

# FINDINGS FROM THE OLDER ADULT CARE LIVING LABS IN FLANDERS (BELGIUM)

Charlotte Brys, Lien Pots, Juul Lemey, Ellen Gorus, Patricia De Vriendt, Marc Jegers, Ezra Dessers, Mark Leys.

<sup>1</sup>*Department of Frailty in Ageing (FRIA) Research Group and Gerontology, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium*

<sup>2</sup>*Research group OPIH, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium*

<sup>3</sup>*Centre for Sociological Research, Faculty of Social Sciences, KU Leuven, Leuven, Belgium*

<sup>4</sup>*Department Nursing, Artevelde University College, Ghent, Belgium*

<sup>5</sup>*Department Occupational Therapy, Artevelde University College, Ghent, Belgium*

## Objective

To tackle the challenge of the growing number of older persons, the Flemish government made a call for Care Living Labs (CLLs) and projects to be tested on these platforms. The aim is to create new care concepts, services, processes and products, in cooperation with the end-users, and to test them in real life settings. Six CLLs with 23 projects are funded.

## Methods

A content analysis of the submitted proposals was performed to explore the views on different domains: program goals, target groups, networks, work organization and technology. This was complemented by semi-structured interviews with the initiators and coordinators of the CLLs and projects.

## Results

CLLs can be grouped in those with more “social” objectives for elderly in general and those with more (para)medical objectives in a specific pathology group. The partnerships of CLLs differ in complexity and governance. The goal of creating sustainable platforms is not explicitly taken on board from the start of CLLs. All CLLs mention the use of information and communication technology to exchange data between actors and to provide services to the older adults. Only one CLL mentions work organization as a key topic, although it was also referred to in a few projects from other CLLs. Projects focus on more specific goals, of which some not necessarily directly in line with the objectives of the program. Although all CLLs and projects mention the importance of informal care, only four CLLs and some projects directly focus on this group. The mix of partners in some projects is sometimes less intersectoral than one would expect from the program objectives.

## Conclusion

The call to launch CLLs is innovative in nature developing a living lab infrastructure on which projects can be run. It aims for a broad and social perspective on elderly care and fits into social innovation perspectives. It also calls for bottom-up proposals. The results suggest that CLL initiators and projects have given their particular meaning to what is to be understood as innovative elderly care.