Highlights the role of technology and community support.	https://www.researchgate.net/publication/225688711_Ageing_in_Place_in_the_United_Kingdom

TRAINING RESOURCES

Informe 'Defensa y protección de derechos de las personas mayores desde lo comunitario: el caso de la vivienda'	The cost and adequacy of homes hinder the right to housing among older adults. This is revealed in the report "Defense and Protection of the Rights of Older Adults from a Community Perspective: The Case of Housing," a participatory study that addresses the main problems associated with guaranteeing the right to housing among older adults, especially those experiencing poverty or social exclusion. The research was conducted using photovoice as a means to promote the empowerment, participation, and social mobilization of older adults. To this end, five groups of participants over 60 years of age from Ceuta, Malaga, Toledo, Valencia, Seville, and Valladolid were recruited. Through photographic and testimonial work, and in collaboration with social organizations, challenges and proposals associated with the right to housing among this age group were analyzed.	https://www.eapn.es/publicaciones/599/informe-defensa-y-proteccion-de-derechos-de-las-personas-mayores-desde-lo-comunitario-el-caso-de-la-vivienda?utm_source=chatgpt.com
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TRAINING RESOURCES

EL CONSUMIDOR
SÉNIOR Y LA
VIVIENDA: UN
ESTUDIO SOBRE
SUS ACTITUDES
HACIA LAS
COMUNIDADES
DE MAYORES

The University of Extremadura and the Miguel Rosa Morán Foundation have launched the Senior Generation Chair with the aim of developing teaching, research, and innovation activities in areas that improve the quality of life related to the well-being of the adult population. These activities include the preparation of this report on the senior consumer and housing, which is primarily aimed at studying the attitudes of older adults toward so-called senior communities, a housing solution that aims to extend functional autonomy.

https://fundacionmrm.es/wp-content/uploads/2024/02/Informe-Vivienda-Senior_Final.pdf?

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Assessments Section



MODULE: HOUSING

EDUCATORS

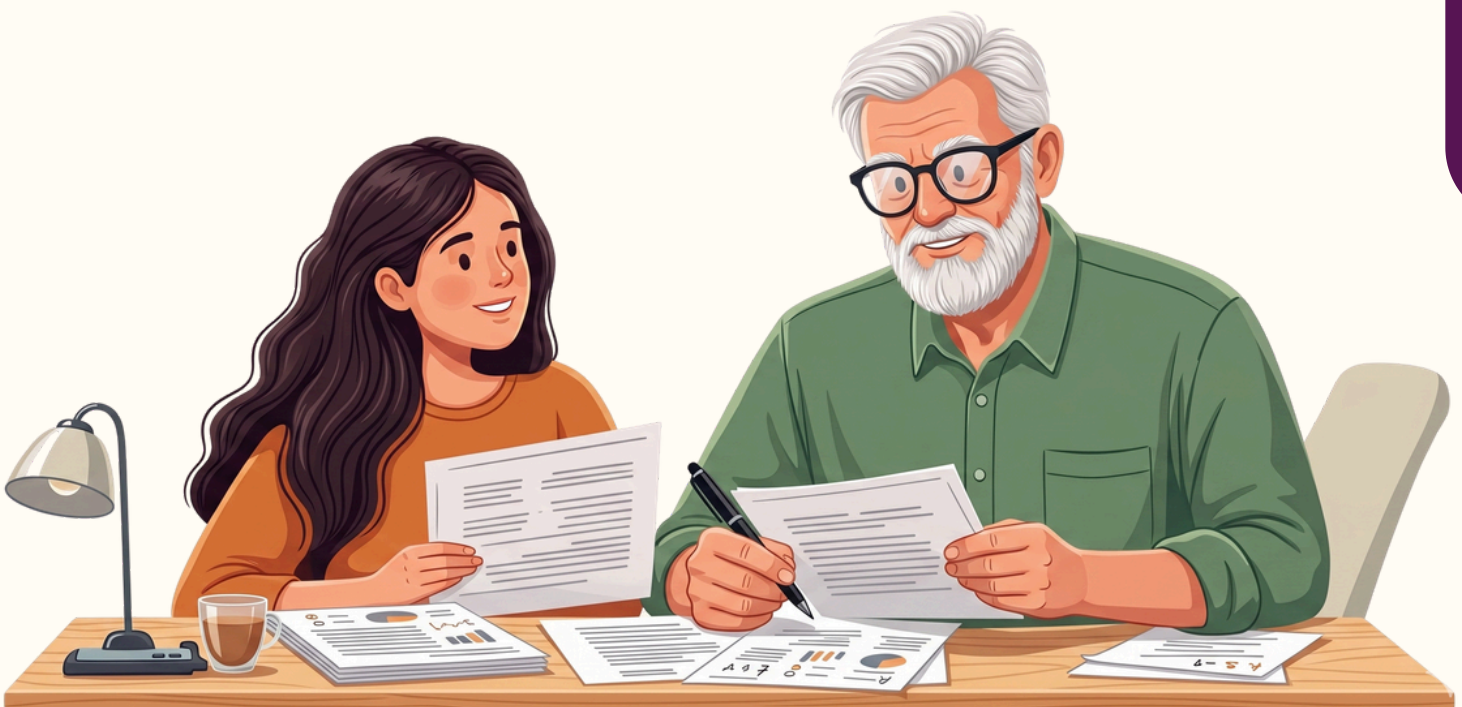
Theme: Understanding Aging and Home Design

1. What does “aging in place” mean?
 - A. Moving to a care facility in old age
 - B. Living at home safely and independently, regardless of age
 - C. Avoiding social contact in older age
 - D. Renting temporary housing in senior villages

2. Which of the following is *not* a principle of universal design?
 - A. Step-free access
 - B. Narrow doorways
 - C. Easy-to-use fixtures
 - D. Good lighting

3. Can universal design features benefit both seniors and younger people?
– Yes / No

4. Do you feel more confident identifying age-related barriers in home environments after this training?
– Yes / No



MODULE: HOUSING

STAKEHOLDERS AND LOCAL ACTORS

Theme: Policy and Planning

5. Which of the following supports aging in place?
 - A. Lack of heating and poor insulation
 - B. Age-friendly public transport and accessible homes
 - C. Limited digital services
 - D. Multi-floor housing without lifts

6. What is a social condominium?
 - A. A luxury private residence
 - B. Public housing for young people
 - C. A mixed model with services and communal areas
 - D. A retirement home for wealthy seniors only

7. Are national housing grants usually easy for seniors to access?
– Yes / No

8. True or False: A policy that promotes integration of care and housing can support older adults' autonomy.
– Yes / No

9. Would you feel prepared to contribute to designing more inclusive housing strategies in your community?
– Yes / No

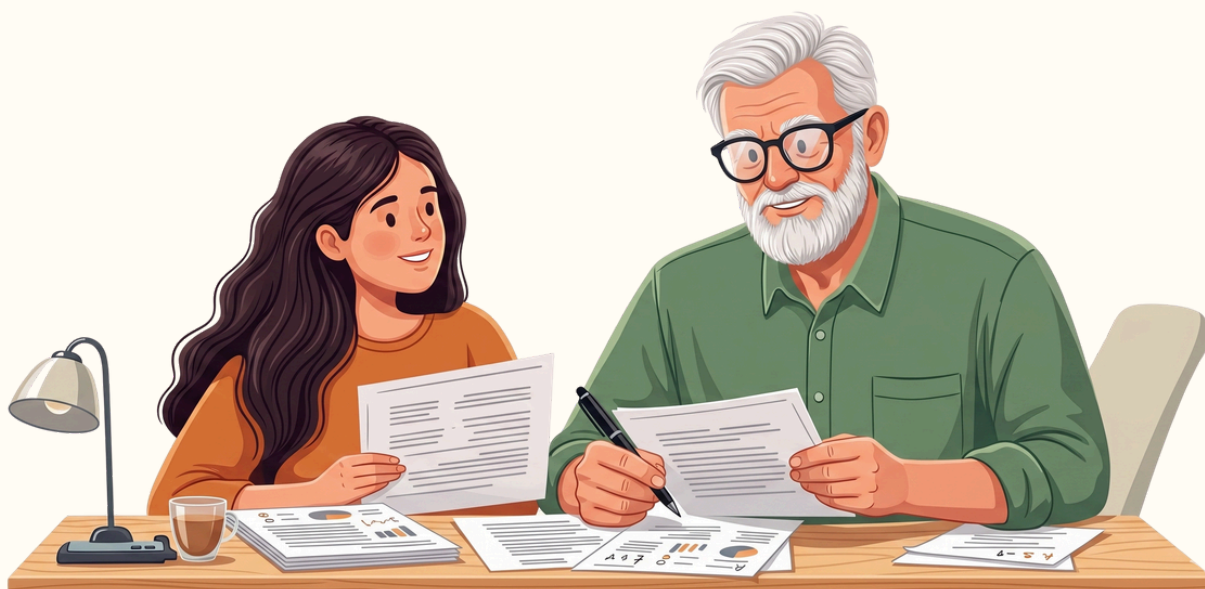


MODULE: HOUSING

SENIORS

Theme: Safety and Independence at Home

10. Which of the following is a common safety hazard in the home?
 - A. Handrails
 - B. Non-slip mats
 - C. Loose rugs
 - D. Motion-sensor lighting
11. True or False: A grab bar in the bathroom can help prevent falls.
– Yes / No
12. Have you ever done a home safety check of your living space?
– Yes / No
13. What is one feature of an age-friendly home?
 - A. High shelves
 - B. Bright lighting
 - C. Cluttered hallways
 - D. Steep stairs
14. Do you feel more informed about options such as co-housing or senior villages?
– Yes / No
15. Would you consider modifying your home to improve safety and comfort?
– Yes / No



MODULE 4

Social Participation



Community &
Healthcare

Transportation

Housing

Social Participation

Outdoor Spaces &
Buildings

Respect and Social
Inclusion

European Seniors Friendly Communities Guideline

MODULE: SOCIAL PARTICIPATION

THEORETICAL INTRODUCTION

Social participation is a key factor in promoting the well-being and quality of life of older adults. As life expectancy increases and populations age, it becomes ever more crucial to ensure that seniors remain active, engaged, and valued members of society. Social participation refers to the involvement of individuals in activities that foster interaction, a sense of belonging, and contribution to community life.

For seniors, this can include a wide range of activities: volunteering, joining cultural or recreational groups, attending educational courses, participating in intergenerational projects, or contributing to civic decision-making. These activities not only prevent isolation and loneliness, but also enhance mental and physical health, promote lifelong learning, and reinforce a sense of purpose.

Barriers to participation, such as mobility issues, digital divides, limited income, or societal ageism, must be addressed through inclusive and accessible policies. This means creating age-friendly environments, offering transportation solutions, supporting digital skills development, and promoting positive narratives about aging.

Intergenerational initiatives are especially powerful: they allow the transmission of knowledge and traditions, reduce stereotypes, and build stronger communities. Seniors, with their life experience and resilience, are a vital resource for society.

Promoting social participation is not only a right but a necessity for healthy, cohesive societies. By valuing and enabling the active involvement of older adults, we invest in a future where aging is seen as a time of potential, contribution, and connection.

STATUS QUO

Engaging in social and community activities is essential for seniors' well-being, yet many older adults remain unaware of available opportunities due to poor communication and outreach. Despite the presence of local events, educational programs, and community groups, information about these initiatives often fails to reach the seniors who need them most. Many rely on word of mouth, printed notices, or local organisations for updates, yet much of today's communication happens online or through digital platforms that seniors may not use. As a result, many older adults remain disconnected from social networks, reinforcing isolation and limiting opportunities for engagement.

Beyond access to information, bureaucratic and legal concerns have also created barriers to participation, particularly in volunteering. In some communities, strict liability and insurance policies prevent informal volunteering, making it difficult for seniors to engage in meaningful ways. Local groups and individuals who want to offer assistance—such as transportation support or companionship programs—often face complex legal requirements, discouraging initiatives that could otherwise benefit both seniors and the wider community.

The COVID-19 pandemic has further deepened social isolation, as many seniors who once participated in community centers, recreational activities, and lifelong learning programs stopped attending due to health risks. While some activities have resumed, many seniors have not returned, either out of fear, a loss of routine, or due to lingering mobility and health concerns. For many older adults, the disruption of regular social habits has led to prolonged isolation, making it harder to reintegrate into community life.

Another major issue is the lack of intergenerational programs, which has weakened connections between younger and older generations. Many seniors have limited opportunities to interact with youth in meaningful ways, leading to a loss of knowledge-sharing, mentorship, and mutual support. Younger generations often see aging from a distance, while seniors find themselves increasingly marginalised from civic engagement, digital transformation, and evolving social dynamics. Without structured intergenerational initiatives, social cohesion suffers, and seniors are left without a strong sense of belonging in their own communities.

In summary, barriers to social participation—including poor outreach, restrictive volunteering regulations, lingering effects of the pandemic, and a lack of intergenerational programs—continue to limit opportunities for seniors to remain active, engaged, and socially connected. Addressing these challenges requires better communication strategies, policy changes that facilitate informal community support, initiatives that encourage post-pandemic reintegration, and dedicated programs that bring generations together to foster stronger community ties.

STATUS QUO

In summary, barriers to social participation—including poor outreach, restrictive volunteering regulations, lingering effects of the pandemic, and a lack of intergenerational programs—continue to limit opportunities for seniors to remain active, engaged, and socially connected. Addressing these challenges requires better communication strategies, policy changes that facilitate informal community support, initiatives that encourage post-pandemic reintegration, and dedicated programs that bring generations together to foster stronger community ties.

Country-Specific Findings

- **Italy:** Parishes and the University of the Third Age offer activities, but many seniors remain isolated.
- **Ireland:** Programs like Men's Sheds and Women's Sheds exist, but insurance issues limit informal volunteering.
- **Spain:** Intergenerational programs are nearly absent, and seniors feel excluded from community planning



LEARNING OUTCOMES

Description of the main learning objectives and results to be achieved in terms of knowledge, skills and attitudes by:

- *Educators*
- *Stakeholders and local actors*
- *Seniors*

Educators: *will learn to recognise and challenge common stereotypes about older adults, gaining a deeper understanding of the impact of ageism on well-being and exploring strategies to counteract age-based biases in both personal and professional contexts. They will be encouraged to promote positive and realistic narratives around aging.*

The module will also equip them with the tools to design and facilitate intergenerational events, helping them understand both the benefits and potential challenges of intergenerational interaction. Educators will co-design inclusive event concepts and draft practical plans to bring youth and seniors together in meaningful, engaging ways.

Stakeholders and local actors: *will explore the bureaucratic and structural barriers that may discourage older adults from volunteering, and will work collaboratively to develop simplified and age-friendly processes. They will be guided to raise awareness within their own organisations and networks—such as NGOs, municipalities, and public bodies—on the value and potential of senior volunteering.*

Additionally, they will facilitate networking among key community players, mapping both existing and potential opportunities for senior engagement. Together, they will co-create actions that enable seniors to contribute actively to community life in meaningful roles.

Seniors: *will be encouraged to reflect on their personal interests, hobbies, and talents, discovering or rediscovering meaningful activities that support a sense of purpose and promote active aging. The module will provide opportunities for self-expression and connection with others, reinforcing social ties and community participation.*

In addition, seniors will be introduced to digital tools—such as social media, video calls, and online communities—through hands-on activities designed to build basic digital confidence. They will explore how these tools can help maintain and strengthen relationships with family and friends, fostering greater inclusion and autonomy in daily life.



EDUCATIONAL TOOLS

Beyond the Mirror: Challenging Stereotypes about Aging

Target:

- *for educators*

Duration

2 to 3 hours (adjustable based on specific needs)

Materials*

1. Pc and project with internet connection
2. Papers, markers and pens
3. Cards with scenarios (e.g., in a doctor's office, a job interview, a family setting)

Description

(2000 characters):

1. Welcome and Icebreaker (15-20 min)

Activity: "Word Association Circle"

Ask participants to say the first word that comes to mind when they hear "old age" or "elderly." Write responses on a flip chart. Then ask:

- Which of these are positive? Negative?
- Are any based on stereotypes?

2. Stereotypes Brainstorming (30 min)

Activity: Group Work - Myth or Reality?

Provide a list of common statements like:

- "Old people are grumpy."
- "Older adults can't learn new things."
- "Elderly people are a burden."

Let small groups discuss whether these are myths or realities, and ask them to explain why.

Debrief: Connect their answers to research and statistics on aging.

3. Impact of Stereotypes (20-30 min)

Mini-lecture or video on ageism: how stereotypes affect self-esteem, social roles, health outcomes, and societal participation of older adults.

Optional Video Resource: "Let's End Ageism" TED Talk by Ashton Applewhite.

	Discussion Questions: • Have you witnessed these effects in your work? • How do seniors internalise or reject stereotypes? 4. Role-Play Scenarios (30-40 min) Activity: Empathy Through Role-Play Prepare short scenarios where participants must act as seniors being stereotyped (e.g., in a doctor's office, a job interview, a family setting). Others act as the people around them. 5. Building New Narratives (30 min) Activity: Campaign for Change Each group creates a short slogan, poster, or social media post that promotes a positive and realistic image of aging.
Tips for trainers	Create a safe space: set the tone early: encourage active listening, openness, and non-judgment. Engage multiple learning styles: use visuals, movement, group discussion, and individual reflection to keep everyone engaged.
"Let's End Ageism" TED Talk by Ashton Applewhite: https://www.ted.com/talks/ashton_applewhite_let_s_end_ageism?utm_campaign=tedspread&utm_medium=referral&utm_source=tedcomshare	





Bridging Generations: Designing Meaningful Intergenerational Events

Target:

- *for educators*

Duration

One full day (6–7 hours)

Materials*

1. Flipcharts, post-its, markers
2. Projector and slides
3. Persona templates
4. Event canvas templates
5. Comfortable seating for group work

Description (2000 characters):

1. Welcome & Icebreaker (30 min)

Activity: "Generations in a Circle" – Participants share an object or story representing a different generation in their life.

2. Understanding Intergenerational Engagement (45 min)

Mini-presentation or video: Benefits of intergenerational events (cognitive stimulation, reduced loneliness, cultural transmission, etc.).

3. Mapping Needs & Interests (1 hour)

Activity: Persona mapping – participants create profiles of seniors and youth they work with.

Explore: What are their motivations, fears, communication styles?

4. Creative Brainstorming (1 hour)

Small groups generate event ideas around shared themes (e.g., food, arts, digital storytelling, games, local history).

Use "How Might We..." prompts to frame ideation (e.g., "How might we create a space where seniors teach youth something traditional?").

Lunch Break (1 hour)

5. Co-Design Lab: Event Planning Simulation (1.5 hours)

Groups select one idea and develop:

- Objectives
- Roles of seniors and youth
- Activities
- Materials needed
- Timeline
- Inclusivity & accessibility strategies



	6. Sharing and Feedback (45 min) Each group presents their event concept. Peer feedback: use "I like / I wonder" format. 7. Final Reflection and Next Steps (30 min) Individual reflection: "What will I apply next week?" Group reflection: Write a "commitment postcard" to themselves with one concrete action.
Tips for trainers	Mix groups intentionally: Try to ensure diversity in group composition (age, background, roles) to enrich discussions. Time management: Display a clear agenda and assign a co-facilitator or "timekeeper" per group during group work.



Removing Administrative Barriers to Senior Volunteering

Target:

- *for stakeholders and local actors*

Duration

2 hours

Materials*

Flipcharts, post-its, markers

Description

(2000
characters):

1. Welcome & Framing (15–20 min)

Introduce the topic by highlighting:

- The importance of senior volunteering (social cohesion, intergenerational links, personal well-being).
- The common challenges seniors face (registration forms, digital requirements, insurance issues, lack of recognition).

Use data or testimonials to make it more relatable.

2. Problem Mapping – What's Stopping Us? (30 min)

Small group discussion or post-it brainstorming. Ask participants:

- Have you encountered difficulties in volunteering or supporting volunteers?
- Which administrative burdens are most discouraging (e.g. complex forms, digital illiteracy, excessive paperwork, ID or health certificates, rigid hours)?

Create a shared visual map of barriers.

3. Barrier Breakdown – Let's Fix It! (30 min)

Solution co-design session. Divide participants into thematic groups (e.g. "forms & bureaucracy," "digital access," "legal/insurance," "recognition").

Each group:

- Identifies one key barrier.
- Designs a simplified, senior-friendly solution (e.g., a one-page registration form, in-person help desks, flexible scheduling, analog alternatives to digital forms, volunteer cards for seniors, etc.).

4. Plenary – Pitch Your Solution (20 min)

Each group presents its idea. Collect them into a "Mini Charter for Inclusive Volunteering" to share with local institutions.



**Tips for
trainers**

Mix roles in groups: Include seniors, NGO staff, municipal reps, and volunteers together so discussions reflect real intersections.

Use visual facilitation tools: Use color-coded post-its or icons to help identify recurring issues and types of solutions.





Connecting Generations, Strengthening Communities: A Local Stakeholder Lab

Target:

- *for stakeholders and local actors*

Duration

Half day

Materials*

Flipcharts, post-its, markers, Community map or blank town layout
Templates: Idea canvas, partnership planner

Description (2000 characters):

1. Welcome & Opening Circle (20 min)

- Introduction of purpose and flow of the event
- Quick round of name, organization, and one word that describes "community"

2. "Speed Networking" Activity (30 min)

- Rotate every 5 minutes to meet someone new and answer prompts like:
- What does your organization do?
- What's one challenge you see in involving seniors?
- What opportunity do you wish existed in our town?

3. Inspiration Panel (30 min)

Short 5–7 min stories from:

- A senior who volunteers
- An organization with successful intergenerational experience
- A youth who benefited from connection with older adults

4. Community Mapping Workshop (45 min)

- Group work with maps or post-its:
 - What resources already exist for senior engagement?
 - What gaps or missed opportunities are visible?

Output: a large "Community Assets and Needs" board

5. Co-Creation Lab: From Needs to Actions (60 min)

- Mixed stakeholder groups work with templates to answer:
 - What initiative or activity could engage seniors more?
 - Who could lead or support it?
 - What support/resources are needed?
- What partnerships can we activate?

	6. Gallery Walk and Commitment Wall (30 min) • Each group presents their idea on a poster. • Participants place stickers or comments on ideas they support or want to join. Everyone writes one commitment on a "Next Steps" card (e.g., "I will call X org to explore..."). 7. Closing Circle (10 min) Quick feedback: "What's one connection or insight you're taking with you?"
Tips for trainers	Model inclusive behavior: use inclusive language: "older adults," "community contributors," "lifelong learners." Have a co-trainer or timekeeper to support group transitions and logistics.





Rediscovered Passions: Uncovering Your Talents and Interests

Target:

- *for seniors.*

Duration

2 to 3 hours (can also be structured as a cycle of 3 sessions)

Materials*

Colored markers and pens

Paper, Post-it notes in multiple colors

Flipchart paper or large posters labeled with categories:

- Artistic / Creative
- Manual / Practical
- Nature / Movement
- Intellectual / Learning
- Social / Volunteering

Description

(2000
characters):

1. Welcome and Icebreaker (15–20 min)

Activity: “Once Upon a Time... a Past Hobby of Mine”

In pairs or small groups, invite each participant to share a hobby they once enjoyed, even in childhood.

Prompts to guide the sharing:

- When did you start it?
- How did it make you feel?
- Why did you stop?

2. Hobbies Brainstorming Wall (20 min)

Activity: Post-it Brainstorming Session

Ask participants:

- What are all the hobbies you’ve ever had—or wanted to try?
- What activities make you lose track of time?
- What brings you joy or gives you a sense of purpose?

Participants write their answers on post-its and stick them on a large sheet divided into categories:

- Artistic / Creative
- Manual / Practical
- Nature / Movement
- Intellectual / Learning
- Social / Volunteering

	3. Personal Reflection – “My Map of Passions” (30 min) Activity: Create Your Own Map of Interests Hand out blank sheets with the following sections: • I used to enjoy doing... • I would like to try... • I feel skilled at... • I would like to share with others... Participants are encouraged to write, draw, doodle, or create collages using colors and materials. 4. Talent Circle (30–40 min) Activity: Sharing Our Passions Participants voluntarily share a hobby they’d love to return to—or try for the first time. Discussion prompts: • What support would you need to restart? • Would you like to do this in a group? 5. Mini Discovery Lab (30 min) (Optional) Activity: Hands-On Exploration Offer 2–3 small “tasting” stations where participants can try out hobbies in a relaxed, informal way, such as: • Painting or mandala coloring • Knitting or crochet • Puzzles or memory games • Writing a short memory • Listening to or playing music • Gardening ideas 6. Closing and Commitment (15 min) Wrap up the session with a moment of reflection. Ask participants to complete the sentence: “One thing I want to do for myself after today is...”
Tips for trainers	Take notes on common themes and interests—these can inspire future workshops, peer groups, or hobby clubs. Foster a warm, welcoming, and unhurried atmosphere



Connected with the World: Exploring Social Media, Video Calls, and Online Forums	
Target: • <i>for seniors.</i>	
Duration	2 to 3 hours
Materials*	1. <i>Laptop with internet connection</i> 2. <i>Projector or large screen</i> 3. <i>Notebooks and pens for participants</i>
Description (2000 characters):	1. Welcome & Expectations – 15 min Activity: “Digital Curiosities” A relaxed and open round of introductions where participants share what they’re curious about or hope to learn. We’ll also ask: • “Have you ever used WhatsApp, Facebook, Zoom, or similar tools?” • “How do you usually keep in touch with family and friends?” Responses will be noted on a board to tailor the rest of the session to participants’ interests. 2. Why Stay Connected Online? – 15–20 min A simple, visual mini-presentation on how digital tools can help: • Stay in touch with grandchildren and friends • Join groups and events based on personal interests • Access services and support when needed 3. Social Media for Beginners – 30–40 min Focus: WhatsApp or Facebook (choose based on group needs) Participants will learn: • How to find and follow family, friends, or local groups • How to react, comment, and share posts • How to protect their privacy and avoid scams or fake news 4. Video Calling Made Easy – 30–40 min Tools: WhatsApp Video, Zoom, or Google Meet (pick 1–2 depending on familiarity)

	Participants will practice: • Joining a call • Turning camera and microphone on/off • Inviting others • Using chat and reactions 5. Closing & What's Next? – 10 min Quick feedback with a smiley scale: 😊 I feel confident 😐 I need more practice 😞 I'm still unsure Each participant will be invited to share: "What will I try with my phone or computer this week?"
Tips for trainers	Keep goals realistic: Aim for confidence and curiosity, not perfection Test your tech setup: ahead of time (Wi-Fi, projector, demo accounts)





TRAINING RESOURCES		
An Overview of Social Participation in Older Adults: Concepts and Assessments	Explores definitions, types, and assessments of older adults' social participation and its role in health promotion.	https://pmc.ncbi.nlm.nih.gov/articles/PMC8419478/
L'ANZIANO COME RISORSA -CASI, TESTIMONIANZE E CONDIZIONI PER LO SVILUPPO DELLA PARTECIPAZIONE SOCIALE DEGLI ANZIANI	Investigates how older adults contribute to society through social participation, with case studies and policy analysis	https://www.fondazionevittorio.it/sites/default/files/content-attachment/2008-L'ANZIANO_COME_RISORSA_-_Area_Welfare_0.pdf
Mechanism of the impacts of older adults' social participation on their health	Analyzes how social participation impacts older adults' health via group cohesion, using a study in Beijing	https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2024.1377305/full
Indagine IRES – Protagonismo sociale degli anziani: stili a confronto	Compares styles of senior social engagement in Italy and Europe, based on local case studies and volunteer activities	https://www.fondazionevittorio.it/sites/default/files/content-attachment/protagonismo_anziani_0.pdf



TRAINING RESOURCES

Guía metodológica de Participación Social de las personas en situación de pobreza y exclusión social	For the European Anti-Poverty Network in Spain (EAPN-ES), the participation of people experiencing poverty or exclusion is essential and constitutes one of its fundamental and priority lines of work.	https://www.eapn.es/publicaciones/31/guia-metodologica-de-participacion-social-de-las-personas-en-situacion-de-pobreza-y-exclusion-social?
Participación Comunitaria en Salud - Rioja Salud	Community participation is a fundamental ingredient for Community Health Action, understood as the process that promotes the mobilization and meeting of different community stakeholders (citizens, professionals and technicians, and administrations).	https://www.riojasalud.es/escuela-salud/la-salud-en-tu-comunidad/salud-en-el-entorno-sanitario/participacion-comunitaria-en-salud
Mechanism of the impacts of older adults' social participation on their health	Analyzes how social participation impacts older adults' health via group cohesion, using a study in Beijing	https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2024.1377305/full
Indagine IRES – Protagonismo sociale degli anziani: stili a confronto	Compares styles of senior social engagement in Italy and Europe, based on local case studies and volunteer activities	https://www.fondazionevittorio.it/sites/default/files/content-attachment/protagonismo_anziani_0.pdf



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Assessments Section



MODULE: SOCIAL PARTICIPATION

EDUCATORS

Topic: Ageism and Stereotypes

1. Which of the following is an example of ageism?
A. Inviting seniors to a workshop
B. Assuming older adults can't learn technology.
C. Asking older adults to share life stories
D. Promoting senior volunteering
2. True or False: Older adults cannot learn new skills as effectively as younger individuals.
– Yes / No
3. Which of these is a positive effect of intergenerational projects?
A. Reinforcement of stereotypes
B. Reduced mutual understanding
C. Increased isolation
D. Cultural knowledge transmission

Topic: Intergenerational Engagement

4. What is one benefit of intergenerational programs?
A. More rules for volunteers
B. Reduced opportunities for youth
C. Strengthened community bonds
D. Limited sharing of skills
5. Do you feel confident designing an intergenerational event plan after this training?
– Yes / No





MODULE: SOCIAL PARTICIPATION

STAKEHOLDERS AND LOCAL ACTORS

Topic: Administrative Barriers

6. Which of these is a common barrier to senior volunteering?
- A. Lack of interest from seniors
 - B. Complex registration and insurance requirements
 - C. Abundance of programs
 - D. Shortage of digital resources
7. True or False: Simplifying procedures and forms can increase senior participation.
– Yes / No
8. Do you plan to implement more senior-friendly procedures in your organization after this training?
– Yes / No

Topic: Local Ecosystem and Networking

9. What's the purpose of mapping community assets?
- A. To evaluate staff performance
 - B. To create barriers for access
 - C. To identify engagement opportunities
 - D. To avoid collaboration
10. Which of the following is *not* a useful partner in community networking for senior engagement?
- A. Youth associations
 - B. Local governments
 - C. Cultural institutions
 - D. Private senior-only clubs with no outreach



MODULE: SOCIAL PARTICIPATION

SENIORS

Topic: Rediscovering Interests

11. Do you feel more motivated to resume or start a new hobby after this session?
– Yes / No
12. Which of these activities best fits in the “Intellectual / Learning” category?
A. Gardening
B. Painting
C. Language classes
D. Volunteering
13. Have you identified a talent or interest that you would like to share with others?
– Yes / No

Topic: Digital Confidence

14. Which of these tools can be used to make a video call?
A. WhatsApp
B. Google Meet
C. Zoom
D. All of the above
15. True or False: Sharing your password on Facebook is safe if it's with a friend.
– Yes / No
16. After today's session, how confident do you feel about using a smartphone to stay in touch?
A. Very confident
B. Somewhat confident
C. Need more practice
D. Not confident at all
17. Have you ever joined an online group or community before?
– Yes / No

MODULE 5

Outdoor Spaces and Buildings

Community &
Healthcare

Transportation

Housing

Social Participation

Outdoor Spaces &
Buildings

Respect and Social
Inclusion



European Seniors Friendly Communities Guideline

MODULE: OUTDOOR SPACES AND BUILDINGS

THEORETICAL INTRODUCTION

The design and maintenance of outdoor spaces and buildings are foundational to creating inclusive, safe, and socially vibrant communities for older adults. Drawing from established frameworks and interdisciplinary principles, the following concepts underpin this module:

Age-Friendly Urban Design, as defined by the World Health Organisation's Global Age-Friendly Cities initiative, emphasises equitable access to public infrastructure. This approach prioritises features like barrier-free pathways, rest areas with seating, and adequate lighting to ensure older people can navigate streets, parks, and buildings independently. For example, tactile paving and ramps not only aid those with mobility challenges but also create environments that benefit parents with pushchairs or individuals with temporary injuries, embodying the principle of universal design.

Universal Design extends beyond accessibility compliance by advocating for spaces that are inherently usable by people of all ages and abilities. Key elements include intuitive signage, non-slip surfaces, and ergonomic seating, which reduce physical strain and prevent accidents. This philosophy aligns with the social model of disability, recognising that environments—not individual limitations—create exclusion.

Social Inclusion Through Public Spaces highlights the role of parks, plazas, and community hubs in fostering intergenerational connections. Well-designed spaces encourage activities like walking clubs, outdoor markets, or cultural events, which combat loneliness and promote mental well-being. For instance, intergenerational seating arrangements in parks can facilitate spontaneous interactions between older adults and younger residents, strengthening community bonds.

Safety and Mobility addresses the physical and psychological barriers that deter older people from engaging with outdoor environments. Poorly maintained pavements, uneven surfaces, and inadequate lighting contribute to fear of falls, a leading cause of hospitalisation among older adults. Proactive measures like regular hazard audits, clear wayfinding systems, and accessible public transport are critical to building confidence and encouraging active lifestyles.

STATUS QUO

Despite growing awareness of age-friendly principles, significant gaps persist in Europe's outdoor spaces and buildings, as revealed by focus groups across Ireland, Italy, and Spain:

- **Physical Accessibility:** Cracked pavements, steep kerbs, and uneven surfaces remain widespread, particularly in rural and historic urban areas. In Ireland, participants highlighted poorly maintained footpaths, where older people avoid walking due to tripping hazards.
- **Amenity Shortfalls:** Public benches, shaded areas, and public toilets are scarce. In Dublin, older adults noted that parks lack sufficient seating, forcing visitors to cut walks short.
- **Building Inaccessibility:** Many public buildings—including healthcare facilities—lack ramps, lifts, or automatic doors. In Spain, older adults in Valencia reported difficulty accessing upper-floor clinics in older buildings.
- **Digital Exclusion:** Transport systems increasingly rely on app-based ticketing, disadvantaging older people unfamiliar with smartphones. Irish focus groups criticised Dublin Bus's shift to digital-only tickets, leaving older passengers dependent on others for travel.
- **Safety Concerns:** Poor street lighting and isolated pathways deter evening outings. Italian participants described avoiding night time walks due to fear of theft or falls.

COUNTRY-SPECIFIC FINDINGS

- **Ireland:** Rural transport gaps and inaccessible GP surgeries dominate concerns. Older adults in Cork emphasised long waits for home adaptation grants, delaying critical modifications like stairlifts.
- **Italy:** Historic cities like Florence struggle with uneven cobblestone streets and a lack of lifts in heritage buildings, isolating older residents in upper-floor flats.
- **Spain:** Urban older adults in Madrid and Barcelona face mandatory digital ticketing for buses and trains, while those in coastal towns like Málaga highlighted beachfronts without shaded rest areas.

LEARNING OUTCOMES

Description of the main learning objectives and results to be achieved in terms of knowledge, skills and attitudes by:

Seniors:

- *Gain the ability to express specific requirements for public spaces (e.g., bench design, hazard reporting) through participatory activities*
- *Develop skills to identify safety hazards (e.g., uneven pavements, poor lighting) and collaborate on actionable solutions using tools.*

Stakeholders & Local Actors:

- *Learn to conduct accessibility audits and co-design improvement plans with seniors, ensuring inclusive urban planning*
- *Inclusive Mindset: Recognise and challenge age-related stereotypes through role-play scenarios, fostering policies that prioritise equity.*

Educators:

- *Master the principles of Universal Design (UD) and WHO guidelines to teach others how to create accessible outdoor spaces.*
- *Design and promote inclusive community projects, such as gardens, that bridge generational gaps and address social isolation.*





EDUCATIONAL TOOLS

Activity 1: Collaborative Access Audit & Improvement Planning

Target: *for stakeholders and local actors*

Duration

2 hours

Materials*

1. Self-Assessment Access Checklists (from Appendix 1 of Great Outdoors: A guide for accessibility).
<https://www.sportireland.ie/sites/default/files/2019-10/great-outdoors-a-guide-for-accessibility.pdf>
2. Printed maps/photos of a local outdoor site (e.g., park, community centre).
3. Sticky notes, markers, and large paper.
4. Case studies from [Irish Wheelchair Association \(Access Advisory Team\)](#), or [CARA](#).

Description
(2000
characters):

Objective: Equip staff to identify accessibility barriers and co-design solutions with seniors.

1. Case study discussion (30 mins):

- Begin with a mini Disability Equality Training session using case studies (e.g., "How uneven paths exclude seniors"). Discuss the social model of disability (barriers are societal, not individual).
- Share examples of successful access upgrades (e.g., IWA's park redesigns).

2. Collaborative Audit (1 hour):

- Divide participants into small groups. Give each a checklist and site map.
- Role-play as "accessibility detectives": Identify barriers (e.g., steep kerbs, lack of seating) and mark them on the map.
- Include Seniors: Invite 2–3 seniors to join each group and share lived experiences (e.g., "I avoid this path because it's too slippery").

	3. Solution Co-Design (1 hour): - Groups draft an Access Improvement Plan using sticky notes: - Short-term fixes: Paint kerbs yellow for visibility. - Long-term upgrades: Install ramps or benches. - Present plans to the group. Use a "Dragon's Den" format where seniors/stakeholders ask questions. 4. Action Commitments (30 mins): - Each participant writes one actionable step (e.g., "Report hazards via "FixMyStreet" or "Apply for IWA grants").
Tips for trainers	Pair staff with seniors during audits and assign clear ownership for each improvement step (e.g., "Maria emails council about broken pavements").
<i>*if needed add here tables, pictures or other materials to be used for the activity</i> Supporting Materials: Checklists: Use the Appendix 1 templates from the https://www.sportireland.ie/sites/default/files/2019-10/great-outdoors-a-guide-for-accessibility.pdf. Case Studies: Download IWA's guides on accessible parks or CARA's inclusive adventure training modules. Grant Resources: Share links to local council funding schemes.	





Activity 2: 'Breaking Stereotypes' Role-Play Workshop

Target: *for stakeholders and local actors*

Duration

60 mins

Materials*

Scenario cards (e.g., "A senior wants to join a hiking group but fears being excluded"). See the supporting material below

Description
(2000 characters):

Objective: Challenge preconceptions about ageing/disability and embed inclusive practices.

Steps:

1. Role-Play Scenarios (1 hour):

- Groups act out scenarios (see the scenarios below).

2. Policy Redesign (1 hour):

- Review your organisation's current policies.
 - Rewrite one policy (e.g., event planning) to include senior input.

3. Commitment Wall:

- Participants post pledges on a wall (e.g., "I will always consult seniors when planning activities").

Tips for trainers

Rotate roles (senior, dismissive/inclusive staff) and pause scenarios to challenge stereotypes (e.g., "Why assume frailty?").

**if needed add here tables, pictures or other materials to be used for the activity*

Supporting Material:

Scenario 1: The Digital Ticketing Dilemma

Context:

A senior wants to attend a community event but must book tickets online. They approach a staff member for help, explaining they don't own a smartphone.

Stereotypical Response:

Staff member sighs and says, "Everyone uses apps now. Maybe ask a family member to do it for you?"

Inclusive Response:

Staff member offers to book tickets on their behalf and suggests introducing paper tickets for future events. "Let's set up a phone-booking option too – I'll raise this with the team."

Discussion Questions:

- How does digital exclusion limit participation?
- What alternatives can ensure equal access?

Scenario 2: The Unreachable Park Bench

Context:

A senior with mobility issues points out that the nearest park bench is 200 metres away, making it impossible to rest during walks.

Stereotypical Response:

Staff member says, "We can't add more benches – it's a historic park. Maybe you should walk shorter distances?"

Inclusive Response:

Staff member notes the concern and suggests temporary seating (e.g., portable stools) while lobbying for permanent benches. "Let's map your walking route to identify priority spots."

Discussion Questions:

- How do assumptions about "heritage preservation" exclude seniors?
- What low-cost fixes can bridge gaps while waiting for long-term solutions?

Scenario 3: The 'Too Risky' Nature Walk

Context:

A senior expresses interest in a local hiking group but is told, "The trail is too rough for someone your age."

Stereotypical Response:

Organiser says, "We don't want anyone slowing the group down. Why not try our gentle yoga class instead?"

Inclusive Response:

Organiser adapts the route (e.g., shorter loop, smoother path) and pairs the senior with a buddy. "Let's trial the adjusted route together next week!"

Discussion Questions:

- How do stereotypes about ageing limit opportunities?
- How can activities be adapted without patronising participants?



Scenario 4: The Invisible GP Surgery

Context:

A senior struggles to access a first-floor GP surgery with no lift. They ask the receptionist for help.

Stereotypical Response:

Receptionist says, "We've been here for decades – you'll have to manage the stairs or find another clinic."

Inclusive Response:

Receptionist arranges a ground-floor consultation room and commits to advocating for a lift. "I'll also share home-visit options with you today."

Discussion Questions:

- How does inaction normalise exclusion?
- What interim solutions can organisations offer while waiting for structural changes?





Activity 1: Design Your Dream Bench

Target: *for seniors*

Duration

1 hour

Materials*

Large paper sheets, coloured pens and stickers

Description
(2000
characters):

Objective: Empower seniors to articulate their needs for public seating.

Steps:

1. **Discussion:** Ask seniors to share frustrations about current benches (e.g., "Too low to stand up from").
2. **Design Session:** In small groups, sketch a "dream bench" incorporating features like back support, armrests, or integrated planters.
3. **Presentation:** Groups pitch their designs, explaining how each feature improves accessibility.

**Tips for
trainers**

Trainer Tip: Use sticky notes to vote on the most popular design features.

**if needed add here tables, pictures or other materials to be used for the activity*



Activity 2: Hazard Hunt & Fix

Target: *for seniors*

Duration

1 hour

Materials*

- Localised Maps: Printed/digital maps of a park in each partner country (e.g., Dublin's Phoenix Park, Valencia's Turia Gardens, Florence's Cascine Park).
- Hazard Tokens: Coloured stickers/icons (e.g., red triangles for cracked pavements, blue dots for poor lighting).
- Solution Board: A shared board for brainstorming fixes (stickers, pens, sticky notes).
- Reporting Tool Cards: Localised versions (e.g., FixMyStreet Ireland).

Description (2000 characters):

Objective: Identify and prioritise outdoor hazards through collaborative mapping, culminating in actionable solutions.

Steps:

1. Hazard Hunt (20 mins):

- Seniors explore the map, placing tokens where they've encountered hazards (e.g., "This bridge in Valencia has no handrails!").

2. Mapping & Patterns (15 mins):

- Cluster similar tokens (e.g., all lighting issues). Discuss trends: "Why are hazards concentrated near the Dublin park entrance?"

3. Solution Sprint (25 mins):

- Small groups propose fixes for top 3 hazards. Use Solution Board to categorise:
 - Quick Fix (e.g., report potholes via council app).
 - Long-Term (e.g., petition for more benches).
- Vote on best solutions to implement first.

Tips for trainers

- *Localise:* Partner with councils to provide country-specific maps/reporting tools.
- *Involve Storytelling:* Ask seniors to share a personal story tied to a hazard (e.g., "I fell here last winter") to humanise data.

**if needed add here tables, pictures or other materials to be used for the activity*



Activity 1: Universal Design & Age-Friendly Cities Training Workshop

Target: *for educators*

Duration

1 hour

Materials*

PPT Slides with supporting material information

Description
(2000
characters):

Objective: Equip educators and community health workers to teach and apply UD principles and WHO guidelines to improve outdoor spaces for seniors.

Workshop Steps

1. Lecture & Discussion

Materials:

- Slides summarising UD principles and WHO goals.
- Case studies e.g., Dublin's Age-Friendly Benches, https://www.dublincity.ie/sites/default/files/media/file-uploads/2018-07/AF_PublicRealm_online-1.pdf

Steps:

- Teach UD Basics: Use slides to explain the 7 principles (See supporting reference sheet).
- Link to WHO Goals: Show how UD aligns with Age-Friendly Cities e.g., "Tolerance for Error" = fewer falls. (See WHO Goals in supporting reference sheet).
- Case Study Discussion: Ask, "How can pedestrian zones in Meath improve senior mobility?"

**Tips for
trainers**

- *Prep: Bookmark all the links and PPT slides in advance.*

**if needed add here tables, pictures or other materials to be used for the activity*

Supporting Reference Sheet

Universal Design (UD) Basics

(Adapted from the 7 principles of UD): <https://universaldesign.ie/about-universal-design/the-7-principles>

1. **Equitable Use:** Design is useful to people with diverse abilities (e.g., ramps alongside stairs).
2. **Flexibility in Use:** Accommodate preferences (e.g., seating with/without armrests).
3. **Simple & Intuitive:** Easy to understand (e.g., clear signage with icons).
4. **Perceptible Information:** Communicate effectively (e.g., tactile paving for visually impaired).
5. **Tolerance for Error:** Minimise hazards (e.g., non-slip surfaces).
6. **Low Physical Effort:** Reduce strain (e.g., ergonomic benches).
7. **Size & Space for Approach/Use:** Ensure accessibility for all body types/mobility aids.

WHO's Age-Friendly Cities Key Goals for Outdoor Spaces:

- **Safety:** Well-lit paths, even surfaces.
- **Comfort:** Adequate seating, shaded areas.
- **Social Inclusion:** Spaces for intergenerational interaction.
- **Accessibility:** Barrier-free access to parks, transport, and buildings.

(Source: WHO Age-Friendly Cities Guide)





Activity 2: Designing Intergenerational Community Gardens

Target: *for educators*

Duration

2 hours

Materials*

1. AARP Resources:
 - Creating Community Gardens for all ages:
<https://www.aarp.org/livable-communities/tool-kits-resources/info-2023/creating-community-gardens.html>
 - Worksheets: <https://www.aarp.org/content/dam/aarp/livable-communities/tool-kits-resources/2023/Creating%20Community%20Gardens-worksheet-0-Collection-012423.pdf>
 - Videos:
 - Planting a Garden in Oklahoma: <https://www.aarp.org/livable-communities/community-challenge/info-2019/2019-community-challenge-video-anadarko-ok.html>
 - Growing Food in Providence, Rhode Island: <https://www.aarp.org/livable-communities/community-challenge/info-2021/2021-community-challenge-video-providence-rhode-island.html>

Description (2000 characters):

Objective: Train educators to design inclusive, age-friendly community gardens using AARP's toolkit and video resources.

Activity Steps:

1. Introduction & Video Screening (20 mins)

- **Watch:** Show one of the AARP videos
- **Discuss:**
 - What made these gardens successful?
 - How did they address intergenerational needs?
 - What challenges did they face, and how were they resolved?

2. Garden Design Challenge (60 mins)

- **Scenario:** "Design a community garden for a neighborhood with limited green space, high senior isolation, and food insecurity."



	• Group Task: 1. Plan Using Worksheets: ▪ Use the Garden Layout Worksheet to sketch accessible features (e.g., wide paths, seating areas). ▪ Apply the Funding Worksheet to brainstorm grant opportunities (e.g., AARP Community Challenge). 2. Incorporate Universal Design (UD): ▪ Ensure pathways are wheelchair-friendly (UD Principle 1: Equitable Use). ▪ Include signage with icons and large text (UD Principle 4: Perceptible Information). 3. Present: Groups pitch their garden plan, explaining how it meets WHO's age-friendly goals (safety, accessibility, social inclusion) • Reflect: ◦ How can gardens combat social isolation among seniors? ◦ What partnerships (local councils, schools) are critical for sustainability?
Tips for trainers	• Prep: Bookmark video links and print worksheets in advance. • Guest Speaker: Invite a local garden coordinator to share real-world insights.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i> Supporting Materials: • AARP Case Studies: Share excerpts from local examples like tidy towns for inspiration. • UD Checklist: Align garden features with the 7 Principles of Universal Design: https://universaldesign.ie/about-universal-design/the-7-principles	

TRAINING RESOURCES

Città per l'invecchiamento attivo	Presents WHO guidelines and Italian reflections on making cities age-friendly through accessible environments, mobility, inclusion, and intergenerational participation.	http://www.abitareeziani.it/wp-content/uploads/2017/03/AeA_Magazine_02.pdf
SPAZI PER L'ATTIVITÀ FISICA PER TUTTE LE GENERAZIONI	Swiss guide to planning outdoor intergenerational activity spaces, focusing on participatory design, accessibility, shared use, and health promotion for all age groups	https://www.hopp-la.ch/wp-content/uploads/2022/04/Guida-spazi-per-lattivita-fisica-per-tutte-le-generazioni.pdf
GUÍA DE ACCESIBILIDAD EN LOS ESPACIOS PÚBLICOS URBANIZADOS	It serves to clarify the criteria that governed the Order's review process in general, as well as other issues considered useful for understanding its content. Among other things, it explains its nature as a basic standard, the criteria adopted in relation to the standards cited in the text, and the reference to other regulatory standards.	https://cdn.mitma.gob.es/portal-web-drupal/estudios_y_publicaciones/guia_accesibilidad.pdf
Guía de buenas prácticas de accesibilidad universal en las Entidades Locales	Accessibility is a constantly evolving concept, which has gone from being considered a simple means to improve the living conditions of people with disabilities (making their daily lives easier, even if only partially or without autonomy) to becoming a fundamental element in ensuring the full participation of all citizens in today's society.	https://fundacionacs.com/download/guia-de-buenas-practicas-de-accesibilidad-en-municipios.pdf



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Assessments Section



MODULE: OUTDOOR SPACES AND BUILDINGS

EDUCATORS

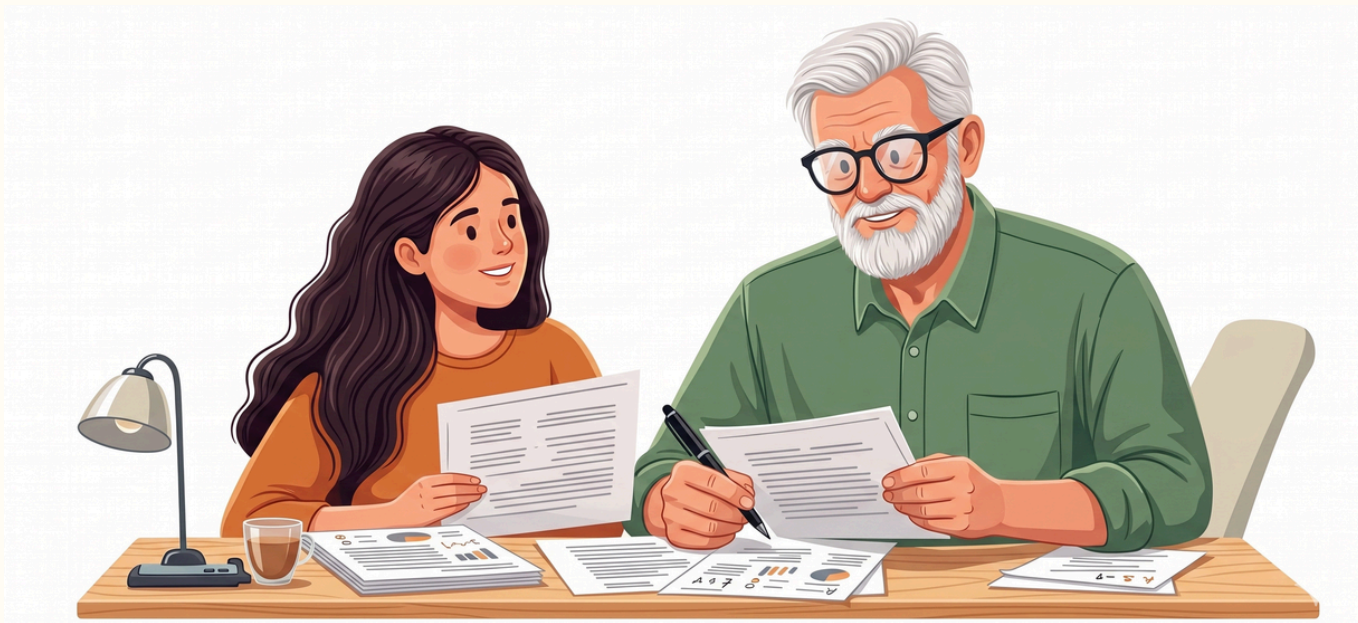
Theme: Universal Design and Urban Inclusion

1. What is the main goal of Universal Design?
 - A. Meeting legal standards for ramps
 - B. Designing for young families only
 - C. Creating environments usable by all people regardless of ability.
 - D. Minimizing construction costs

2. Which of these is a principle of Universal Design?
 - A. Single-use access points
 - B. Complex navigation paths
 - C. Perceptible information and intuitive signage
 - D. High-maintenance surfaces

3. True or False: Universal Design only benefits older adults.
– Yes / No

4. Do you feel confident applying the WHO's age-friendly outdoor space guidelines to your teaching or community work?
– Yes / No





MODULE: OUTDOOR SPACES AND BUILDINGS

STAKEHOLDERS AND LOCAL ACTORS

Theme: Accessibility Audits and Inclusive Policy

5. Which of the following is an age-friendly feature in public spaces?
- A. Cracked pavements
 - B. Unshaded benches
 - C. Step-free access with handrails
 - D. Steep staircases
6. True or False: Only long-term structural changes can improve accessibility.
– Yes / No
7. Which approach reflects the social model of disability?
- A. Blaming seniors for reduced mobility
 - B. Avoiding park renovations due to cost
 - C. Identifying environmental barriers and fixing them
 - D. Prioritizing aesthetics over function
8. Would you commit to consulting seniors when redesigning public spaces in your local area?
– Yes / No



MODULE: OUTDOOR SPACES AND BUILDINGS

SENIORS

Theme: Empowerment and Safety in Outdoor Areas

9. Which of these is a common barrier to using outdoor spaces?
- A. Clearly marked pathways
 - B. Ample shaded seating
 - C. Uneven sidewalks and poor lighting
 - D. Accessible restrooms
10. True or False: Your feedback about benches and paths is valuable for public space design.
– Yes / No
11. Do you know how to report a hazard (like a broken path) to your local council or community office?
– Yes / No
12. Which of these features would you include in your "dream bench"?
- A. Low seating without armrests
 - B. Slippery wooden surface
 - C. Back support and armrests
 - D. Narrow space between benches
13. Would you like to participate in a local walk audit or park review with your community?
– Yes / No



MODULE 6

Respect and Social Inclusion

Community &
Healthcare

Transportation

Housing

Social Participation

Outdoor Spaces &
Buildings

Respect and Social
Inclusion



European Seniors Friendly Communities Guideline

MODULE: RESPECT AND SOCIAL INCLUSION

THEORETICAL INTRODUCTION

Respect and social inclusion are pillars of age-friendly communities, ensuring seniors are valued as active contributors rather than passive recipients of care. At its core, this module addresses the systemic and cultural barriers that marginalise older adults, emphasising dignity, equity, and participation.

Respect for seniors begins with recognising their lifelong contributions and inherent right to autonomy. Ageism, prejudice or discrimination based on age permeates many societal structures, from healthcare systems that dismiss seniors' concerns to urban designs that exclude their mobility needs. Combating ageism requires reframing aging as a natural, valuable life stage and challenging stereotypes that portray seniors as burdens.

Social inclusion involves creating environments where seniors can engage fully in community life. This includes access to social spaces, opportunities for meaningful participation, and representation in decision-making. Intergenerational solidarity is critical here; bridging generational divides fosters mutual understanding and dismantles biases. Programmes that connect seniors with younger generations, such as mentorship initiatives, not only combat loneliness but also preserve cultural knowledge and strengthen community bonds. This participatory approach aligns with the World Health Organisation's (WHO) age-friendly cities framework, which highlights inclusion as a cornerstone of sustainable communities.





STATUS QUO

Key Challenges

1. Social Isolation & Loneliness:

- **Ireland:** Seniors report limited awareness of local activities. Successful programs like ALONE's digital courses exist, but many remain unaware due to poor outreach. Insurance and liability concerns stifle grassroots volunteering efforts (e.g., informal transport support).
- **Italy:** While parishes, senior gyms, and the University of the Third Age provide social hubs, rural seniors face isolation due to inadequate transport. Resistance to new routines and activities further limits engagement.
- **Spain:** Many seniors feel excluded from municipal planning. Intergenerational programs are rare, and cultural activities (e.g., bullfighting) often fail to resonate with diverse senior populations.

2. Digital Exclusion:

- Over-reliance on digital communication (e.g., Spain's online ticketing, Ireland's medical appointment systems) alienates seniors unfamiliar with technology. Many depend on family for basic tasks like banking, eroding their independence.

3. Post-COVID Hesitation:

- Pandemic-related fears persist, with some seniors avoiding crowded spaces like community centers. Hybrid (online/in-person) engagement models are underdeveloped.

4. Ageism in Service Provision:

- Seniors in Ireland report being dismissed in medical settings (e.g., labeled "bed blockers"). In Spain, ageist remarks like "At your age, what for?" undermine their agency.

Successful Initiatives:

Ireland:

- **Dementia Café in Kells:** A structured social hub for seniors with dementia and caregivers, offering peer support and activities.
- **Foróige's Big Brother/Sister Program:** Fosters intergenerational bonds through mentorship between seniors and youth.
- **ALONE's Digital Skills Courses:** Equips seniors with technology literacy to access services and stay connected.

Italy

- **University of the Third Age:** Promotes lifelong learning and socialisation through courses and workshops.
- **Social Taxis:** Subsidised transport programs help seniors access healthcare and social events.
- **Parish-Based Activities:** Local churches serve as hubs for senior-led social and cultural events.



STATUS QUO

Spain:

- *Advocacy for Inclusive Cultural Events: Grassroots efforts to expand senior-focused activities beyond traditional norms (e.g., art workshops, tech classes).*
- *Intergenerational Housing Pilots: Shared living models pairing seniors with caregivers or students to reduce isolation.*
- *Community Health Workshops: Local clinics provide in-person guidance for seniors struggling with digital healthcare systems.*



LEARNING OUTCOMES

Description of the main learning objectives and results to be achieved in terms of knowledge, skills and attitudes by:

Educators

- *Educators will learn to design flexible, inclusive learning formats*
- *Educators will identify and address ageist assumptions in teaching practices*

Stakeholders and local actors

- *Stakeholders will learn to implement policies to reduce seniors' barriers*
- *Stakeholders will create opportunities for seniors to contribute expertise*

Seniors

- *Seniors will confidently share their skills, stories, and experiences in intergenerational settings.*
- *Seniors will adapt to new social and technological norms*





EDUCATIONAL TOOLS

Activity 1: Bridging Generations: Storytelling and Skill-Sharing Workshop

Target: *for seniors*

Duration

2.5 hour (flexible for multiple sessions).

Materials*

- Large paper/post-it notes, markers, and printed discussion guides.
- Optional: Tablets or smartphones for digital storytelling.
- A "generational swap" activity kit (e.g., historical photos, tech gadgets, craft supplies).

Description
(2000
characters):

Description:

This interactive workshop fosters intergenerational dialogue and mutual learning. Participants are divided into mixed-age groups and rotate through three stations:

1. **Storytelling Station:** Seniors share personal stories about historical events, cultural traditions, or life challenges, while youth document these narratives through writing, art, or short videos.
2. **Skill Swap Station:** Seniors teach hands-on skills (e.g., knitting, gardening, traditional cooking), while youth demonstrate digital tools (e.g., using apps, social media safety).
3. **Design Station:** Groups collaborate to brainstorm solutions to a local challenge (e.g., improving public transport accessibility or creating a senior-youth community event).

Outcome:

- Groups present their stories, skills, and ideas. The workshop culminates in a "Respect Pact"—a collective agreement on actionable steps to combat ageism (e.g., organising monthly intergenerational meetups if possible).

**Tips for
trainers**

- *Use prompts from the focus groups (e.g., How can we make technology more senior-friendly?).*
- *Encourage youth to interview seniors about their experiences with ageism.*
- *Adapt stations to reflect local culture (e.g., traditional recipes in Italy, historical landmarks in Ireland).*

**if needed add here tables, pictures or other materials to be used for the activity*



Activity 2: Navigating New Norms

Target: *for seniors*

Duration

2 hrs

Materials*

- Large timeline posters (e.g., "Social Norms in the 1960s vs. Today").
- Discussion cards with prompts.
- Sticky notes and pens.

Description
(2000
characters):

Objective: *Help seniors understand evolving social norms (e.g., technology, communication styles) and build confidence to adapt while retaining their identity.*

Structure

1. **Icebreaker: "Then and Now"**

- Seniors share one social norm from their youth that has changed (See: **Content of Discussion Cards** and pick may be two to three statements).

2. **Group Discussion: 'What's Changed?'**

- Use timeline posters to explore shifts in technology, family roles, and community interactions.
- Discuss:
 - What changes do you find exciting? Challenging?
 - How can we honour traditions while embracing new norms?

3. **Skill-Building Stations:**

- **Station 1: Digital Communication**
 - Practice sending voice messages or emojis on a tablet.
- **Station 2: Assertiveness Training**
 - Role-play politely advocating for needs (e.g., 'Could you slow down? I need more time').
- **Station 3: Community Connections**
 - Brainstorm ways to stay engaged (e.g., joining hobby clubs, mentoring youth).
- a. **Create a 'My Adaptation Plan':**
 - Seniors write down one norm they want to explore (e.g., online shopping) and steps to try it.

Outcome: *Seniors leave with practical strategies to navigate change and a peer-supported plan to stay socially connected.*

**Tips for
trainers**

Trainers must search for practical solutions like joining local clubs and have up to date information about the opportunities in the local area.



**if needed add here tables, pictures or other materials to be used for the activity*

Content of Discussion Cards (8 Examples):

1. How has communication changed between your generation and younger generations?
2. What traditions or values from your youth do you think should be preserved?
3. How can seniors stay connected in a world that relies so much on technology?
4. What new social norms (e.g., gender roles, work-life balance) do you find surprising or challenging?
5. How can we respectfully ask for help when faced with changes we don't understand?
6. What's one thing younger people could learn from seniors about community and relationships?
7. How can seniors advocate for their needs in spaces that feel unwelcoming (e.g., digital-only services)?
8. What role should seniors play in shaping future social norms?





Activity 1: Breaking Barriers: Empathy & Action Workshop

Target: *for stakeholders and local actors*

Duration

2.5 hours

Materials*

- Ageism scenario cards (based on focus group findings).
- Large poster paper, markers, and sticky notes.
- Reflection journals or worksheets.

Description (2000 characters):

This workshop combines role-play, reflection, and collaborative problem-solving to address social exclusion and ageism. It is divided into three phases:

1. Phase 1: Walk in Their Shoes (Role-Play)

- Participants split into small groups and draw scenario cards reflecting real challenges from the focus groups (see the Scenario Cards Statements in supplementary materials).
- Groups act out the scenarios, with participants rotating roles (senior, service provider, bystander).

2. Phase 2: Reflection & Discussion

- After each role-play, groups discuss:
 - How did it feel to be excluded or dismissed?
 - What systemic barriers caused this situation?
- Quotes from the focus groups can be used (e.g., At your age, what for?) to deepen the conversation.

After role-play, discuss:

- *How did the senior likely feel?*
- *What systemic biases are at play?*
- *What policies or actions could prevent this?*

3. Phase 3: Co-Creating Inclusive Solutions

- *Groups brainstorm actionable steps to address the barriers they identified. Examples:*
 - *Designing a **Respect Checklist** for healthcare providers.*
 - *Creating a **Digital Buddy System** pairing youth with seniors.*
 - *Planning a **Community Welcome Day** to reduce resistance to new activities.*



	Groups can present their solutions and vote on the most feasible ideas to implement locally. Outcome: A shared Respect & Inclusion Action Plan with prioritised solutions (e.g., training programs for service providers, intergenerational tech workshops).
Tips for trainers	- Invite seniors to co-facilitate discussions, ensuring their voices lead the conversation. - Use props to make role-play immersive (e.g., a mock digital-only ticket machine for Spain's scenario). - Share examples of successful initiatives (e.g., Ireland's Dementia Café) to inspire solutions.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i> Scenario Cards Statements: 1.A senior is hesitant to join a community event because they feel too old and worry others will judge them. 2.A healthcare provider dismisses a senior's chronic pain, saying, It's just part of aging. 3.A senior struggles to use a digital appointment-booking system and is told, "Everyone uses this now". 4.A senior feels excluded from family gatherings because younger relatives only discuss social media or technology. 5.A senior is denied a volunteer role at a local school because staff assume they won't relate to kids. 6.A senior avoids public transport because bus drivers rush them when they take extra time to board. 7.A senior is excluded from decision-making about a community garden project, despite being an avid gardener. 8.A senior is mocked for wearing outdated clothing at a social event, making them reluctant to attend future gatherings.	



Activity 2: Organisational Audit

Target: *for stakeholders and local actors*

Duration

2 hours

Materials*

1. **Audit Checklist Template** (digital and print versions).
2. **SWOT Analysis Worksheet** with guided prompts.
3. **Design Canvas** for solution prototyping.

Description (2000 characters):

1. Presentation (15 mins)

Overview of WHO's "Respect & Social Inclusion" criteria and their relevance to workplace culture, productivity, and community trust.

2. Deep-Dive Audit Phase (1 hours)

Step 1: Self-Assessment with Checklist

- Distribute the Respect & Inclusion Audit Checklist (see below in supplementary materials).

Note: age inclusion handbook can also be consulted:
https://www.helpage.org/wp-content/uploads/2024/09/Age-Inclusion-Handbook-Section3_HelpAge-International.pdf

- Participants score their workplace (Yes/No) and note examples.

Step 2: Group Discussion & SWOT Analysis

- Divide participants into small groups. Each group selects 1–2 criteria to analyse using a SWOT worksheet (Strengths, Weaknesses, Opportunities, Threats).

3. Collaborative Solution Design (0.5 hours)

- Groups prioritise 1–2 gaps and brainstorm solutions using the WHO Principles Canvas:
 - Involvement: How will older adults co-design the solution?
 - Affordability: What resources are needed?
 - Impact: How does this align with organisational goals?

Tips for trainers

- *Encourage groups to mix professionals from different sectors for diverse perspectives.*
- *Use a timer to keep discussions focused.*



WHO Criterion	Audit Questions
Consultation	<i>Are older employees/clients consulted during policy or service design?</i>
Yes/No	Example:
Tailored Services	<i>Do services accommodate older adults' needs (e.g., flexible hours, large-print)?</i>
Yes/No	Example:
Courtesy & Helpfulness	<i>Are staff trained to interact respectfully with older clients/colleagues?</i>
Yes/No	Example:
Positive Media Representation	<i>Are older people depicted in communications without stereotypes?</i>
Yes/No	Example:
Intergenerational Activities	<i>Do workplace events include all ages (e.g., family-friendly timing/activities)?</i>
Yes/No	Example:
Equitable Access	<i>Are there programs to support low-income older clients/employees?</i>
Yes/No	Example:



Activity 1: Story Circles: Learning from Real-Life Inclusion Challenges

Target: *for educators*

Duration

1.5 hours

Materials*

1. *Whiteboard/flip chart, markers.*
2. *WHO Respect & Social Inclusion Checklist (see in supplementary section).*
3. *Reflection prompts handout (see in supplementary section).*

Description (2000 characters):

This activity encourages educators to reflect on their own experiences working with senior learners, identify barriers, and brainstorm solutions using WHO principles.

1. Introduction (15 mins):

- Share the WHO criteria for respect and inclusion (e.g., consultation, accessibility, recognition of contributions).
- Explain the goal: 'Use your real-world experiences to create actionable strategies for including seniors.'

2. Story Sharing & Analysis (45 mins):

- Step 1: In small groups, encourage educators to share examples of:
 - A time they successfully engaged a senior learner.
 - A challenge they faced in making seniors feel included.

Note: educators can use the reflection prompts in small-group discussions (see in supplementary materials)

- Step 2: Groups map these stories to the WHO checklist:
 - Example: A story about a senior struggling with digital tools
→ Linked to "Tailored Services" (flexible learning formats).
- Step 3: Identify recurring themes (e.g., ageism, tech barriers).

3. Solution Brainstorm (30 mins):

- Groups pick 1–2 challenges and design solutions using WHO criteria.
- Example: For "seniors feeling undervalued," propose a "Skills Showcase" where learners present past work experience.

Tips for trainers	• Use guiding questions (e.g., "What barriers did seniors face in your story?").
<i>*if needed add here tables, pictures or other materials to be used for the activity</i> WHO Checklist Poster Respect and social inclusion (Extracted from WHO's Checklist) ☐ Older people are regularly consulted by public, voluntary and commercial services on how to serve them better. ☐ Services and products to suit varying needs and preferences are provided by public and commercial services. ☐ Service staff are courteous and helpful. ☐ Older people are visible in the media, and are depicted positively and without stereotyping. ☐ Community-wide settings, activities and events attract all generations by accommodating age-specific needs and preferences. ☐ Older people are specifically included in community activities for "families". ☐ Schools provide opportunities to learn about ageing and older people, and involve older people in school activities. ☐ Older people who are less well-off have good access to public, voluntary and private service https://iris.who.int/server/api/core/bitstreams/98e0f250-5203-48e7-9710-76adedc1f98b/content Reflection Prompts for Educators: Aligned with the challenges of accessibility, programme effectiveness and workplace integration for older adults, these prompts encourage critical thinking and action-oriented solutions.	

1. Accessibility Barriers

- **Financial and Systemic Hurdles**

- How does our programme's cost structure exclude older adults with limited income? What low-cost or subsidised alternatives could we offer?
- What non-financial barriers, such as transport or digital access, might older learners face, and how can we mitigate them?

- **Equity vs Equality**

- Are we assuming a one-size-fits-all approach to accessibility? How might tailored support, such as scholarships or device loans, improve inclusion?

2. Programme Design and Effectiveness

- **Flexibility and Relevance**

- Does our programme offer flexible learning formats, such as self-paced modules or evening classes? If not, how can we adapt to older adults' lifestyles?
- Are our curricula designed with input from older learners? How can we better involve them in co-creating content?

- **Recognition of Prior Experience**

- Do we acknowledge older adults' existing skills in assessments or certifications? If not, how might this devalue their contributions?
- How could a skills portfolio or prior learning recognition system empower older learners?

3. Workplace Integration and Career Growth

- **On-the-Job Skill Development**

- Does our programme partner with employers to ensure older workers can apply new skills in their roles? If not, what partnerships could we build?
- How might age bias in workplaces undermine the impact of our training? What advocacy or mentorship could we provide?

- **Tangible Outcomes**

- Are our programmes linked to clear pathways for career advancement, such as promotions or new roles? If not, how can we bridge this gap?
- Do we track outcomes like job placements or wage increases for older graduates? How can data improve accountability?

4. Systemic and Cultural Shifts

- **Challenging Ageist Assumptions**

- Where might unconscious bias, such as assuming older workers cannot learn technology, influence our programme design? How can we address this?
- How can we highlight success stories of older learners to shift perceptions of ageing in the workforce?

Policy Advocacy

- What systemic changes, such as government subsidies or employer incentives, are needed to make programmes truly age-inclusive?

5. Personal and Organisational Accountability

- **Reflecting on Impact**

- What is one change our organisation could make immediately to better serve older adults? What is stopping us?
- How do our own assumptions about ageing influence programme decisions? What biases need unlearning?

- **WHO Principles in Action**

- How does our programme align with WHO's criteria for respect, social inclusion and equitable access? Where are we falling short?

Group Discussion Starters

- Share an example where a programme failed to meet older adults' needs. What could have been done differently?
- How can we balance scalability with personalisation to serve older learners effectively?





Activity 2: Intergenerational Partnerships: Co-Designing with Seniors

Target: *for educators*

Duration

1.5 hours

Materials*

1. *Sticky notes, poster paper, markers.*
2. *WHO checklist (focus on consultation, social inclusion, recognition of contributions).*

Description (2000 characters):

This activity focuses on actively involving seniors in vocational education through partnerships, intergenerational learning, and co-design. Educators will develop actionable strategies to integrate seniors' expertise and preferences into courses.

Workshop Structure

1. Case Study Warm-Up (20 mins)

- Example: A college partnered with retired engineers to co-teach a renewable energy course, blending theory with real-world experience.
- Discussion:
 - How does this align with WHO's "recognition of contributions" and "intergenerational equity"?
 - What benefits might this bring to young learners and seniors?

2. Designing Intergenerational Strategies (1 hour)

Step 1: Survey Design (20 mins)

- Groups draft a short survey to gather seniors' preferences (e.g., preferred roles, skills to share, accessibility needs).
 - Example Questions:
 - What skills or experiences would you like to share with learners?
 - What barriers might prevent you from participating (e.g., timing, transport)?
 - WHO Alignment: Consultation, tailored services.



	Step 2: Partnership Planning (25 mins) - Groups design an intergenerational partnership model (see the link in supplementary material): Model 1: 'Skills Swap' – Seniors teach traditional techniques (e.g., carpentry), while young adults share digital skills. Model 2: 'Guest Expert' – Seniors contribute to course modules (e.g., hospitality students learn from retired chefs). WHO Alignment: Social inclusion, flexible learning. Step 3: Feedback with Rose-Thorn-Bud (15 mins) - Groups present models. Peers provide feedback:  Rose: Strength of the idea.  Thorn: Potential challenge.  Bud: Opportunity for improvement.
	Use Local Data: Highlight demographics (e.g., "40% of our community is over 60 – how can we tap into their expertise?"). Highlight Quick Wins: Suggest starting with a single workshop or guest lecture to test ideas.
<i>*if needed add here tables, pictures or other materials to be used for the activity</i> Intergenerational Program Planning Toolkit Source: Generations United https://www.gu.org/app/uploads/2018/05/Intergenerational-Report-IntergenerationalCenter-ConnectingGenerations.pdf	



TRAINING RESOURCES

Ciudad y territorio justo - Accesibilidad universal	"Universal accessibility is a fundamental pillar of a more just and cohesive society. Through it, our territory, towns, and cities, can build a new layer, an integrative skin for all people, one that goes beyond the physical environment.	https://observatorio2030.com/sites/default/files/2025-01/Documenta%201.2%20-%20Ciudad%20y%20Territorio%20justo%20-%20Accesibilidad%20universal%20%28Informe%20GT1.2%29%20%5BAccesible%5D_1.pdf
Itinerarios: Actividades para la seguridad vial de Mayores	The General Directorate of Traffic develops actions to protect the most vulnerable road users, those who, due to various circumstances, their physical characteristics, or the means of transportation used, are more likely to be involved in or be victims of a traffic accident, including the elderly.	https://drive.google.com/file/d/13bMaqAF_fifCXYZbMYOXQspShNLjfRA4/view
Abitudini di mobilità degli over 65. Il ruolo del TPL	Study from the HAPPY project on how older adults use public transport (TPL) in Varese, Milan, and Padua. Analyzes habits, barriers, and post-COVID scenarios to enhance age-friendly mobility.	https://www.uninsubria.it/sites/default/files/Documenti_Ricerca/Progetto%20HAPPY%2026-10-2021_%20Crotti%20Akhavan%20Bonvento%281%29.pdf

**TRAINING RESOURCES**

Il trasporto sociale in Toscana	Presents a survey of social transport in Tuscany, highlighting volunteer-driven local practices ensuring mobility for seniors and vulnerable people lacking autonomy or family support	https://www.cesvot.it/storage/7025/Il%20trasporto%20sociale%20in%20Toscana%20-%20Report%20completo.pdf
Building Better Lives – Cycling Without Age	We invite you to start up a chapter of Cycling Without Age, a worldwide movement that aims to provide joy and vitality to all through the magic of bicycle rides. Through the simple act of sharing a bike ride, it weaves a sense of community and gathers unique and invaluable stories, unlocked only by the wind and wheels.	https://cyclingwithoutage.org/
"GOAL: Growing Older, staying mobile: The transport needs of an ageing society"	The GOAL project aimed at comprising current knowledge and identifying research gaps in order to develop an action plan to fulfill the transport needs of an ageing society. This action plan is being developed through the interaction with different stakeholders, state-of-the-art reviews, identification of possible and relevant societal developments and alternatives to transport. To achieve these objectives, GOAL has organised different workshops where the main findings from state-of-the-art reviews were presented to key stakeholders and interactive sessions were played to get their feedback.	https://cordis.europa.eu/project/id/284924



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Assessments Section





MODULE: RESPECT AND SOCIAL INCLUSION

Educators

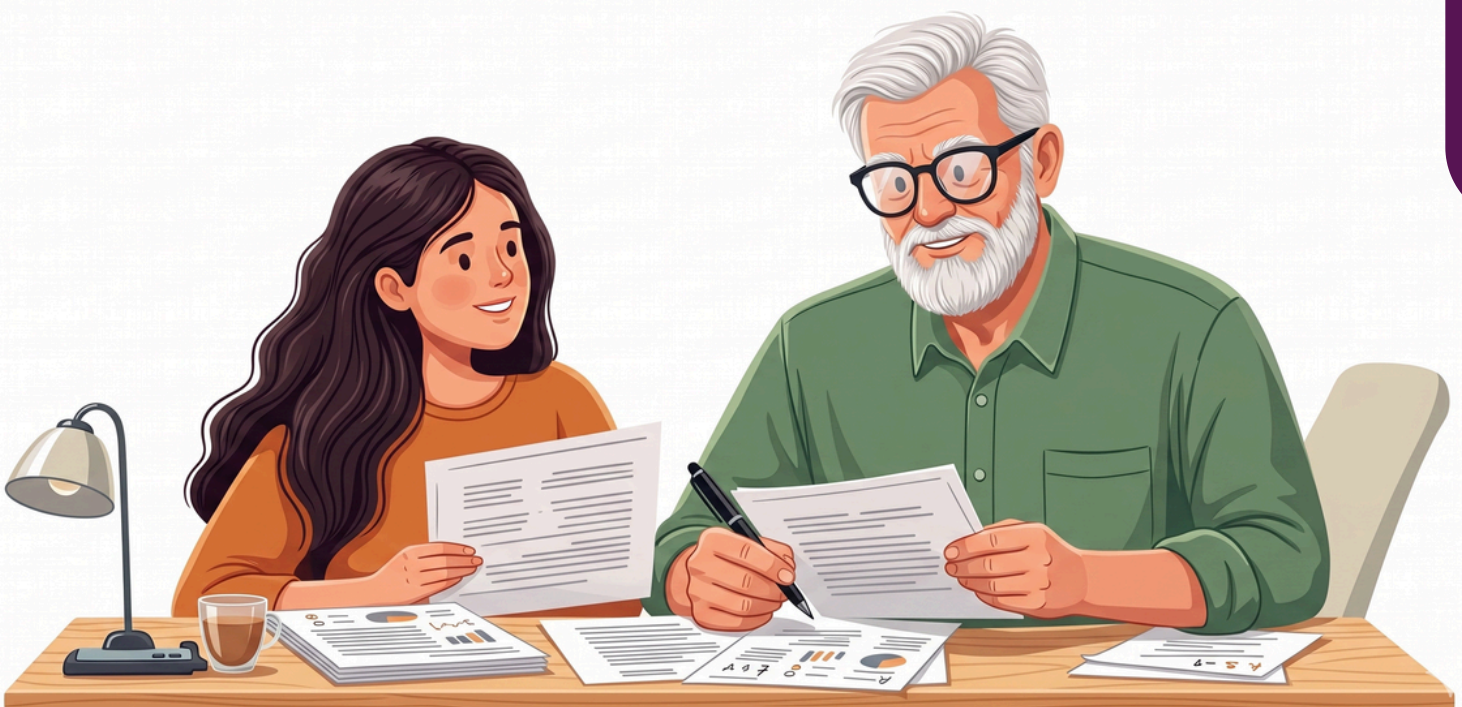
Theme: Ageism, Learning Formats, and Co-Design

1. Which of the following statements is an example of ageism in education?
 - A. Involving seniors in content creation
 - B. Designing self-paced learning options
 - C. Assuming older adults can't adapt to new technologies
 - D. Asking seniors about their learning preferences

2. True or False: Seniors should always adapt to new learning systems without support.
Yes
No

3. Which WHO principle supports co-designing courses with older learners?
 - A. Consultation
 - B. Profitability
 - C. Standardisation
 - D. Age hierarchy

4. Do you feel confident recognising and addressing ageist assumptions in your teaching practice?
– Yes / No





MODULE: RESPECT AND SOCIAL INCLUSION

STAKEHOLDERS AND LOCAL ACTORS

Theme: Barriers and Policy Change

5. Which of the following statements reflects digital exclusion?
- A. Seniors being invited to help design apps
 - B. Seniors struggling to use online-only services
 - C. Community centers offering print-based schedules
 - D. Providing audio-based public transport alerts
6. True or False: All seniors have access to internet and smartphones.
- Yes
- No
7. Which of these is a good inclusive policy measure?
- A. Digital-only forms
 - B. Intergenerational storytelling workshops
 - C. Automated menus with no human support
 - D. Community events only during working hours
8. Would you be willing to co-create a Respect & Inclusion Action Plan in your organization?
- Yes / No



MODULE: RESPECT AND SOCIAL INCLUSION

SENIORS

Theme: Empowerment and Belonging

9. Do you feel that society often underestimates the contributions of older people?
– Yes / No
10. Which of these actions can help promote intergenerational solidarity?
A. Creating “seniors-only” spaces
B. Pairing youth and seniors for shared learning
C. Replacing senior mentors with digital avatars
D. Avoiding mixed-age programming
11. True or False: Seniors should avoid expressing their opinions in public discussions.
– Yes / No
12. After participating in a workshop, do you feel more confident sharing your life stories or skills with others?
– Yes / No
13. Would you consider taking part in a digital literacy or intergenerational storytelling project?
– Yes / No



FEEDBACK QUESTIONNAIRES





QUESTIONNAIRE FOR LOCAL STAKEHOLDERS

Module name: _____

1. Module Effectiveness

- How well did the activities (e.g., access audits, role-plays) address local challenges for seniors?
 - ☐ Very well
 - ☐ Moderately
 - ☐ Poorly
- Were the tools (e.g., checklists, case studies) practical for planning improvements?
 - ☐ Yes
 - ☐ Somewhat
 - ☐ No
- How well did the (Module Name) activities align with current local priorities or policies?

2. Collaboration with Seniors

- Did the sessions help you better understand seniors' needs?
 - ☐ Significantly
 - ☐ Somewhat
 - ☐ Not at all
- How likely are you to involve seniors in future planning projects?
 - ☐ Very likely
 - ☐ Possibly
 - ☐ Unlikely

3. Implementation Barriers

- What obstacles might prevent applying these ideas locally? (e.g., funding, policies)
 - ☐ Funding
 - ☐ Staff training
 - ☐ Community resistance
 - ☐ Other (Please explain):

4. Recommendations

- What additional resources or support would help you act on these modules?



QUESTIONNAIRE FOR EDUCATORS

Module name:

1. Training Materials

- Were the resources (e.g.,) clear and easy to adapt?
 - ☐ Very clear
 - ☐ Moderately clear
 - ☐ Unclear
- Did the activities (e.g., workshops, role-plays) effectively teach key principles like Universal Design?
 - ☐ Yes
 - ☐ Partially
 - ☐ No
- What strategies from the sessions do you think will be most impactful for fostering long-term behaviour change in your learners?

2. Participant Engagement

- How engaged you felt you were during the sessions?
 - ☐ Highly engaged
 - ☐ Moderately engaged
 - ☐ Disengaged
- Were the session durations appropriate?
 - ☐ Too long
 - ☐ Just right
 - ☐ Too short

3. Improvement Suggestions

- What additional training tools would enhance your teaching? (e.g., videos, templates)

4. Training Delivery

- How effective were the [Activities] (e.g., workshops, role-plays) in teaching the core principles of [Module Topic]?

Additional Comments:



FEEDBACK QUESTIONNAIRE FOR SENIORS

Module name:

1. Content Relevance

- Did the (name activities) help you understand how to improve (topic) for seniors?
 - ☐ Yes
 - ☐ Somewhat
 - ☐ No
- Were the topics (name topics/module) relevant to your daily life?
 - ☐ Very relevant
 - ☐ Somewhat relevant
 - ☐ Not relevant

2. Participation Experience

- Did you feel comfortable sharing your opinions during the activities?
 - ☐ Always
 - ☐ Sometimes
 - ☐ Rarely
 - Were the materials (e.g., maps, checklists) easy to use and understand?
 - ☐ Yes
 - ☐ Somewhat
 - ☐ No
 - In your own words, how did the (Activities) in the (Module Name) module help you feel more included or empowered in your community?
-
-

3. Practical Impact

- Will you use what you learned to engage with local councils or community groups?
 - ☐ Definitely
 - ☐ Maybe
 - ☐ Unlikely
 - What skills or ideas from the [Module Name] sessions do you plan to use in your daily life?
-
-

4. Suggestions for Improvement

- What topics or activities would you like to see added?
-
-



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