



EUROPEAN
COMMISSION

Community Research

EUROFAMCARE FINAL CONFERENCE

Family Care of Older People in Europe

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Ageing related research in RTD Framework Programmes

- FP4: 1994-1998
 - Biomedicine and Health 2 – chronic diseases and age related - science driven approach
- FP5: 1998-2002
 - Quality of Life and management of the living resources, KA1 and KA6 + GA, + IST, SMEs, Growth, Human Capital – problem solving approach, social objectives
- FP6: 2002-2006
 - Thematic Priorities 1, 2 and 5, scientific support to policy, SMEs, ERA-Net, Marie Curie, ...less opportunities

Main objectives “Ageing” Key Action

- To help Europe’s society and its citizens meet the challenges of ageing by mobilising research:
 - To enhance the quality of life, autonomy and social integration of older people
 - emphasis on healthy ageing and well-being in old age
 - To improve quality, efficiency and user-friendliness of care and welfare provision
 - emphasis on enabling older people to remain independent
 - To support policy and planning
- To raise profile and status throughout Europe of “ageing” as a coherent field for top quality research

Scope of the “Ageing” Key Action

- 6.1 Age-related diseases and disorders
- 6.2 Basic Processes of Physiological Ageing”
- 6.3 Demographic and social policy aspects of population ageing
- 6.4 Coping with functional limitations in old age
- 6.5 Health and social care provision for older people

Budget for all actions including CRAF, fellowships and accompanying measures: 190 Million €

Final results of KA6

599 proposals have been evaluated

121 are funded (~170 Mio €)

51 under “age-related diseases”

26 under “basic process and physiological ageing”

13 under “demography and social policy”

18 under “coping with functional limitations”

13 under “health and social care for older people”

in addition (~20 Mio €):

19 Accompanying measures

18 SME specific measures (11 exploratory awards and 7 CRAFT projects)

39 Fellowships

KA6 Documents:

Project synopsis (available on Cordis)

Impact assessment at mid-term (available on Cordis)



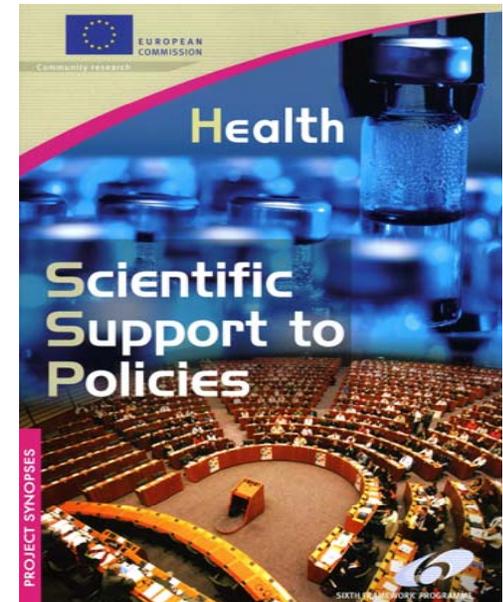
CONCLUSIONS FOR KA6 (i)

- Reasonable total success rate:
21% of all proposals evaluated
- Problem-solving content:
Finally applicants have understood the problem-solving nature of this key action
- Higher interest and better quality in area 6.3.
More proposals submitted and selected in demography and social policy in the last call
- Increased stakeholder involvement:
Specific workshops outcome
- High user involvement:
Various stakeholders are now included in the projects : representative of older people and their carers, patient organisation and other relevant authorities
- Good coverage of the work programme:
Most action lines are well covered with projects except depression and end-of-life care

- **EUROFAMCARE – Services for supporting family carers of elderly people in Europe: characteristics, coverage & usage**
- **SHARE – Survey on health, ageing and retirement in Europe**
- **SEDHA - kezhkfealrg**
- **FELICE – Future elderly living conditions in Europe**
- **DEMWEL – Demographic uncertainty and the sustainability of social welfare systems**
- **PROFANE – Prevention of falls Network Europe**
- **OASIS – Old age and autonomy : the role of service systems and intergenerational family solidarity**
- **CARMEN – The care and management of services for older people in Europe network**
- **CARMA – Care for the aged at risk of marginalisation**
- **MERCURIUS – Conference on quality of life for ageing people with intellectual disabilities**

FP6 – SCIENTIFIC SUPPORT TO POLICIES (SSP)

- Demand-driven
- Responsive to policy requirements:
 - EU Public Health Programme – monitoring, information, health determinants, threats
 - European Social Agenda - ageing, combating discrimination, barrier-free Europe
- Clients:
 - DG Sanco, DG Empl, DG Env, DG Ecfm, DG Entr



FP6 - SSP PROJECTS

AHEAD – Ageing, health status and determinants of health expenditures

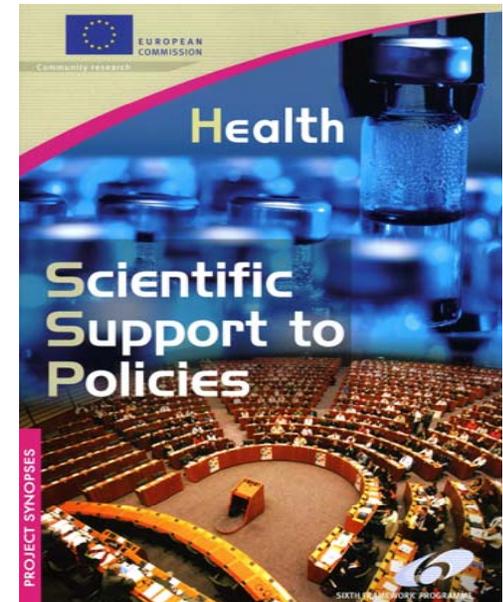
AIM – Adequacy of old age income maintenance in the EU

SPHERE – Strengthening public health research in Europe

MHADIE – Measuring health and disability in Europe: supporting policy development

MIC-MAC – Bridging the micro-macro gap in population forecasting

DIS-QOL – Quality of care & quality of life for people with intellectual & physical disabilities: integrated living, social inclusion and service user participation



FP6 ERA-NET

Stimulating & supporting programme co-ordination and joint actions conducted at national or regional level – Developing the common knowledge base necessary for the coherent development of policies

**An example:
Ageing
Research**



Full title:
European research area in ageing research

Research field:
Population ageing

Coordinator:
UK: The National Collaboration on Ageing Research

Core partners:

- Austria: The Austrian Academy of Sciences
- Finland: The Academy of Finland
- France: Caisse Nationale d'Assurance Vieillesse
- Luxembourg: Fonds National de la Recherche
- Netherlands: The Netherlands Organisation for Health Research and Development
- Norway: The Research Council of Norway
- Romania: Ministry of Health and Family; Executive Agency for Higher Education and Research Funding
- Sweden: Swedish Council for Working Life and Social Research

Future partners:

- Germany: Projektträger DLR
- Israel: Israeli Ministry of Health
- Italy: Istituto Superiore di Sanita
- Latvia: The Latvian Council of Science
- Spain: The Ministry of Science and Technology

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Duration:
4 years

EC funding:
€2.40 million

Project reference:
CA-510177-ERA-AGE



Policy-oriented research - 6FP SSP - indicative topics 5th Call

➤ Area 2.1 & 2.4

- cost effectiveness in health care
- mental health – best practice, care and treatment
- public health intervention research
- new technologies & techniques – impact on health care system
- accessibility and public transport for people with disabilities
- free movement of people with disabilities



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Building the Europe of Knowledge

Health Research

***Proposals for the 7th Research
Framework Programme 2007-2013***

9 Thematic Priorities:

1. **Health**
2. Food, agriculture and biotechnology
3. Information and communication technologies
4. Nanosciences, nanotechnologies, materials and new production technologies
5. Energy
6. Environment (including climate change)
7. Transport (including aeronautics)
8. Socio-economic sciences and the humanities
9. Security and space
Euratom: Fusion energy research, nuclear fission and radiation protection

Framework Programme 7: Objectives & activities

	Themes	Health	Biotech, Food, Agriculture	Information Society	Nano, Materials, Production	Energy	Environment	Transport	Socio-economic Research	Space and Security		
COOPERATION	Collaborative Research	8.317	2.455	12.670	4.832	2.931	2.535	5.940	792	3.960	44.432	
IDEAS	European Research Council										11.862	
PEOPLE	Marie Curie Actions										7.129	
CAPACITIES	Research Infrastructures	Research for, and by, SMEs	Regions of Knowledge	Research Potential	Science in Society	International Co-operation						7.486
	3.961	1.901	158	554	554	358						
JRC (EC)											1.817	
											Total	72.726

(Cash prices)

Health Research Theme

- Under each theme there will be sufficient flexibility to address both *Emerging needs* and *Unforeseen policy needs*
- Dissemination of knowledge and transfer of results will be supported in all thematic areas
- Support will be implemented across all themes through:

Collaborative research

(Collaborative projects; Networks of Excellence; Coordination/support actions)

Joint Technology Initiatives

**Coordination of non-Community research programmes
(ERA-NET; ERA-NET+; Article 169)**

International Cooperation

HEALTH COLLABORATIVE RESEARCH

Objective:

- *Improving the health of European citizens*
- Increasing the competitiveness of European health-related industries and businesses
- Addressing global health issues including emerging epidemics

HEALTH COLLABORATIVE RESEARCH

Activities ⇒ 3 Pillars

- Biotechnology, generic tools and technologies for human health
- Translating research for human health
- *Optimising the delivery of health care to European citizens*

HEALTH COLLABORATIVE RESEARCH

***First Pillar:* Biotechnology, generic tools & technologies for human health**

- High-throughput research
- Detection, diagnosis and monitoring
- Predicting suitability, safety and efficacy of therapies (incl. alternatives to animal testing)
- Innovative therapeutic approaches & Intervention

HEALTH COLLABORATIVE RESEARCH

Second Pillar: Translating research for human health

- Integrating biological data and processes: large-scale data gathering, systems biology
- Research on the brain and related diseases, human development and ageing
- Translational research in infectious diseases (incl. HIV/AIDS, malaria, tuberculosis, SARS, etc.)
- Translational research in major diseases: cancer, cardiovascular disease, diabetes/obesity; rare diseases; and other chronic diseases (e.g. osteoarthritis)

HEALTH COLLABORATIVE RESEARCH

Third Pillar: Optimising the delivery of health care to European citizens

- Enhanced health promotion and disease prevention
- Translating clinical research into clinical practice
- Quality, solidarity and sustainability of health systems

HEALTH COLLABORATIVE RESEARCH – 3rd Pillar

i) Enhanced Health Promotion & Disease Prevention:

- Provide evidence for the best public health measures in terms of life styles and interventions - different levels & different contexts
- Focus on the wider determinants of health and how they interact at both the individual and community level
For example diet, stress, tobacco and other substances, physical activity , cultural context, socio- economic and environmental factors
- Mental health to be addressed in a life-course perspective

HEALTH COLLABORATIVE RESEARCH – 3rd Pillar

ii) Translating Clinical Research into Clinical Practice:

- Better use of medicines, appropriate use of behavioural and organisational interventions, health therapies & technologies
- Special attention paid to patient safety:
 - to identify the best clinical practice
 - to understand decision making in clinical settings in primary and specialised care
 - to foster applications of evidence-based medicine and patient empowerment
- Focus on the benchmarking of strategies; investigating outcomes of different interventions including medicines, taking into consideration pharmacovigilance evidence, specificities of the patient (e.g. genetic susceptibility, age, gender and adherence) and cost benefits

HEALTH COLLABORATIVE RESEARCH – 3rd Pillar

iii) Quality, Solidarity and Sustainability of Health Systems:

- Basis for countries to adapt their health systems
- Taking into account national contexts and population characteristics (ageing, mobility, migration, education, socio-economic status and the changing world of work etc)
- Organizational, financial and regulatory aspects
- Implementation – best practice
- Outcomes - effectiveness, efficiency and equity
- Special attention on investment issues and human resources

HEALTH COLLABORATIVE RESEARCH

Two other strategic issues that will be addressed across activities:

- Child health
- The health of the ageing population

HEALTH COLLABORATIVE RESEARCH

From FP6 to FP7:

- Continuity in the research activities
- Focus on genomics has disappeared
- Emphasis put on translational research
- Biomedical technology & engineering (rich in SMEs) is re-introduced
- Health policy-driven research (public health) is strongly reinforced



FP7 Timetable

6 April 2005	Commission's proposal
September 2005	Specific programmes' proposal
December 2005 ?	First reading at EP
January 2006 ?	Common position at Council
March 2006 ?	Second reading and approval at EP
June 2006 ?	Adoption
November 2006 ?	Launch Conference / 1st calls for proposals

Information

- EU research:
<http://europa.eu.int/comm/research>
- Seventh Framework Programme:
http://europa.eu.int/comm/research/future/index_en.cfm
- Information on research programmes and projects:
<http://www.cordis.lu>
- RTD info magazine:
<http://europa.eu.int/comm/research/rtdinfo/>
- Information requests:
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