

Nordic Gerontological Federation

GeroNord

News on research, developmental work and education within the ageing area in the Nordic Countries

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Words from the President: Research policy and coherent visions for the ageing society - invitation

Dear friends & colleagues,

A society needs research. The Nordic countries have strong research traditions and are among the countries in the world that spend the most money on research and development activities, namely around 3% of GDP. It may therefore be relevant to look at which visions for research are presented in the Nordic countries' research policies when it comes to research on ageing. We invite the Nordic countries to contribute their own experiences in the upcoming newsletters, starting with Denmark in this newsletter.

In Denmark, the Strategic Research Council together with the Minister for Science, Technology and Development in 2004 set up an interdisciplinary steering group for the strategic foresight of the ageing society. The backdrop was the expected growth in the number of Danes over the age of 60-65 and other factors that together pulled "in the direction of the development of an ageing society, which creates challenges and opportunities at the same time". In the report 'The ageing society 2030' from 2006, the steering group described a coherent vision for the ageing society. The vision is an ageintegrated society, and under the unifying heading they identify and document research themes within three areas: - Healthy ageing – with good functional capacity and better utilization of technological possibilities. - Age-integrated labor market - with better opportunities for late careers, lifelong learning, and flexible staying in work - The cohesive force in society – across generations, gender, and ethnicity. The steering group consisted of researchers with a background in various scientific disciplines, and rich and research-based documentation was provided. A basic premise was, that ageing is created throughout the life course.

In recent years, several research policies and strategies have been formulated that address the opportunities and challenges of the ageing society in different ways (especially the latter). In 2018, the National Board of Health published a National research strategy for dementia 2025. The background was, among other things, the expectation that the number of people with dementia will increase as the population ages. Today, it is estimated that almost 90,000 Danes live with dementia in Denmark. Moreover, in 2022 the Danish Health

Authority published a National Strategy for Research to strengthen efforts in the primary healthcare system. It was problematized that the increasing number of elderly people led to an increasing burden of disease, which had to be met with strengthened health promotion, prevention, and rehabilitation. More recently the Danish government is in the process of an 'elderly act' which links ageing to illness and loss of functional ability. Thus, it seems that current research policies and strategies about the ageing society predominantly associate ageing with decline and costs while a coherent vision for the ageing society is lacking. The Danish Gerontological Society has suggested that an evaluation of the vision from 2006 should be completed and a new coherent vision be drawn up.

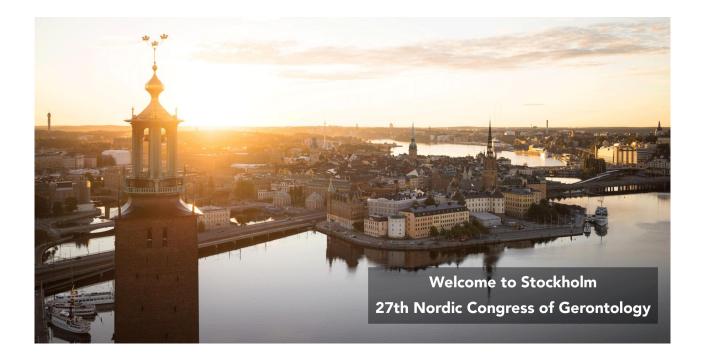
Which visions have been formulated in the other Nordic countries? Please write to the NGF secretary if you have anything to share: contact@ngf-geronord.se

The steering group for the strategic vision of the ageing society 2030 consisted of: Jørn Henrik Petersen (chairman), Kirsten Avlund, Karen Munk, Birgit Jæger, Henning Kirk, Bernard Jeune, Villy J. Rasmussen, and Brian Clark.

Warm Regards



Jette ThuesenPresident of the Nordic Gerontological Federation



The 27th Nordic Congress of Gerontology in Stockholm, Sweden, June 12-14, 2024

On behalf of the Swedish Gerontological Society, the Swedish Geriatric Association, the Nordic Gerontological Federation (NGF), and Karolinska Institutet we invite you to join the 27th Nordic Congress of Gerontology (NKG) to share your knowledge and engagement with ageing in a transforming world.

The world is constantly changing, but recent crises including climate change, pandemics and wars suggest rapid and profound transformations in living conditions. During such challenging periods, certain groups in the population including older adults and frail individuals may be particularly susceptible to negative consequences.

At the 27th NKG congress, we want to explore how researchers from different scientific disciplines and practitioners can come together to bring new insights that facilitate better living conditions and well-being for older adults and contribute to the sustainable development of current and future generations.

We believe that the Nordic countries can take a more active role in promoting healthy ageing globally. This includes being forerunners in research and practice on increasingly important issues with implications for older adults, such as equity, global health, living conditions, migration, welfare technology, and the organisation of health and social care. We invite scholars, professionals, policymakers, NGOs, and other stakeholders to discuss and explore questions related to ageing in a world of profound transformations. Plenary lectures, symposia, oral sessions, posters, and exhibitions will reflect themes from different scientific disciplines and practice, on topics relevant to gerontology and geriatrics.

We welcome multidisciplinary contributions reflecting the pillars of the NGF's scientific orientations: behavioural and social sciences; biological, health and medical sciences; humanities; social research, policy, and practice. There will also be an enjoyable social programme.

The congress will be located at Karolinska Institutet (KI), one of the world's leading medical universities. KI Solna campus is just 10 minutes from Stockholm city. We hope that you will find time to enjoy what Stockholm has to offer, including its sights and attractions, shopping areas, night life and beautiful surroundings. For those with more time, the wonderful country of Sweden rewards exploration.

We look forward to welcoming you to Stockholm in 2024!

Go here to learn more about the 27NKG

Interested in becoming a sponsor? Go here to read the Sponsor invitation

Important dates

- 2 October 2023 Registration and call for abstracts open
- **15 November 2023** Deadline for abstracts for symposia
- **15 December 2023** Deadline for applications for the Prize for the promising researcher in gerontology (The NGF Prize)
- 15 January 2024 Notification for accepted symposia
- **25 January 2024** Deadline for abstracts for the oral presentations and posters
- 15 February 2024 Deadline for applications for travel grants
 26 February 2024 Notification about acceptance of abstracts
- 29 February 2024 End of Early Bird registration.

Feature article: Gerontology in the Nordic countries



Norway

In this fourth feature in the series of brief insights into gerontology in the Nordic countries, we will take a look at Norway.

In Norway, the members of the Nordic Gerontological Federation are the *Norsk Selskab for Aldringsforskning (NSA)* and the *Norsk Geriatrisk Forening (NGF)*.

The Chair of the NSA, Vegard Skirbekk, and the Chair of the NGF, Paal Nålsund, have provided the information for this feature.

Norsk Selskab for Aldringsforskning was established in 1954 under the name Norsk Gerontologisk Selskap with the purpose of connecting people working in eldercare. Later, in 1962 the organisation changed its name to the current Norsk Selskap for Aldersforskning (NSA). At the same time the publication, NSAs skriftserie, began to be published. Today, the purpose of the NSA is to work for the advancement of gerontology as both a scientific and practical field of work in Norway.

Norsk Geriatrisk Forening was established in late 1973 on a meeting at the Ullevål Hospital. The articles of association were adopted in January 1974 and later the same year it gained status as a special organization (spesialforening) in norsk lægeforening. In May 1975 geriatrics was approved as a specialty of internal medicine. The purpose of Norsk Geriatrisk Forening is to support the development of the profession of geriatrics in both clinical medicine as well as through research and teaching.

Overview

Norway, like many other countries, is experiencing an ageing population. The number of older adults over 60 years old in Norway exceeded one million in 2020. This trend is primarily due to factors such as increased life expectancy and lower birth rates. As a result, the proportion of older people in the overall population is steadily increasing.

One notable aspect of Norway's ageing population is the growth among the oldest old, which refers to individuals aged 90 years and above. Over the past 50 years, the number of people in this age group has doubled in Norway. This increase is indicative of improved healthcare and living conditions, which have contributed to longer life spans.

The demographic shift towards an older population has implications for various aspects of society, including healthcare, social welfare, and the labour market. Governments and policymakers need to address the unique needs and challenges faced by older adults, such as healthcare services, pension systems, and social support networks, in order to ensure their well-being and quality of life.

Current gerontological themes

In Norway, both organizations are actively involved in current themes and debates in the arena of ageing and eldercare. The NSA is for example active in the public debate following a Norwegian 'policy of institutionalization' (*institusjonalisering*) that carries forward a concept by which people should take responsibility for their own ageing by staying as long as possible in their own home. This is coupled with an optimism for the possibilities that come with technological advancements by which eg. assessment tools and communication devices assist in making it possible to postpone a move into a nursing home. In this context, the NSA aims to be part of framing and moderating the discussions, to be available for journalists and provide knowledge for politicians to inform policy decisions.

The NGF reports about a high degree of involvement during the corona pandemic in collaboration with other organisations and disciplines. This particularly evolved around

questions of the levels of treatment for elderly fragile people, submission to hospital of nursing home residents and vaccinations. Several scientific articles were submitted about this question, among them a review of a large material concerning deaths in nursing homes after the onset of the vaccinations.

Furthermore, the NGF is working for the establishment of more geriatric positions and members of the NGF are to an increasing level collaborating with other disciplines. One example is the growing field of ortogeriatrics lead on by Siri Rostoft, Adjunct Professor at the Department of Geriatric Medicine, University of Oslo. Other examples are collaborations in the fields of invasive cardiology, delirium as well as geriatric palliative care.

The NGF has also been the main initiator of a resolution addressing overtreatment and – diagnosis. Currently, the organisation together with other actors in the field is involved in an effort of establishing more equality in the treatment of stroke across Norway.

Examples of activities in the member societies

One of the main activities of the NSA is to disseminate research on ageing to the public, often in collaboration with other organisations. A key element in this is an updated webpage offering knowledge and news in the field, as well as seminars open to both members and the general public. Examples of this include a seminar with professor Naohiro Ogawa from Japan who gives an online "lunch meeting" lecture about the experience of ageing in Japan in relation to the practices in the Nordic countries. Other topics include digitalization, housing and fall prevention.

In the NGF some of the key activities include a yearly meeting in the autumn that gathers an increasing number of people for lectures in the geriatric field. The NGF furthermore hosts a yearly congress of Geriatrics over 2 days.

For more information about the *Norsk Selskap for Aldersforskning* visit: https://aldersforsk.no/

For more information about the *Norsk Geriatrisk Forening* visit: https://www.legeforeningen.no/foreningsledd/fagmed/norsk-forening-for-geriatri/

Upcoming events in the Nordic countries

11th Fragility Fracture Network Global Congress 2023



3-6 October 2023 • Oslo, Norway

Enlightening fragility fracture care

On behalf of the local organizing committee, you are invited to the FFN Global Congress in Oslo October 3^{rd} – 6^{th} 2023.

The title is referring to the special light we can have in Norway – the Northern Light (Aurora borealis) – that we cannot promise that you will see in Oslo. We can, however, promise an interesting program full of inspiring sessions enlightening and aiming to improve care for fragility fracture patients.

The program consists of plenary sessions with leading professionals from orthopaedic surgery, geriatric medicine, physiotherapy, nursing, nutrition, and osteoporosis care. FFN and the congress have a multidisciplinary approach because we believe that fragility fracture patients get better care when different health professions collaborate. Workshops will bring together experts from different professions to find the best solutions for our patients.

Topics will cover the four pillars of FFN; acute multidisciplinary care of fracture patients, rapid rehabilitation, secondary prevention of new fractures, and forming national alliances to persuade politicians and promote best practice.

The pre-congress program on October 3rd will be arranged by the FFN Special Interest Groups, including programs for nurses, physiotherapists and secondary prevention.

Read more about the Fragility Fracture Network Global Congress



Call for oplæg, symposie-forslag og posters til årets

Konference:

At blive gammel i en forceret tid

Becoming old in a forced time

The Danish Gerontological Society invites you to the National Conference on Ageing and Society in Middelfart, Denmark, October 2nd and 3rd 2023.

We live in a time of high tempo, and our approach to the good life often consists of turning it up even more through streamlining, productivity, acceleration. But this does not ring true for all citizens and groups in society; many people experience living in a time that stagnates, especially in comparison with those who are on 'the fast track'. Others start looking for alternative ways of living in time: new ways of living together and news ways of working, other life- and dayrhythms, especially when the backside to the acceleration shows itself through stress, depression and burned out syndrome. What does this 'time landscape' look like in a Danish context? And what is it like to become old at this time? The national conference of the Danish Gerontological Society 2023 sheds light on the experiences and ways of dealing with time among elderly people in their everyday life, in the family and in treatment of and care for fragile and sick elderly.

Go here to learn more about the conference

Recent doctoral dissertations

Loss and Belonging—Life with Alzheimer's Disease in Denmark

Ida Marie Lind Glavind, PhD in anthropology, Department of Anthropology, UCPH & The Danish Alzheimer Association ida@alzheimer.dk

In this article-based PhD dissertation, I explore how Alzheimer's disease affects the social lives of people living with the diagnosis through aspects of loss and belonging. From 2019 to 2021, I conducted a total of twelve months of ethnographic fieldwork in Denmark among people with Alzheimer's and their family members. The fieldwork covered 2.5 years, allowing me to follow how their social life became affected as their disease developed from early to middle/late stages with each research participant.

In a medical sense, Alzheimer's is described as a degenerative disease, undergoing progressive, irreversible cognitive and physical losses, eventually leading to premature death. From a broader social and cultural perspective, the degenerative perspective also plays a central role: media, policymakers, and family members portray people with dementia as decaying individuals, as empty shells, not fully human, not fully alive. Meanwhile, the experience of those all of this truly concerns – that is, people with dementia – are often forgotten, even in research.

In this dissertation, I argue that there is something here we lose sight of if our sole understanding of dementia is through aspects of loss, decay, and death and if we forget to take into account the lifeworld of the patient. Observing how the social life of people with Alzheimer's unfolds allowed me to look beyond this prevailing degenerative narrative on dementia. I saw that despite their cognitive losses, the ability to belong for people with Alzheimer's remained, though in changed ways. I, therefore, argue that loss and belonging are not two opposite poles in life with dementia. Instead, they are entangled as two sides of the same coin.

Loss and belonging are themes in the dissertation's three articles: Art. I (co-authored with Hanne Mogensen) explores people with Alzheimer's changing ability to express themselves verbally. Stories become difficult to tell, and the experience of being understood is challenged. By proposing that we go along with their fragile stories, paying attention to how

understanding is based on so much more than just the words exchanged, we learn new ways of communicating. Art. II describes the changing sense of time that makes people with Alzheimer's fall out of sync with the rhythm and pace 223 of their surroundings. This causes conflicts, and I argue that the loss of time is not a subjective loss, but rather an intersubjective loss. However, people with dementia also show us new ways of being in time, where presence is more important than punctuality. Art. III advances a concept of social prognosis, referring to how newly diagnosed fear being perceived as socially dead after disclosing their dementia diagnosis. Seeking to sustain social recognition, many vacillate between revelation and concealment. Following the aftermath of disclosure, the article shows that people with Alzheimer's do not, in fact, experience social death: while they do experience estrangement and marginalization, they also experience continuing care.

From this, I argue that dementia should not only be understood as degenerative – it can also be seen as a generative disease. Generative in the sense that dementia generates new ways of being together, and new ways to create and sustain belonging, teaching us other ways to communicate, to be in time, and to maintain social recognition.

Alcohol and aging: a multimethod study on heterogeneity and multidimensionality

Wossenseged Birhane Jemberie, Department of Social Work, Centre for Demographic and Ageing Research (CEDAR), Umeå University wossenseged.jemberie@umu.se

Background and Objectives: With an ageing population, the number of older persons with substance use problems, particularly problematic alcohol use, is increasing. Despite growing recognition of the negative consequences of problematic alcohol use on older persons, there is a dearth of knowledge about the alcohol use profiles and the dimensionality of alcohol problems in older people. Moreover, little is known about older persons' experiences and perspectives on alcohol use in relation to their ageing and their personal goals regarding treatment and recovery. This thesis aimed to (i) describe the characteristics of older persons who accessed municipal substance use treatment and care services (addiction services) and to investigate their future hospitalization; (ii) examine the heterogeneity and multidimensionality of problematic alcohol use among older persons; and (iii) to shed light on the experiences and perspectives of older persons regarding ageing, alcohol problems and recovery.

Methods: For studies I-III, municipal Addiction Severity Index (ASI) assessment data (between 2003 and 2017) from adults aged 50 years and older were used to select the study samples. Generalized linear regression models investigated hospitalization related outcomes among 3624 older persons in Study-I. In Study-II, a latent class analysis was applied on ASI data from 1747 individuals with alcohol problems. Study-III linked the ASI data from Study-II to hospital discharge and mortality data forming time-to-repeated-event dataset; Andersen-Gill regression model with a robust variance estimator was used for the analysis. Study-IV applied qualitative content analysis on interview data from ten older persons recruited from a specialist outpatient clinic for alcohol treatment.

Results: Nearly three-fourth of older persons assessed for substance use severity at municipal addiction services were later hospitalized (Study-I). Individuals diagnosed with substance use disorders, psychiatric or dual diagnoses had more cumulative hospitalized days, higher rates of hospital readmissions, and shorter time to first admission following an initial ASI assessment at municipal addiction services (Study-I). Five distinct groups of older persons with comparable alcohol problem severity but with variation in onset age,

psychiatric comorbidities, polysubstance use, social support and gender composition were identified (Study-II). The five groups varied in risks of repeated hospitalizations due to substance use and psychiatric disorders (Study-III). Older persons experienced their ageing and alcohol use having a dynamic interplay (Study-IV). They needed to constantly negotiate with their environment to maintain a positive ageing trajectory. They perceived moderate alcohol use fosters healthy ageing, but over time, experienced their alcohol use as unsustainable and a threat to their pursuit of healthy ageing. Stigma and ambivalence delayed treatment seeking (Study-IV). They accessed treatment programs which respected their preferences and autonomy, engaged them in goal setting and strengthened their agency. After reducing their alcohol use, positive changes in their biopsychosocial functioning encouraged them to continue their recovery journey even in the presence of setbacks (Study-IV).

Conclusion: Most older persons who access municipal addiction services are hospitalized repeatedly. Many older persons with alcohol problems live with medical and psychiatric comorbidities suggesting multiple care needs from health and social care services. Incorporating older persons' desire for healthy ageing into alcohol treatment plan can facilitate treatment engagement and recovery. Many older persons aim to moderate their alcohol consumption. Clinicians can deliver person-centered care for older persons, by considering their heterogeneity in treatment goals, biopsychosocial functioning, and available resources. A multidimensional identification of alcohol use profiles could improve treatment by establishing the variation in alcohol problems among older treatment seekers. Older persons stay engaged in alcohol treatment programs which value their experiences and expertise, incorporate their personal treatment and life goals, respect their autonomy and agency, and involve them as active participants. Sensitizing service providers on old age substance use problems could provide multiple points of contact for screening of older persons and earlier referral to treatment. A streamlined data sharing within and between health and social care services fosters timely and equitable care and facilitates an integrated and person-centered care across the continuum.

Learn more about the thesis Source: www.sweah.lu.se



New Professor at the University of Copenhagen

Maria Kristensen has been appointed as Professor of Participatory Health Services Research at the Department of Public Health & Section for Health Services Research at the University of Copenhagen, Denmark.

<u>Maria Kristensen</u> is furthermore Deputy Head of the Department of Public Health.

As a Professor of Participatory Health Services Research, Maria Kristensen is heading a research group that works collaboratively with creating societal impact in wide and diverse partnerships. We focus on how to ensure person-centered, diversity-sensitive healthcare, in particular for underserved and deprived people, across the life-course.

The research is challenge-driven, impact-oriented, interdisciplinary and participatory, spanning across a range of societal partners including patient/interest organizations, public partners (hospitals, municipalities, regions), industry, entrepreneurs and international organizations. Identifying innovative approaches to ensure diversity-sensitive health care within sustainable healthcare systems is our key mission.

Focus is on unlocking the diverse values, needs and resources among citizens, patients and relatives, understand complex health care encounters including perspectives of professionals, and to transform healthcare to make it equitable and reflective of the varieties of experiences, situations and goals of people, often living with multi-morbidity. This will contribute towards addressing societal challenges as well as opportunities caused by population aging, complex morbidity patterns and diversity that has implications for healthcare policy and practice.

Furthermore, Maria Kristensen is Deputy Director of the interdisciplinary research center <u>Center for Healthy Aging.</u> The CEHA is a research center focusing on how more people can have a healthy life and healthy aging. They apply an interdisciplinary approach and the center studies aging and aging processes from cell to society. Center for Healthy Aging is a network of research units, most of which are currently located at the University of Copenhagen.



Icelandic participation in European Cooperation in Science and Technology Action, DIGI-net

Iceland is one of 39 participating countries in the Action DIGI-net, *Work inequalities in later life redefined by digitalization,* and was a part of the application process as well.

MC members from Iceland are Prof. Sigurveig H. Sigurðardóttir and PhD Student Sirrý Sif Sigurlaugardóttir from the Faculty of Social Work at The University of Iceland.

The aim of the Action is to overcome critical gaps in conceptual innovation on the influence of digitalisation on work inequalities in later life, to address the research-policy disconnect and tackle work inequalities in later life redefined by digitalisation. The Action will enhance scientific knowledge by integrating the different disciplines and schools of thought, by developing collaborations with public policy officials, international policy bodies, non-academic professionals, civil society NGOs, trade unions, management of organisations and older workers themselves.

Sirrý Sif Sigurlaugardóttir is a member of Working Group 1, *Digitalisation and Social Inequalities*. The Nordics are well represented but there are still some positions available and always room in the working groups.

Prof. Clary Krekula at Linneas University in Sweden is the Vice-Chair of the action. Dr. Charlotta Niemistö at Hanken School of Economics in Finland is the leader of Working Group 2, *Digitalisation and Age Culture in Organisations*.

The Action's goal of building knowledge exchange with policy makers and involved stakeholders can only be achieved through collaboration in a broad network capable of mobilizing the local knowledge, discourses, and contacts necessary to build such exchanges across Europe. Anyone interested in participating is encouraged to head over to www.cost.eu/actions/CA21107/ for further information.



Selected papers and abstracts from the 26 NKG are published in a special issue of the Journal of Ageing and Longevity

Guest editors are Paolo Caserotti, Charlotte Juul Nilsson, and Jette Thuesen, the 26 NKG organizing committee and the Danish Gerontological Society.

A generous collaboration with the JAL not only resulted in two new prizes awarded at the congress, the prize for the best poster and the prize for the best oral presentation. A new issue of the journal also came into place, inviting delegates to submit abstracts. Six articles are available via Open Access in the special Issue of JAL, *Change and Continuity in Ageing — The Selected Papers from the 26th Nordic Congress of Gerontology (NKG)*.

Read more about the special issues and download the articles



New journal published by Policy Press in association with the British Society of Gerontology

The Journal of Global Ageing (JoGA) is a transdisciplinary journal committed to advancing the understanding of the global processes of ageing.

JoGA welcomes the submission of research and review articles, debates and brief reports. We seek to publish contributions that examine ageing and later life from all regions of the world. Many of the issues facing older adults are 'wicked problems' that require inter/multidisciplinary approaches. This becomes even more apparent when we shift our lens from the nation-state to the global context, e.g. the impact of climate change on older adults. Hence, JoGA is open to submissions from the social sciences, humanities, development studies, environmental, natural, health, material and public health sciences. Learn more about the JoGA

The executive committee and NGF representatives

Executive committee

Jette Thuesen: President, Danish Gerontological Society

Carin Lennartsson: 1. Vice president, Karolinska Institutet & Swedish Gerontological Society

Steinunn Þórðardóttir: 2. Vice president, The Icelandic Geriatrics Society

Pia Kannegaard: Secretary General of the 26NKG, Danish Society for Geriatrics

Representatives from the member organizations

Denmark

Danish Gerontological Society (Dansk Gerontologisk Selskab): Jette Thuesen Danish Society for Geriatrics (Dansk Selskab for Geriatri): Pia Nimann Kannegaard

Finland

Societas Gerontologica Fennica: Mikaela von Bonsdorff

Finnish Geriatricians (Suomen Geriatrit ry - Finlands Geriatriker rf): Esa Jämsen

Finnish Society for Growth and Ageing Research (Kasvun ja vanhenemisen tutkijat ry - Föreningenför forskning i uppväxt och åldrande): Linda Enroth

Iceland

The Icelandic Gerontological Society (Öldrunarfrædafélag Islands): Sirrý Sif Sigurlaugardóttir & Sigrún Huld Þorgrímsdóttir

The Icelandic Geriatrics Society (Félag Íslenskra Öldrunarlækna): Steinunn Þórðardóttir

Norway

Norwegian Society for Aging Research (Norsk selskap for aldersforskning): Vegard Skirbekk Norwegian Geriatrics Association (Norsk geriatrisk förening): Nils Holand

Sweden

Swedish Gerontological Society (Sveriges Gerontologiska Sällskap): Cristina Joy Torgé Swedish Geriatrics Society (Svensk Geriatrisk Förening): Peter Nordström

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