



Evidence-based Guidelines on Health
Promotion for Older People:

Social determinants, Inequality and
Sustainability

National Evaluation Report

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Contents

1	The Evaluated Health Promotion Cases for Older People	1
1.1	<i>National Selection Procedure</i>	1
1.2	<i>Short Presentation of the Three Health Promotion Cases for Older People</i>	1
2	Results of the National Case Studies	3
2.1	<i>In-depth Analysis of Case 1: “Programmes for active ageing”</i>	3
2.1.1	Structure Evaluation Results	3
2.1.2	Process Evaluation Results	5
2.1.3	Outcome Evaluation Results	8
2.2	<i>In-depth Analysis of Case 2: “I’m 65+”</i>	11
2.2.1	Structure Evaluation Results	11
2.2.2	Process Evaluation Results	14
2.2.3	Outcome Evaluation Results	16
2.3	<i>In-depth Analysis of Case 3: “Portal www.senior.sk”</i>	18
2.3.1	Structure Evaluation Results	18
2.3.2	Process Evaluation Results	21
2.3.3	Outcome Evaluation Results	22
3	Conclusions	24
3.1	<i>Recommendations for Successful Health Promotion for Older People</i>	24
3.2	<i>Specific Recommendations for Project Aims</i>	25
4	References	27
5	Annex	29

1 The Evaluated Health Promotion Cases for Older People

1.1 National Selection Procedure

The national selection procedure was based on the 1st project phase during which 66 national literature pieces were collected (see national report Overview on health promotion for older people in Slovakia). In the 2nd project phase, 19 documents focused on the health promoting activities amongst older people in Slovakia were evaluated, based on the list of exclusion criteria. After this selection procedure, only 7 from 19 examples were evaluated according to the list of inclusion criteria. From the 4 models which scored the highest on inclusion criteria, 3 were selected as cases for further evaluation (Table 1 in Annex).

To evaluate the 3 cases the following measures were used: document analysis, qualitative interviews, cost effectiveness analysis and SWOT analysis.

Within the document analysis several printed documents as well as websites were reviewed for each model. They included final or interim projects reports or annual reports of organisations, followed by proceedings or professional journal articles, newsletters and grey literature. The most typical information obtained in documents covered structure evaluations, followed by process and outcome evaluations.

Qualitative interviews were carried out personally on regional or local levels, and via telephone with additional e-mail communication on national level (Table 2 in Annex). The interviews were oriented more towards aggregating missing information, mostly on process and outcome evaluations.

1.2 Short Presentation of the Three Health Promotion Cases for Older People

“Programmes for active ageing” (SK-6) are offered to older people through the Universities of the Third Age (UTAs) which represent one of the most developed activities organised in the field of formal life-long learning for the elderly in Slovakia. The first UTA came into existence in 1990 (in Bratislava) and in December 1994 the national Association of UTAs was established in Slovakia. In 2006/2007 there were 13 universities all over the country providing education for 5282 senior students. Programmes are available for people from 40 or 50 years of age and over (Mroček, 2006, p. 2; Univerzita tretieho veku, 2006, on-line).

The project was assessed as having well-grounded theoretical approach, being sustainable and using an evaluation process. Programmes for active ageing are an example of an evidence-based, established model of health promotion for older people in Slovakia.

Project titled **“I am 65+ and happy to live the healthy life (I’ m 65+)”** (SK-1) tries to improve the quality of life, health and health awareness of older people through a certificated educational programme oriented towards healthy lifestyles. The project duration is planned from 2004 to 2008. It is co-ordinated on national level by the Public Health Authority of the SR and realised on regional level through the 36 Regional Public Health Institutes. The project target group are people from 65 years of age and over (ÚVZ SR^a, 2007, pp. 797-802).

Geographical and physical accessibility, voice of older people and evaluation were considered as the most important inclusion criteria for this model. “I’m 65+” was selected as an example of innovative project on health promotion for older people in Slovakia.

“Portal www.senior.sk” (SK-2) is a project providing direct support of ICT literacy and life-long learning, mainly to older people and those belonging to disadvantaged groups. It creates a special virtual electronic platform and represents the first national portal established for the elderly. It was started as a one year project in January 2006 and was targeted towards people of 50 years of age and over (Skokňová, 2006, on-line).

The project was assessed as demonstrating good practice in areas around the voice of older people, the inclusion of visible and invisible population and sustainability. Portal www.senior.sk was selected as an example of project addressing a broader theme with side effect for health promotion of older people in Slovakia.

2 Results of the National Case Studies

2.1 In-depth Analysis of Case 1: “Programmes for active ageing”

2.1.1 Structure Evaluation Results



Target group

“Programmes for active ageing” are available for people from 40 or 50 years of age and over (without any limitations). At the beginning they were oriented towards pensioners however changes in other forms of education and increased public interest led to a decrease in target group age (Hrapková, 2007, pp. 20-21).

Theoretical foundation

The issue of existence and quality of human life has become of great importance in modern society. A stronger emphasis is being laid upon meaningful activities such as the need for learning. The educational needs of the elderly vary but their fulfilment always enhances the individual’s potential. Whereas termination of active working life gives rise to loss of human’s working program, it is necessary to create and offer possibilities for a “second life-program” as a logical continuance of the person’s “first” working program (Hrapková, 2000, pp. 84-86).

Know-how of foreign third-age universities (mainly from Belgium, Poland, France) as well as theories of life-long learning have been two pillars for establishing third-age universities in Slovakia as new institutions embodied into the existing system of formal education (Čornaničová, 2007, p. 8).

Health determinants

Through the “Programmes for active ageing” social health determinants (social participation and inclusion) and life-style health determinants (physical and mental health promotion, prevention of diseases) were addressed.

Setting

A school setting was chosen for these programmes. It was based upon the Union for Seniors of the SR who initiated a development of specific educational opportunities for older people at university level (Čornaničová, 2007, p. 7).

Thus, the setting selection issued from the type of required education not from geographical accessibility.

Stakeholders

Representatives of the universities, the Ministry of Education, Youth and Sport, the Ministry of Healthcare and the Ministry of Labour and Social Affairs were involved in the “Programmes for active ageing” at the outset.

Goals of the project

The goals of the “Programmes for active ageing” were oriented not only to offering the elderly an opportunity to be in contact with new information and to increase the quality of their leisure time, but also to build new social contacts and friendships, to foster a balance between physical and mental health and restore their quality of life (Mroček, 2006, pp. 1-2).

Management structure and budgetary arrangements

Four years after the first UTA came into existence in Bratislava, the national Association of the Universities of the Third Age (ASUTV) was established in December 1994 in Košice. The ASUTV is a voluntary and independent association created on the initiative of representatives of universities in Slovakia with the aim to meet together regularly, to exchange information and to cope with different problems associated with management, financial, material and personal resources. The membership fees of universities, donations and sponsorship cover expenses of the ASUTV for fulfilling its tasks (Mroček, 2006, p. 2; Hrapková, 2007, p. 18).

The ASUTV is a member of the International Association of the UTAs (AIUTA), the European Federation of Older Students at the universities (EFOS) and the European Federation of the Elderly (EURAG). At the moment, the EFOS chairman is Nadežda Hrapková – the president of ASUTV in Slovakia.

Currently, each of the 13 UTAs in Slovakia offer a three-year program. During their first year the students are offered basic lectures in each of the available disciplines, the second and third year is devoted to the study of optional disciplines and students enrol in the study of specialised branches (Hrapková, 2006, on-line). The study is co-ordinated at the level of each university.

In 1994 the Government of the SR supported the “Programmes for active ageing” with a single four million SKK donation (approximately 130.000,- Euro). Money was used to equip schoolrooms, provide teaching aids and for organising activities for the senior students (Hrapková, 2007, p. 18).

Currently, the budget of the “Programmes for active ageing” is very limited and arranged at university level. It consists of senior students tuition fees (about 1500,- SKK / approximately 50,- Euro per year), overall state contribution, sponsorship and projects (e.g. Socrates Grundtvig, ESF).

2.1.2 Process Evaluation Results

Involvement and activation of target groups

The elderly were involved through the Union for Seniors of the SR. It is a civic association (NGO) established in 1990. At present it has about 70 000 members and is divided into 8 regional, 67 district and about 800 local (in cities and villages) organisations (Mroček, 2006, p. 6).

An important issue seems to be the self-motivation of older people to attend the UTA. The results of a survey conducted among 414 senior students in Bratislava showed that the following factors influenced their motivation for a study at the UTA: increasing knowledge in the field which they were interested in but had not had enough time in the past to study - 64% (n=265); a need for quality leisure time - 45% (n=187); fulfilling a wish to study at university - 29% (119); a need for social contacts - 27,5% (n=114); a need for increase knowledge in their potential further work - 20% (n=86); an interest to increase the knowledge in their own field of work - 17% (n=71); an aspiration to meet up with partners, friends or local citizens - 4,6% (n=19) (Hrapková, 2000, p. 84).

Implementation of the theoretical foundation

The “Programmes for active ageing” are similar to standard university study however with some specific features that must be respected for the education of older students as referred to their individual and psychological capabilities (Hrapková, 2000, p. 87).

The elderly enter the university without an entrance examination, entry conditions are a secondary school leaving certificate and payment of tuition fees. The study plan of each year usually provides for 14 three-hour lectures to be presented each fortnight. At the end of each semester there are oral or written exams. The study finishes with a final written certificate and graduation ceremony (Univerzita tretieho veku, 2006, on-line).

Amongst the specific features that must be considered for the education of older students, the following were stressed: appropriate motivation of senior study participants, account taken of the level of knowledge and extensive practical experiences of the elderly, emphasis on logical memory rather than mechanical memory and active participation through the teaching-learning process (Hrapková, 2000, p. 87; Hrapková^b, 2006, on-line).

Addressing health determinants

In general it is known that life-long learning through formal education has positive influences on different life-style aspects as well as social health determinants. However health determinants are addressed also throughout the lectures in different disciplines, mainly at the universities which offer courses on for example General Medicine, Gerontology, Nutrition and Health, Psychology, Sociology.

The most frequent health determinants stressed within education are: healthy life-style, nutrition, physical activity, leisure time activities, coping with stress, health and social care, genetics, healthy environment etc. (Hrapková, 2007, p. 21-17).

Accessibility of the setting

From 1990 when the “Programmes for active ageing” were started in Bratislava, in 2007 the programmes are offered all over the country by 13 UTAs located in several cities - Banská Bystrica, Bratislava, Košice, Liptovský Mikuláš, Martin, Nitra, Prešov, Ružomberok, Skalica, Trenčín, Trnava, Zvolen, Žilina. They geographically cover whole Slovakia and older people already don't need to travel a lot of kilometres (sometimes even 300km) to attend the university (Hrapková, 2007, p. 16-17).



Physical accessibility differs and depends to the place where education of each UTA's programme is located – some buildings are ancient, some are old and require re-construction and some are new with modern design and without barriers.

Involvement of stakeholders

As mentioned above the Union for Seniors of the SR has been actively participating in developing the programmes from the beginning.

After the establishing national Association of the UTAs (1994), the next very important year was 1999 (the International Year on the Elderly) when the UTAs Clubs were developed. Members of these clubs are graduated seniors who prepare special activities for themselves as well as for public.

In 2003 the website of ASUTV (www.uniba.sk/asociaciautv) was set up and is provided in four languages - Slovak, English, German and French on the present (Hrapková, 2007, p. 16-17).

Strategies and methods

Democratic efforts by Slovak people in 1989 led not only to radical political changes but also to changes in education. The increased degree of autonomy given to faculties meant an end of central control and uniformity. These changes were reflected in selecting and preparing fields of study at the Universities of the Third age as well.

The UTAs offer a three-year program. The study system of the UTAs is adjusted both to the capabilities of the older students and to the possibilities of the main partner universities.

The pedagogical process at UTA is complemented by other educational and social activities. Along with lectures and seminars, excursions, panel discussions, visits to other universities, informal meetings, visits to theatres and thematically conceptualised trips are organised (www.uniba.sk/asociaciautv).

In 2006, about 70 UTA students took part on Summer Relaxation and Health Course in the university Study and Congress Centre in Modra:



From August 2006 several new activities has started within the EFOSEC project of EFOS which is subsidised by the Socrates Grundtvig-2 Programme of the European Union (<http://www.efos-europa.eu/efosec-e/index.html>).

In July 2007 senior students from Slovakia, Poland, Austria, Germany and the Netherlands met in Modra (Slovakia) for a one week summer course on invitation of the UTA at the Comenius University Bratislava. The programme was very varied and included culture, history and language of Slovakia as well as lectures and exercises to keep an ageing body fit. In the evenings discussions and the singing helped to create a close bond between all nationalities.

Changes and contingencies within the project

At the beginning the Programmes for active ageing were oriented towards old-age pensioners. However changes in other forms of education, increased of public interest and changes in retirement conditions led to a decrease in the target group age to 40-50 years (Hrapková, 2007, pp. 20-21).

The issue of financial resources poses a serious threat to the continued viability of UTAs and necessitates changes to the way they are run. The National Programme for Protection of the Elderly (11.08.1999) declares that the Ministry of Education of the SR has to support UTAs in Slovakia to a certain extent. But universities do not receive any budget from the Ministry for overheads or the staff costs required for providing the “Programmes for active ageing”. The low salaries of university teachers, researchers or administrative staff involved in UTAs is very symbolic and decreases their motivation to participate in these Programmes from year to year.

Tuition fees do not cover real costs and additional financial resources like sponsorship or projects are short-term. This situation is one of the reasons to implement university education for seniors into an amended proposal to the Act on Further Training in 2008 (Hrapková, 2007, p. 19).

2.1.3 Outcome Evaluation Results

Evaluation methods and results

Process and outcome evaluations were carried out within the project using qualitative and quantitative evaluation methods. The representatives of UTAs meet at regular intervals, exchange information and advise each other on organisational financing and education - methodical matters involving UTAs. Common professional meetings are a proof of rich activities of UTAs in the whole country. Annual meeting of the Association with the participation of UTAs representatives evaluates previous activities and the ASUTV president usually submits the annual and financial reports and information is given on EURAG, EFOS activities and results of common projects.

Process evaluation consists of calculating number of UTAs and their students, measuring conditions for study using self-reported questionnaires e.g. living conditions, study branch selection, sources of support during the study, preferred forms of examination.

There is an increasing number of UTAs and their students during the last years (Graph 1 in Annex). While there was one UTA with 229 students in 1990, in 2006/2007 there were more than 5000 seniors studying at the 13 UTAs in Slovakia.

Cost-effectiveness

It was not possible to make statements about the cost-effectiveness of the “Programmes for active ageing” because there is a lack of information on real financial costs. The budget of each UTA consists of state budget (different for each university) and tuition fees. The energy costs are included in the overall costs of the university. Teachers who participated in the UTA education receive some extra salary however this is a token sum (about 200,-SKK / approximately 6,- Euro per one hour session).

Effects on health (physical, mental, social health)

Several questionnaire surveys were carried out by some of the UTAs in the field of effects on health of older age students.

In 1998 there was a European research project carried by Prof. Szwarc from Warsaw. From Slovakia 50 students of UTAs and 50 others older people were evaluated via the Geriatric Scale of Depression. In groups of UTA students there were 74% without depression, 20% with light and 6% with severe depression. In the comparative group of older people there were only 40% without depression, but 50% with light and 10% with severe depression. The research included also the elderly students from Poland and Austria. The comparisons indicated, that the elderly who are actively included to the UTAs and have a new life programme, feel healthier, and more vital in both body and spirit. They suffer less from depression and they found a new meaning in life and further dimensions (Hrapková, 2006, on-line). However, to confirm the effects of programmes on mental health of participants a longitudinal study with a baseline measurement is needed.

The results of the survey conducted among 414 senior students in Bratislava investigated „how they feel since when they started to attend the UTA“. Most of them reported positive feelings. They for example „felt better and younger“ - 36%, “felt more optimistic” - 28%, “felt healthier” - 11%, “were less worry about their family problems” - 6.8%, “were less concerned about their health problems” - 6.3%, “did not felt social problems” - 3.9% and “tried to increase their self-confidence” - 1%.

Only 5.3% “did not feel any change in their feelings”, 0.5% “felt pessimistic” and 1.2% did not reply on this part of questionnaire (Hrapková^c, 2006, on-line).

Sustainable effects

The first Universities of the Third Age in Slovakia came into existence in 1990 and many others have since been founded.

The Association of Universities of the Third Age of Slovakia was established as an initiative of Slovak universities and other higher education institutions on December 1994. Establishing the ASUTV, high self-motivation and long-standing professional experience of several people for example ASUTV president, co-ordinators on each university and teachers involved in the programmes seem to be very important factors for sustainability.

Transferable effects

On the one hand, establishing the UTAs in Slovakia was based on experience from other countries and their “know-how” was transferred. On the other hand, more than 15 years of practice with running the programmes in Slovakia could offer new ideas, new experiences in building national network of UTAs and keeping older people together not only during their study but after that too.

Public recognition and awards

The “Programmes of active ageing” are presented at the web-sites of universities where the UTAs are established (Table 3 in Annex), at the conferences and workshops. The programmes were also posted in mass media and reached an attention of general public and public health experts.

Consumer satisfaction

The results of the survey conducted among 414 senior students in Bratislava showed that 96.7% (n=400) were “fully satisfied” and expressed their thanks to people who participated in the preparation and provision of their study at the UTA. Only 2.6% (n=11) were “partly satisfied” and 0.7% (n=3) were “unsatisfied”. This related to the fact that some senior students would prefer mainstream formal education for example as it is in Austria (Hrapková^d, 2006, online).

In general the students in Bratislava appreciated very much: the chance to increase their knowledge and to obtain new information; the partnership approach, expressed interest and communication; inexpensive tuition fees; different and interesting study streams; the professional and supportive approach of teachers; building new social contacts and overcoming loneliness (Hrapková^d, 2006, online).

Within the EFOSEC project the questionnaire survey was carried out to gain an impression of the motivation, experiences and expectations of older students at the institutions of EFOS members and partners. This might bring up ideas for a better match of the study possibilities with the needs and wishes of the students. First results of the survey were presented at the EFOS and EFOSEC project meeting of March 2007 in Groningen (Netherlands) and are published in the EFOS News Nr. 2 2007 (<http://www.efos-europa.eu/efos-e/downloads/efosnews20072.pdf>).

Empowerment of older people

Older people are involved in the programmes also by influencing the structure and process. They can communicate with the members of ASUTV, participate in workshops and conferences. They are also stimulated to continue in social contacts through the UTAs clubs where they can be active in different ways.

2.2 In-depth Analysis of Case 2: “I’ m 65+”

2.2.1 Structure Evaluation Results

Target group

Based on the Report on Population Health Status, the life expectancy at birth has increased from 66.64 to 69.84 in Slovak men and from 75.44 to 77.22 in Slovak women during the last 50 years. In spite of these positive trends, the Slovak population is still lagging behind other countries in life expectancy. Another indicator characterising the ageing process is the increased ageing index. Presently, there are more than 620,000 people older than 65 years, which represents 11.5% of the population, in Slovakia. Estimated growth rates of this age group (calculated by the Public Health Authority of the SR) are about 966,000 in 2015 and 1,721,000 in 2050 which would represent 37% of Slovak population (Int. 3).

Population ageing is a natural process which is linked to a range of significant societal, biological, health and economic changes. Cardiovascular diseases and cancer account quantitatively for the most important causes of death in older people. The risk factors of premature deaths in this age group are social isolation, lack of physical activity, nutrition and depression. Unfortunately, adequate attention was not paid to these in Slovakia in the past (WHO SR, 2004, online; TASR, 2005, on-line).

One of the first health promoting projects which has begun to pay attention to the above mentioned facts is entitled "To live more healthy and valuable life in older age or I am 65+ and happy to live the healthy life (I'm 65+)". The target group of this project is the Slovak population from 65 years of age and over (ÚVZ SR^a, 2007, p. 797).

Theoretical foundation

The theoretical foundation of the project develops from the fact that lifestyle determines 60% of population health status. To influence the health of older people positively, an emphasis on the selected lifestyle health determinants has been laid down. In this sense, Slovakia has been invited to become an observer within the project "Healthy ageing" which based around on health promotion of the elderly. The Public Health Authority of the SR has participated in several international conferences and knowledge from these meetings has been applied in this national long-term educational project (Changenet, 2005, online; ÚVZ SR^b, 2007, p. 366).

Health determinants

Health and overall activity levels depend on lifestyle and health related behaviour in older age. To influence both of them positively, the project attention has been oriented to the next level of health determinants: social environment - community, physical activity, nutrition, mental health and health information (WHO SR, 2004, on-line; ÚVZ SR^c, 2006, on-line).

Setting

A community setting was chosen for this project. Activities oriented to social environment (e.g. the campaigns "Week for seniors") were run in selected supermarkets and certificated educational programmes took place in the Regional Public Health Institutes (ÚVZ SR^a, 2007, pp. 797-802; ÚVZ SR^b, 2007, p. 366). Further dissemination of acquired knowledge on healthy lifestyle is planned in co-operation with clubs for seniors and social care facilities for the elderly.

Stakeholders

The stakeholders involved in the project were professionals working in the Health Promotion Departments or in the Health Counselling Centres of the Regional Public Health Institutes as well as other professionals from these institutes experienced in the field of health education. Other partners involved in the project were the Union for Seniors of the SR, WHO SR, TESCO Stores and municipalities (WHO SR, 2004, online; ÚVZ SR^a, 2007, pp. 797-802; Int. 3).

Goals of the project

The aim of the project “I’m 65+” was to improve the quality of life, knowledge and behaviour related to health (overall health self-awareness) in older people.

Particular objectives of the project were:

- to increase the interest of the target group in their own health;
- to develop a system of certificated education for elderly people (to educate lectors from their own community);
- to keep up position achieved - to inform, to publish, to educate, to monitor the quality of information, to consult and advise the teachers;
- to provide feedback - to monitor and evaluate the project, as well as to draw conclusions, to discuss, to improve all phases of the project;
- to raise the profile of older people and the problems they face within society, to prevent social isolation, to increase interest of politicians, government and parliament in the life of seniors, to implement the idea of healthy lifestyle and to improve health awareness and behaviour amongst older people (ÚVZ SR^c, 2006, online).

Management structure and budgetary arrangements

The project co-ordination is headed by the Public Health Authority of the SR. The certificated educational programmes were run by the 36 Regional Public Health Institutes based on regional needs (WHO SR, 2004, online; ÚVZ SR^b, 2007, p. 366; Int. 3).

The project budget is included into the overall budget of the Public Health Authority of the SR and the particular Regional Public Health Institutes. The Public Health Authority of the SR is non-profit state organisation acting across the whole country territory, based in Bratislava and financially attached to the Ministry of Healthcare of the SR (Int. 3).

2.2.2 Process Evaluation Results

Involvement and activation of target groups

The project target group and wider social environment were involved and activated throughout the campaigns ("Week for seniors") which have been run from September - October 2004 and 2005 in 10 selected hypermarkets. During the campaigns, older people were examined (blood pressure, BMI, cholesterol, glucose) by the professionals from the Health Counselling Centres of the Regional Public Health Institutes and they could get one-to-one advice regarding their own health problems. Volunteers from the Union for Seniors of the SR hand out the leaflets and brochures on different topics oriented on healthy lifestyle principles and healthy ageing (ÚVZ SR^a, 2007, pp. 797-802).

The regional organisations of the Union for Seniors of the SR has played important role mainly in the selection of participants in the preparation and implementation of the certificated educational programmes (Int. 3).

Implementation of theoretical foundation

The theoretical foundation was fully implemented in the project. The project activities were aimed at all selected lifestyle health determinants - social environment, physical activity, nutrition, mental health and health information (Int. 3).

Addressing health determinants

Information materials disseminated during the campaigns "Week for seniors" addressed the following health determinants: principles on healthy nutrition, blood pressure, cholesterol, physical activity and mental health (ÚVZ SR^a, 2007, pp. 797).

Certificated educational programmes dealt with the following themes: lifestyle (leisure time activities, physical activity, nutrition, drinking habits, dental hygiene, smoking, use of medications and medicinal herbs); health problems (atherosclerosis, hypertension, excess weight, diabetes mellitus, osteoporosis, urinary incontinence, injuries, vaccination); psychological aspects (depression, stress, memory training, emotional support); information about social care and Health Counselling Centres. The same themes were included in a special publication - Guidelines for teaching older people - prepared by the Public Health Authority of the SR (2005).

Accessibility of setting

The settings selected for the project have been differently geographically and physically accessible for older people. While the geographical accessibility was pretty good, the physical accessibility is questionable.

The campaigns "Week for seniors" were organised in 10 different cities all over the country (Bratislava, Košice, Žilina, Trenčín, Banská Bystrica, Poprad, Michalovce, Nové Zámky, Senica, Martin). TESCO offered areas in its hypermarkets to the professionals from the Regional Public Health Institutes (ÚVZ SR^a, 2007, p. 797).

The certificated educational programmes were carried out in the buildings where the Regional Public Health Institutes are situated directly. There are 36 Regional Public Health Institutes established in Slovakia which cover the whole country (Int. 3).

Further "peer to peer" health education (through the teachers) continues in the clubs for seniors and social care facilities for the elderly.

Involvement and activation of stakeholders

The selection of older people involved in the certificated educational programmes was made by each Regional Public Health Institute in close co-operation with the representatives of relevant community organisation of the Union for Seniors of the SR (Int. 3). An emphasis has been placed on some individual features such as mental ability, ability to be active and creatively co-operate, communicational skills, readiness to participate on each seminar cycle, independence (self-activity) in decision making and knowledge transfer process within the peer-setting (Vozárová et al., 2007, p. 103).

Strategies and methods used

The project was divided into 6 phases with the series of activities carried out at both regional and national levels (WHO SR, 2004, online; ÚVZ SR^a, 2007, p. 797):

1. support of the social environment (Campaigns "Week for seniors" – September - October 2004, 2005; National conference - October 2004);
2. development and publishing of the concepts, leaflets, brochures, guidelines;
3. preparation and implementation of the certificated educational programme - pilot seminar in Bratislava (January - June 2005);
4. preparation (methodical seminars) and implementation of the certificated educational programmes - seminars on regional level (from September 2006);
5. "observation" in terms of audit on quality of information which are disseminated among the elderly through the educated senior lectors (2007);
6. health status, health awareness and behaviour monitoring of the elderly (2008).

Within the certificated educational programmes various methods and forms of health education were used (theoretical explanations, practical demonstrations, discussions, brainstorming, small-group activities). The selection of approach has been tailored to actual regional needs as well as age (Int. 3).

An innovative aspect incorporated in the project is “peer to peer” health education which follows after the completion of certificated educational programmes. For example in Košice the certificated educational programme has been run in January – June 2006 and in autumn 2006 there was a lecture on first aid prepared by 3 seniors (participants of the programme) in one local club for seniors (ÚVZ SR^a, 2007, p. 576).

Changes and contingencies within the project

Different problems appeared during implementation of the certificated educational programmes, however they have been usually solved at regional level. The most notable were the problems with refunding the travel costs for participants who live out of the city where the Regional Public Health Institute is located. In some regions it was solved but in others this was not the case (ÚVZ SR^a, 2007, p. 576, Int. 3).

In spite of the efforts invested by the Regional Public Health Institutes in Levice, Komárno (for example) together with the regional organisation of the Union for Seniors of the SR, the elderly were not interested in the certificated educational programme because of “lack of time” (ÚVZ SR^a, 2007, p. 598-9).

2.2.3 Outcome Evaluation Results

Evaluation methods and results

Process and outcome evaluations were carried out in the project using qualitative and quantitative methods. Some of the Regional Public Health Institutes used process evaluation focused on qualitative feedback from the participants of the programmes.

In the frame of outcome evaluation, a number of older people were examined during the campaigns. Monitoring of health status and health awareness of older people were also used. Furthermore numbers of participants of certificated educational programmes as well as input/output questionnaires on health self-awareness were measured.

During the first campaign "Week for seniors", 596 older people were examined (blood pressure, BMI, cholesterol, glucose, expired CO in smokers) in September - October 2004 (ÚVZ SR^a, 2007, p. 800).

By the end of August 2006, 400 participants finished the programmes run by 20 Regional Public Health Institutes. Other 10 Regional Public Health Institutes finished the programme by the end of 2006 (ÚVZ SR^a, 2007, p. 801).

For example an input questionnaire (multiple choice test) used by the Regional Public Health Institute in Košice consisted of 10 items with alternate answers. The first part of the output questionnaire was the same as the input version and the second part included 6 new items surrounding health information disseminated during the programme. The results for the input questionnaire were all in all 74.3% of correct answers, for the first part of output questionnaire 90.9% of correct answers from 17 participants. The proportion of correct answers was all in all 81.5% for the second part of output questionnaire (Graph 2 in Annex). Also comparison of overall knowledge levels was done, as it is presented in Table 4 in Annex (Vozárová et al., 2007, p. 104, 106).

Cost-effectiveness of the project

It is not possible to make statements about the cost-effectiveness of the project because there is a lack of clear information on financial sources and real project costs. As mentioned above, the project budget is included into the overall budget of the Public Health Authority of the SR and the particular Regional Public Health Institutes. Overall it is not known what financial contributions are covered by others project partners.

Effects on health (physical, mental, social health)

Seeing that the certificated educational programmes have been run in 2005-2006, it is not possible to measure the effects on health in such short time period (Int. 3). The expected long-term effect of the project is an increased proportion of older people (over 80 years of age) who are able to live independently, with adequate self-esteem and active in social lives (WHO SR, 2004, on-line).

Sustainable effects

To achieve sustainable effects (realisation of further certificated educational programmes, advisory and monitoring services for peer senior educators) it is necessary to have clear funding as well as personal and material resources (Int. 3).

Transferable effects

Experiences acquired during methodical preparation and implementation of certificated educational programmes in regions could be transferable to the regions where the project has not been run yet (Int. 3).

The Manual on healthy lifestyle for peer senior educators which has been prepared and published for participants of the programmes can be used not only by the elderly but also by other professionals or volunteers working with older people.

Public recognition and awards

The project results have been widely disseminated through the media (e.g. national TV, broadcast, internet) and presented on a national and international level (e.g. national conference of the Union for Seniors of the SR, national conference on health education, workshops, international meetings within the Healthy ageing project).

Consumer satisfaction

In general there was an increasing interest in the project noticed among older people in Slovakia (Int. 3). In Košice, the participants evaluated the educational programme in words: “it was very useful”, “eye-opening”, “we liked it very much” or “expanding our knowledge”. All 17 seniors expressed overall satisfaction with the programme and also with the Manual and other materials they have received (Vozárová et al., 2007, p. 104). Because of interest from local organisations of the Union for Seniors of the SR, the Regional Public Health Institute in Banská Bystrica was asked to prepare and run the educational programme again in 2007 for the elderly in the Brezno region (ÚVZ SR^a, 2007, p. 611).

Empowerment of older people

The certificated educational programmes addressed empowerment self-esteem, motivation and independence of older people. They were empowered in terms of increased knowledge on healthy lifestyle, supporting their ability to change their own health related behaviour and also encouraging them in influencing their peers.

2.3 In-depth Analysis of Case 3: “Portal www.senior.sk”

2.3.1 Structure Evaluation Results

Target group

The target groups of the project “Portal www.senior.sk” include to both visible and invisible populations. The elderly from 50 years of age and over represent the visible target group of the project.

However, the project is available also for younger people. Invisible target groups of the project are mainly: older people with disabilities, older workers or unemployed, socio-economically disadvantaged older people, older people disadvantaged in the field of education, from ethnic minorities or migrants (Skokňová, 2006, on-line; Int. 4).

Theoretical foundation

The theoretical foundation of the project was based on the theory of life-long learning. Secondly, previous experiences gained from the project “Computer academy for seniors“ which was run in 2005 made clear the necessity to continue in promoting information and computer technology (ICT) literacy amongst older people as well as disadvantaged groups. The increased ICT literacy opens opportunity for entering into a virtual world. This world offers not only a wide range of knowledge (including information on health) but also a development of special community space for social contacts and building psycho-social confidence that “being senior does not mean I am old because I am still able to be useful for others as well as for society in general” (Skokňová, 2006, on-line; Int. 4).

Health determinants

The portal creates a special virtual platform for older people, which allows to them to build social contacts, to participate in education and receive specific information, as well as to express opinions and suggestions. It helps to increase overall psychological well-being, stimulates an active approach in life-style (in spite of passive watching TV) and decreases intergenerational barriers caused by younger generation opinion that older people are illiterate in ICT (Skokňová, 2006, on-line).

The portal sections cover different fields connected to the daily lives of older people such as hobbies, education, work, leisure time activities, social events. One of the portal sections is on health which currently addresses different topics like lifestyle and health related behaviour, living and working conditions, access to health and social care services, socio-economic conditions, environmental health, cardio-vascular diseases, cancer, later years of life (Int. 4).

Another special part of the portal is an electronic newsletter „which not only for seniors“. It also covers important information about healthy lifestyle and diseases prevention in older age:



Setting

The project was run on a national level and in general it is accessible in various settings - communities, workplaces, schools, clubs, social and health care facilities, people' own homes etc. The only necessary condition is an internet access.

Stakeholders

The project has started with financial support of the Ministry of Transportation, Post-Office and Telecommunications of the SR within the national operational programme Informatization of Society (eEurope+). It came into existence as a response on developing ICT literacy of older people and their need to have a website with “own” digital content. The portal has been building up as society magazine with different topics, simply structured and interactive (possibility to express own opinions or add own contributions). Currently, the content is prepared by the editorial office consisted of voluntaries and random contributors (Skokňová, 2006; Int. 4).

Goals of the project

The portal creates a multifunctional on-line platform for the elderly at national level and also within the European network seniornet. It supports beginners or less experienced internet users in searching and using the relevant information (Skokňová, 2006, on-line).

The further goals are based on the following ideas (Int. 4):

- to develop e-learning platform oriented on education and including also health promotion with holistic approach (medicine, psychology, sociology, etc.);
- to prepare portal content related competitions for individuals or special teams like clubs for seniors, homes for older people;
- to organise on-line lectures.

Management structure and budgetary arrangements

The civic association Regions.sk <http://www.regiony.sk/> is responsible for this project. The association is based on volunteers and its main activities are in the field of leisure time clubs and informal education using. These activities are based on principles of intergenerational communication and exchange of information.

Portal Senior.sk has been developed as a one year project financed by the Ministry of Transportation, Post-Office and Telecommunications of the SR (616.000,- Sk, approximately 18.400,-Eur) and by the own budget of the civic Association Regions.sk (74.000,- Sk, approximately 2.200,-Eur).

The budget provided finances for 9 months and was used for input technical equipment (computers), costs for running the editorial office (rental, energies, internet), personal costs (editor-in-chief, manager, training of co-workers), portal establishment and operation (editorial system, webmaster) and dissemination.

Unfortunately, from the end of 2006 the editorial office was not successful in getting further financial support and has not any marketing plan and manager. The portal is currently running only on voluntary basis and its future is threatened (Int. 4).

2.3.2 Process Evaluation Results

Involvement and activation of the target groups

The target groups were activated through the title of portal itself “senior” and by offering the portal to the Union for Seniors of the SR and other organisations with membership for older people. They received an opportunity for presentation of their activities and information relevant for the elderly. The project co-ordinator proposed them to prepare other common projects realisations e.g. campaign on World day on violence against the elderly, World day on mental health, establishing internet clubs for seniors. The portal has been also indexed into the internet finders and websites lists (Int. 4).

Implementation of the theoretical foundation

The theoretical foundation has been implemented only partially. The main aim to include elderly themselves into the portal developing was not fulfilled at all. Another weak point was in failure of co-operation with some subjects and overload of the project co-ordinator (Int. 4).

Addressed health determinants

The health determinants were addressed in the articles presented within different portal sections, through the information and advertisements about important events organising all over Slovakia.

Accessibility of the project

The portal as a specific electronic virtual platform, accessible everywhere where the internet connection is provided.

Involvement and activation of the stakeholders

From the civic association Regions.sk five people have been directly involved and about 10 other people have been indirectly co-operated (Int. 4).

Strategies and methods used

There was step by step strategy used for creating and running the portal. It has started with selection of the editorial system and creation of the portal content, design and registration (ISBN). Secondly a team of regional editors, contracts with news services providers (monitoring from media for seniors - TASR, SITA, Newtonit), selection and contracts with e-learning services providers have built up. The portal start-up was in March 2006. It was followed by activities focused on portal publicity in media, advertisement, public events, developing co-operation with NGO's, libraries, etc. and organising marketing support of education, club activities (senior club), field presentations of portal, work with PC and internet for target groups, active portal presentation on public events (Skokňová, 2006, on-line).

Changes and contingencies

The project co-ordinator encountered a lack of interest in terms of co-operation or active support of the project expressed by different organisations for seniors and also by the stakeholders who could support project financially. The only way how to continue in running the portal under such conditions was to work on voluntary basis with restricted goals (Int. 4).

2.3.3 Outcome Evaluation Results

Evaluation methods and results

Process and outcome evaluations were carried out in the project using qualitative and quantitative methods.

Continual monitoring the number of visitors/users by age (above 50, over 50, 60, 70 years) is carried out directly on the portal. The daily rate of portal visitors is from 60 to 130 people. Approximately four new articles are inserted in the portal, so regular visitor/portal user can look at the it once in a week to receive new information. People are also invited to send their feedback and suggestions via e-mail (Int. 4).



Cost-effectiveness of the project

It is known world-wide, there are tenths of websites specially developed for the elderly in other countries. Unfortunately, there is not real interest in support this way of communication at state or self-government levels in Slovakia (Int. 4).

Because of limited financial support as well as a lack of information on using the internet by older people it was not possible to make statements about the cost-effectiveness of the project.

Effects on health (physical, mental, social health)

The portal has been selected as an example of project addressing a broader theme with side effect on health promotion of older people in Slovakia. Thus there was not direct effect on health measured within the project. Only the proportion of portal content by the topic used is measured (Int. 4).

Sustainable effects

Even though the budget has been available only for one year (till December 2006) for starting-up the portal, it is still running and regularly updated. It was achieved only because of people who are still working on it on a voluntary basis. However, this situation starts to be limiting for quality and further content development and it is not sufficient warranty for sustainability of the project (Int. 4).

Transferable effects

The project itself is a transferred project since the similar projects have been already run in other countries (Czech Republic, Poland). Thus, it is the project which can be adapted to other countries.

Public recognition and awards

The project did not receive any award, but informal appreciation has been expressed for example by the Slovak Syndicate of Journalist. Sometimes also readers/portal users send positive feedback that there is such specific web-site for older people in Slovakia finally (Int. 4).

Consumer satisfaction

Consumers usually show their satisfaction in the public inquiry on the web-site. They are interested in receiving information and knowledge however they are not so much willing to be personally active (Int. 4).

Empowerment of older people

In general, target group still remains not so familiar with the internet and is inactive in Slovakia. The older people live mostly in small closed communities and it is not so easy to enter their worlds and empower them using new approaches (Int. 4).

3 Conclusions

3.1 Recommendations for Successful Health Promotion for Older People

Structure

There are several recommendations which can be derived from our three cases as concerning the structure of the projects.

The first one seems to be a **voice of older people** which an attention has been paid to within the “I’m 65+” and the “Portal www.senior.sk” projects mainly through co-operation with the Union for Seniors of the SR. Clear **target group selection** and **well-grounded theoretical approach** were other points for good projects structure. The above mentioned three factors are important mainly for defining the goals (based on the target population needs), as well as strategies and methods used in the process. Only one project - the “Portal www.senior.sk”, has been directly targeted not only to visible but also to invisible population. Well-grounded theoretical approaches have been used in all three cases.

Process

All three cases from Slovakia have been structured as activities which can be run at national level. However, we suppose that their successful implementation requires some preconditions at regional or local levels.

In this regard for example **voice of older people**, or **geographical and physical accessibility** are considered to be important. For involvement and activation of the target groups good co-operation with the district, regional or local organisations of the Union for Seniors of the SR was very helpful, mainly in the “Programmes for active ageing” and “I’m 65+”. Geographical and physical accessibility of the chosen settings affected motivation of people to participate in the projects.

Multi-agency approach and **innovative strategies** have also been recognised as factors influencing effective health promotion for older people.

Outcome

Concerning the outcomes an attention has to be paid to **evaluation** and **sustainability**. Process, outcome and cost effectiveness evaluation methods has to be defined and included in the structure. There is a lack of clear evidence of project effectiveness without using them.

3.2 Specific Recommendations for Project Aims

Inequality

Of the three Slovak projects, no one was explicitly concerned to tackle with inequalities. However, we suppose that one of the effective way tackling inequalities is in linking visible and invisible population. This could be worked also in our cases when for example “visible” senior university students can help those with some physical disabilities (“Programmes for active ageing”) or “visible” senior educators can make peer-to-peer health education at health/social care facilities (“I’m 65+”).

Social determinants

All three cases has been focused on social determinants mainly in terms of social isolation and social inclusion. The “Programmes for active ageing” offer not only raw formal education but also provide further activities (e.g. summer course) to keep people together, active and included in a wider society. Health education running in small groups on community level within the “I’m 65+” is followed by peer-to-peer education which requires further active approach of older people not only using the information but to share them with others. From the long-term view the “Portal www.senior.sk” is not only for passive gathering the information or gaining skills on IT but to support people in interactive communication.

Sustainability

The most important aspect of sustainability which can be seen in two of our projects (“Programmes for active ageing”, “Portal www.senior.sk”) is long-lasting intrinsic motivation, professional and personal engagement of project co-ordinators. However, it is not enough.

When the project has been running for longer time without clear budget, essential financial and material support, enthusiastic people start to become demotivated and

frustrated. Thus, multisource financing with clear not single-shot funding from the government is necessary.

Other aspects important for sustainability seem to be: good project management, detailed project documentation, activities increasing project publicity, self-motivation of target groups and functional network of older people themselves.

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5 Annex

Table 1 National selection procedure

Dbf	Title of the model	Excl.	Incl.
SK6	Programmes for active ageing (case 1)	0	930
SK2	Portal Senior.sk (case 3)	30	860
SK7	Support of work adaptability and mobility of people disadvantaged on job market by way of specific educative activities aimed at flexible forms of work by using modern information and communication technologies	30	860
SK1	I am 65+ and happy to live the healthy life (case 2)	0	790
SK3	Memory training for older people	0	700
SK5	Seniors, join in	30	660
SK4	Successful ageing	20	510

Table 2 Table of interviewed persons

Interview No.	Case No.	Project position of interviewed person	Interview (date and duration)	E-mail
1	1	President of the ASUTV	March 2008, 35 minutes	Yes
2	1	University teacher from the UTA in Kosice	Dec. 2007, 40 minutes	No
3	2	Project co-ordinator on national level	Jan. 2008, 15 minutes	Yes
4	3	Project co-ordinator	Jan. 2008, 25 minutes	Yes

Graph 1 "Programmes for active ageing" - Number of UTAs students in Slovakia

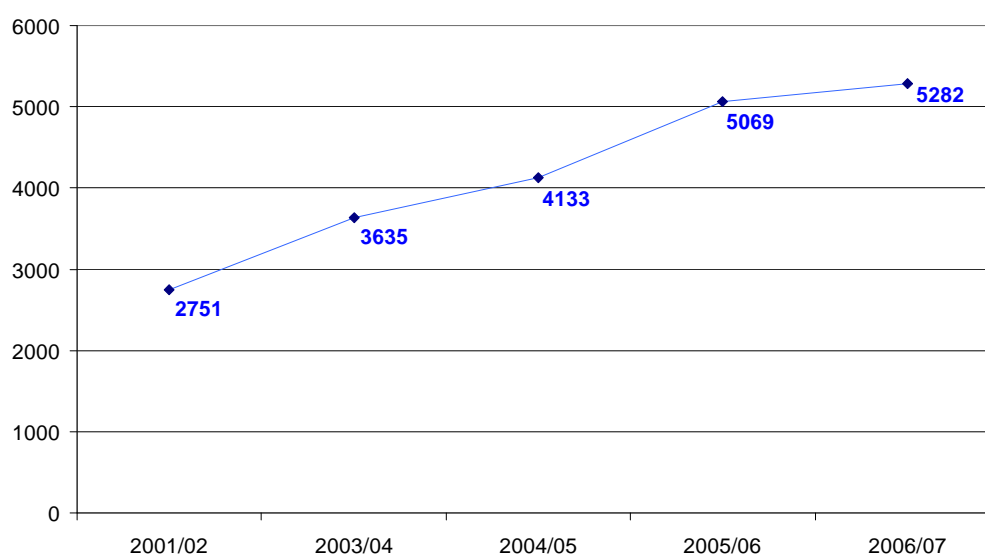


Table 3 “Programmes for active ageing” - UTAs in Slovakia

Comenius Univ. in Bratislava	www.uniba.sk/utv
Slovak Technical Univ. in Bratislava	www.stuba.sk/svk1/icv/utv.html
Matej Bel Univ. in Banská Bystrica	http://www.umb.sk/index.php?module=articles&id=173
Žilina Univ. in Žilina	www.utc.sk/lsvd/u3v.html
Technical Univ. in Košice	http://www.tuke.sk/tu/u3v/
Military Academy in Liptovský Mikuláš	http://www.aoslm.sk/ovzd/
Univ. of Constantinus Philosopher in Nitra	www.ukf.sk
Trnava Univ. in Trnava	www.truni.sk
Alexander Dubček Univ. in Trenčín	www.tnuni.sk
Slovak Agricultural Univ. in Nitra	www.spu.sk
Technical Univ. in Zvolen	www.tuzvo.sk

Graph 2 „I‘am 65+“ - proportion of correct answers in the 2nd part of the output (in %)

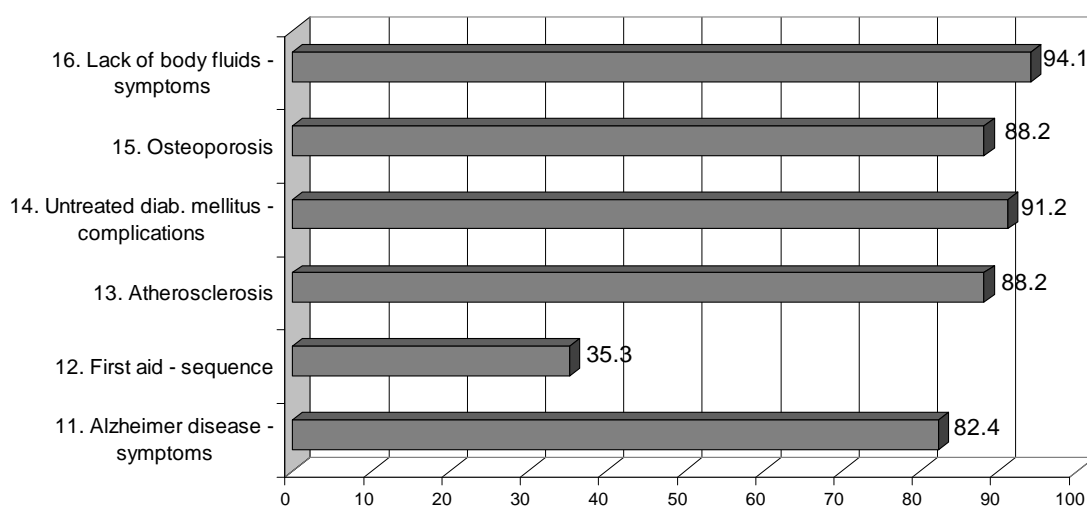


Table 4 „I‘am 65+“ - proportion of answers (n=17) by number of correct answers

Range of points	Input questionnaire		Output questionnaire (1.)		Output questionnaire (2.)	
	n	%	n	%	n	%
8-11	11	64.7	17	100.0	-	-
5-7	6	35.3	0	0.0	15	88.2
0-4	0	0.0	0	0.0	2	11.8