

EGen 2019

The Bartlett Real Estate Institute at Here East, London, UK
December 7-8, 2019

Final Draft Schedule

Please Check & Confirm

Please check that all information pertaining to you is correct and notify us at support@iafor.org if there is any error.

Please notify us of any corrections by **Sunday, November 17** 17:00 (UK Time).

Final Schedule

After minor changes have been made to the schedule we will send you a link to the final schedule.

The final schedule will contain session information and a detailed day-to-day presentation schedule (including room allocations and session chairs).

This will be available on **Wednesday, November 27**.

All Abstracts will also be available online at this time.

Saturday at a Glance
December 7, 2019

The Bartlett Real Estate Institute at Here East

09:30-10:15 Conference Registration & Morning Coffee | Lounge

10:15-11:00 Announcements & Welcome Address | Lecture Theatre 1

Haruko Satoh, Osaka University, Japan

Shin-Ichi Ohnuma, University College London, United Kingdom

James McNally, NACDA, United States

Joseph Haldane, IAFOR, Japan

11:00-11:30 Keynote Presentation | Lecture Theatre 1

Hiroshi Ishiguro, Osaka University, Hiroshi Ishiguro Laboratories, Japan
(by video address)

11:30-12:00 Keynote Presentation | Lecture Theatre 1

Tsuyoshi Sekitani, Osaka University, Japan

12:15-12:30 Conference Photograph | Lecture Theatre 1

12:30-13:30 Lunch Break | Lounge

13:15-14:45 Keynote Presentation | Lecture Theatre 1

Tadasu Iida, Osaka University, Japan

13:45-14:05 Keynote Presentation | Lecture Theatre 1

Paul Higgs, University College London, United Kingdom

14:05-14:25 Keynote Presentation | Lecture Theatre 1

James Barlow, Imperial College London, United Kingdom

14:25-14:45 Keynote Presentation | Lecture Theatre 1

Nick Tyler, University College London, United Kingdom

14:45-15:15 Keynote Panel | Lecture Theatre 1

Paul Higgs, University College London, United Kingdom

James Barlow, Imperial College London, United Kingdom

Nick Tyler, University College London, United Kingdom

14:30-15:00 Coffee Break | Lounge

15:30-17:00 Parallel Session I

17:00-18:00 Conference Welcome Reception | Lounge

19:15-21:30 Official Conference Dinner (optional extra)

Please note that all abstracts are printed as submitted. Any errors, typographical or otherwise, are the authors'.

Saturday Session I: 15:30-17:00

Room: *To be Announced in Final Schedule*

Session Topic: Lifespan Health Promotion

Session Chair: *To be Announced in Final Schedule*

54861

Swallowing Changes in People with Parkinson's in Saudi Arabia: Perceptions and Practices

Kholoud Alhussain, King Fahad Medical City, Saudi Arabia

Lindsay Pennington, Newcastle University, United Kingdom

Katie Brittain, Northumbria University, United Kingdom

Nicholas Miller, Newcastle University, United Kingdom

Purpose: To explore the experience of swallowing changes in people with Parkinson's (PwP) in Saudi Arabia and their impact on both PwP and their families. **Method:** This is a qualitative study, using semi-structured interviews with 39 participants PwP and their carers and a focus group with three speech and language therapists (SLT). The interviews and focus group were analysed using thematic analysis. **Result:** The main themes categories that emerged are 'the whole meal is awkward', 'we all have Parkinson's' and 'I leave it all to Allah'. There was a close link between cultural context and how eating and drinking changes manifested and impacted on individuals and families. The influence of Islamic beliefs was apparent in both the PwP and the caregivers' interviews. It shaped how they dealt with the disease, how they interpreted symptoms and change, their views on rehabilitation and their willingness to discuss the impact of swallowing changes with the interviewer. **Conclusion:** This study highlights how Saudi Arabian society has traditional mealtime customs for families and for older people in particular. An understanding of these socio-cultural factors is necessary to appreciate how the impact of eating and drinking changes in Saudi Arabia differs from impacts reported for other populations and the different implications this holds for rehabilitation of PwP. SLTs need to be aware of the cultural background of the person with Parkinson's when assessing their eating and drinking abilities. Considerations have to be made when recommending treatment plans or eating modifications.

55210

Health Expectancies of Older Sri Lankans

Manori Weeratunga, University of Colombo, Sri Lanka

Sri Lanka's elderly population is increasing in an unprecedented manner as a result of the population's increasing life expectancy at birth. However, greater longevity does not guarantee better elderly health. Therefore, whether the additional years of life are also accompanied by good health has become a subject of intense interest. The objectives of this study are to estimate the healthy life expectancy of the elderly population in Sri Lanka, identifying the gaps between life expectancy at birth and healthy life expectancy and examining the reasons for such differences. This study was largely based on the healthy life expectancy proposed by the Sullivan Method and used both primary and secondary data. Healthy life expectancy is calculated using the life tables constructed by the Department of Census and Statistics for the period 2011-2013 and 2000-2002. In order to supplement the analysis, a sample survey of 300 elderly people and five case studies were carried out in the Gampaha district, Sri Lanka. When the difference between total life expectancy and health expectancy is investigated, the study found that on average men were in a disabled state for 0.8 years compared to 0.94 years for women in 2001. However, this difference has drastically increased in 2012, with 5.24 and 7.32 years for men and women, respectively. These results show that within 11 years women's morbidity has exacerbated compared to men. The study further revealed that lack

of financial security makes elderly people vulnerable to unhealthy situations, especially in relation to widowed elderly women.

55133

Pre-disease Processes Associated With Aging as a Target for Intervening Aging Progression into Disease

Shaoyu Wang, Charles Sturt University, Australia Kateryna Antonova, Charles Sturt University, Australia

Aging is the single most prominent risk factor for many age-related diseases, such as neurodegenerative disease, cancer, and cardiovascular diseases. While one research avenue is to prevent, halt, or even reverse aging process per se, the other avenue is to prevent or halt the progress of the aging process into disease as within a branch of geroscience. We propose that in the latter case, the interactions between the normal aging process and environmental factors can give rise to precursors for developing into age-related pathologies, yet not committed to progression into any irreversible diseases. The environmental factors can be either within microenvironments (e.g. pro-inflammatory factors) surrounding cells, tissues and organs or derived from macro environments (e.g. temperature, pathogens and chemicals) external to the organisms. This precursor state may be reverted back to normal healthy aging if the environmental factors are beneficial to organisms. However, this precursor state may be progressed into age-related disease if the environmental factors are detrimental to organisms. It is during this state that effective intervention can be implemented. We will present examples of these states, including the one for neurodegenerative disorders and possible interventions. In such a case, axonal degeneration is a potential precursor developing into neurodegenerative disorders. This “precursors” hypothesis can be tested and eventually guide the intervention on aging-diseases progression.

Saturday Session I: 15:30-17:00

Room: *To be Announced in Final Schedule*

Session Topic: Built Environment

Session Chair: *To be Announced in Final Schedule*

54729

System Innovations in Design for Aging – A Research-driven Multi-stakeholder Approach for Transforming Medical Systems

Jonas Rehn, Darmstadt University of Applied Sciences, Germany

In many cases design approaches use a systemic point of view in order to gain insights that inform the process of developing new products and services or improve existing ones. At its best, design uses research methods as well as scientific evidence and creativity tools to tackle wicked problems in fields such as sustainability or health care. However, in order to have a long-term and effective impact design approaches must not only use a systemic point of view for isolated innovations but need to create or at least facilitate system innovations. Following the ideas of Geels and Schot (2007), Kemp et al. (1998) and Bizer and Führ (2015), system innovations are created at the intersection of technological, social and institutional areas requiring a high level of stakeholder engagement and using a transdisciplinary mind set. While this approach is state of the art in current research on design for sustainability (Ceschin and Gaziulusoy, 2016), it offers great potentials for design in the context of health care and aging. This paper presents frameworks comprising of suitable methods and starting points for design research and practise to create, initiate and facilitate system innovations in the context of health and wellbeing.

55224

Vulnerable Ageing Population with Mental Health Conditions Living in Modern Cities – Does Urban Renewal Have an Impact to Well-being?

Eleni Tracada, University of Derby, United Kingdom

Current debate amongst experts on ageing in urban environments focuses on how designers and planners can develop age-friendly cities or communities. Since 2007, World Health Organisation has been supporting 'active ageing by optimizing opportunities for health, participation and security in order to enhance quality of life as people age'. Thus, a global network of age-friendly cities has been launched and particular programmes supported by ongoing research are now focusing on planning of age-friendly neighbourhoods. Cities are aiming at provision of age-friendly services and engagement of local communities in making urban areas healthier and fully inclusive. The author of this paper reviews recent national and international initiatives, such as the ones mentioned above and then, concentrates especially to studies and proposals related to ageing population with conditions such as dementia. As members of a research cluster at their University, the author and her colleagues have set up aim and objectives of a range of research projects which focus on innovative proposals for integration of arts not only in health places, such as hospitals and hospices, but also in urban inclusive neighbourhoods. The author was recently involved with a project/survey of suburban areas of Derby that are in need of revitalisation; survey findings found that especially elderly with conditions in transient or immigrant communities are in desperate need of not only care, but also in need of new planning in areas they live.

55357**Post-War Architectural Heritage for Contemporary Active Ageing**

Christina Malathouni, University of Liverpool, United Kingdom

Several studies to date have explored the benefits of cultural heritage to human wellbeing. These have often focused on mental wellbeing and explored the benefits of engaging with heritage either as a visitor to heritage sites or museums, or as a volunteer in similar settings. Respectively, such benefits may derive from the development of a sense of belonging, or a sense of achievement and the satisfaction of being useful. The particular potential of architectural heritage has not received much attention to date. Participation in city tours or visits to buildings often offers the opportunity for a more active, yet not necessarily strenuous, engagement with built heritage which should be explored for various age groups. In this context, the proposed paper aims to focus on post-war architectural heritage and its possible benefits for contemporary ageing population. Contrary to lagging misconceptions about our most recent architectural heritage, its value is increasingly understood and appreciated not only by heritage and architecture professionals, but also by the general public. What is more, post-war architecture was created within the living memory of contemporary ageing population and can bear personal connotations which, in turn, can act as additional motivation for active engagement. The discussion will include an overview of campaigns to save controversial post-war buildings and how powerful the involvement of a range of different groups of the general public has been. In addition, it will discuss popular ways of exploring architectural heritage and reflect on possible enhancement of available options aiming at active ageing.

Sunday at a Glance
December 8, 2019

The Bartlett Real Estate Institute at Here East

09:30-10:00 Conference Registration & Morning Coffee | Lounge

10:00-10:30 Featured Presentation | Lecture Theatre 1

James W. McNally, University of Michigan, United States

10:30-12:00 Parallel Session I

12:00-13:00 Lunch Break | Lounge

13:00-14:00 Workshop Session

14:00-14:15 Coffee Break | Lounge

14:15-15:45 Parallel Session II

15:45-16:45 Closing Panel Session

Dimitrios Buhalis, Bournemouth University, United Kingdom

Maggie Ellis, European Knowledge Tree Group for eHealth

Ian Spero, Founder Agile Ageing Alliance, United Kingdom

Sunday Featured Presentation: 10:00-10:30

Room: *To be Announced in Final Schedule*

54841

Fear of Falling: Evaluating Elderly Fall Risks Across Multiple European Nations

James W. McNally, University of Michigan, United States

Programs such as the WHO Age Friendly Cities project has attempted to improve overall quality of life and accessibility of urban environments for elderly residents, but many European cities present high risks and fall hazards to aged individuals. High curbs, cobblestone sidewalks, quickly transitioning crosswalk lights, and high-density sidewalk crowds offer multiple challenges to the elderly who routinely walk within an urban environment. This presentation examines data from the Survey of Health, Ageing, and Retirement in Europe (SHARE) study, a multinational comparative survey of aging across 26 European nations and Israel. The presentation reviews the composition of respondents who have fallen in the past six months and compares it to respondents who feel they are at risk of falling. After a broad review of fall risks across Europe, the analysis will focus on falls as reported in four nations: France, Spain, Netherlands, and Germany. All four of these nations are long-standing members of the WHO Age Friendly Cities project. Because SHARE is a longitudinal study, we can look at changes in behaviors across time, allowing us to evaluate shifts in perceptions regarding the risk of falls. Looking at data from 2007 and the latest SHARE Wave in 2017 we will examine whether the active participation in programs aimed at creating a safer environment for the elderly within urban areas results in a measurable change in the perceived risk of falling among elderly respondents.

Sunday Session I: 10:30-12:00

Room: *To be Announced in Final Schedule*

Session Topic: Interdisciplinary

Session Chair: *To be Announced in Final Schedule*

55185

Examining Well-being Among Older Persons With Disabilities Using Sen's Capability Approach: The Case of Trinidad

Bephyer Parey, The University of the West Indies, Trinidad and Tobago

All persons have the right to an adequate standard of living as stated by the Universal Declaration of Human Rights. There is evidence however that older persons with disabilities experience neglect and exclusion which impacts on their well-being. Using Sen's capability approach, the aim of this paper is to examine well-being achievement among older persons with disabilities in Trinidad. A multiphase mixed methods design with three phases is employed. In the initial exploratory phase, functionings of importance are identified via 10 interviews and used to develop an instrument with both closed- and open-ended questions in the subsequent instrument development phase. In the third phase, this instrument is used to measure the extent of well-being achievement and identify its hindering factors. Based on 31 observations, the results indicate that well-being was not achieved fully, or even to a greater extent among the sample. The integrated findings suggest changes in social and health systems to promote well-being achievement among persons with disabilities in Trinidad.

53698

The Long-Term Impact of Functional Disability on Hospitalization Spending in Singapore

Cynthia Chen, National University of Singapore, Singapore

Woon Puay Koh, National University of Singapore, Singapore

Ngee Choon Chia, National University of Singapore, Singapore

Joanne Yoong, University of Southern California, United States

Jian-Min Yuan, University of Pittsburgh, United States

Tze Pin Ng, National University of Singapore, Singapore

Singapore is one of the fastest-aging populations due to increased life expectancy and lowered fertility. Lifestyle changes increase the burden of chronic diseases and disability. These have important implications for social protection systems. The goal of this paper is to model future functional disability and healthcare expenditures based on current trends. To project the health, disability and hospitalization spending of future elders, we adapted the Future Elderly Model (FEM) to Singapore. The FEM is a dynamic Markov microsimulation model developed in the US. Our main source of population data was the Singapore Chinese Health Study (SCHS) consisting of 63,000 respondents followed up over three waves from 1993 to 2010. The FEM model enables us to investigate the effects of disability compounded over the lifecycle and hospitalization spending, while adjusting for competing risk of multi-comorbidities. Results indicate that by 2050, 1 in 6 elders in Singapore will have at least one ADL disability and 1 in 3 elders will have at least one IADL disability, an increase from 1 in 12 elders and 1 in 5 elders respectively in 2014. The highest prevalence of functional disability will be in those aged 85 years and above. Lifetime hospitalization spending of elders aged 55 and above is US\$24,400 (30.2%) higher among people with functional disability compared to those without disability. Policies that successfully tackle diabetes and promote healthy living may reduce or delay the onset of disability, leading to potential saving. In addition, further technological improvements may reduce the financial burden of disability.

55239**Measuring Disability Among Underserved Aging Minority Populations in the US: The Case of Pacific Islanders**

Sela V. Panapasa, University of Michigan, United States

James McNally, University of Michigan, United States

Our ability to engage in comparative research on patterns of disability among the aged, both in the United States and internationally has grown substantially over the past two decades. Unfortunately, this growing understanding of disability patterns has also illustrated the need for increasingly granular data on minority populations due to the inherent heterogeneity within broad racial and ethnic categories. One group that has particularly suffered from a lack of information has been the elderly Native Hawaiian and Pacific Islander population in the United States. Historically, this group has been chronically under-examined in the health literature and little to nothing is known about their patterns of disability or their needs for support services that encourage autonomy and independence. This paper uses the recently released NHPI-NHIS survey fielded by the Centers for Disease Control to explicitly collect health information on this underserved population. This nationally representative health survey is based on the National Health Interview Survey annually fielded in the United States and provides a wealth of information on health, socioeconomic and demographic characteristics of the US population. The paper examines, for the first time, patterns of Activities of Daily Living (ADLs) among Pacific Islander elderly and compares these results to the US population as a whole and major racial groups using the companion NHIS. This paper will be the first examination of elderly health patterns among Pacific Islanders using nationally representative data and will add to our collective understanding of health inequalities among the elderly in the United States.

Sunday Session I: 10:30-12:00

Room: *To be Announced in Final Schedule*

Session Topic: Built Environment

Session Chair: *To be Announced in Final Schedule*

54002

The Attractiveness of the Neighbourhood Park for the Elderly in Social and Perceptual Dimensions Associated with Psychological Benefit

Youmei Zhou, University of Sheffield, United Kingdom

Kevin Thwaites, University of Sheffield, United Kingdom

This study explores the attraction of neighbourhood parks to ageing people to maintain their mental and general health, and to examine the association between the attitudes older park users and the parks' social and psychological benefits. The value of green space has been widely studied, and benefits the health of the elderly, but we must also aim to engage them, drawing them into parks. Semi-structured interviews were conducted to establish older park users' views of their neighbourhood parks, with a sample of 418 respondents from five selected neighbourhood parks in Beijing. For this research, thematic analysis employed both quantitative and qualitative coding approaches using NVivo and SPSS to achieve reliable results. The older park users' experience of their parks' attractiveness was identified and integrated into a conceptual framework. Four types of social interaction were identified as meeting the social-psychological needs of the elderly. Gamma correlation analysis in SPSS shows that mid-level social interaction (doing an activity together) and a deeper level of social interaction (making friends) have a statistically significant positive impact on perceived psychological benefits like confidence, social networking and belonging; a good friendly perceptual dimension of neighbourhood park gives a statistically significantly positive impact on psychological benefit; lower-social interaction (staying with people in parks) also has a statistically significantly positive impact on the relief of loneliness. 72% of older participants showed a desire for friendship in a neighbourhood park.

53908

Active Ageing Within the Long-term Care Facilities in Korea

Yumi Shin, Seoul National University, South Korea

Hyun-Jeong Kim, Yuhan University, South Korea

Jung-Hwa Ha, Seoul National University, South Korea

Active Ageing(AA), as described by the World Health Organization (WHO), focuses on "optimizing opportunities" and emphasizes the social integration and quality of life in old age. However, the concept of AA has not been examined in the context of frail older residents in long-term care facilities(LTCF). We conducted a qualitative study involving in-depth interviews with residents of LTCF(n=5), families of residents(n=3), staffs and owners of LTCF(n=21) and analyzed using directed content analysis. The results revealed that the concept of AA in LTCF involves optimizing opportunities for health, social participation, and security, the three basic pillars of WHO's policy framework for AA. However, the extent to which residents of LTCF can optimize opportunities for AA varied depending on their level of physical and cognitive functioning. Specifically, we found that there were three distinct groups: those who have poor physical and cognitive functioning and mostly bedridden, those who have good physical health but poor cognitive functioning level due to dementia, and those who are cognitively intact but have are limited in physical functioning, mostly due to stroke. Findings suggest that programs need to be developed to pursue social integration using the remaining functions for older residents who have limitations in either physical or cognitive health. For older patients who have limitations in both physical and cognitive functioning, practitioners can help them integrate with societies using the remaining senses such as vision, hearing, and tactile sensation.

54005**Implementing Evidence-base and Inspiration Practice for the Development of Inclusive Mental Health Hubs in the Community**

Eleftheria Savvopoulou, University College London, United Kingdom

Evangelia Chrysikou, University College London, United Kingdom

Mental Healthcare is a sociotechnical system including patients, staff, facilities, processes and medication. Emphasis remaining on jurisdictional processes and medical models retains stigma. Integrated and outpatient services enable early detection and support. This project, initiated by an NHS Mental Health Trust at a stage of building asset redevelopment, aimed at identifying both state of the art and inspirational elements in care to inform a multi-stakeholder and patient inclusive co-design process. Research followed a mix methods approach gathering data on best practice in community mental health facilities globally, with a consideration to the unprecedented ageing of the service user population. Literature review focused on multiple aspects of the environment. Then, best-practice was gathered from grey literature. Finally, we conducted interviews with international experts. The scope included healthcare provision excellence: evidence-base and design innovation. Buildings and practices employing challenging aesthetics and ideas were also included. Data were evaluated using the SCP model, a tool developed for the evaluation of psychiatric environments. Findings were organised under 32 key themes, further digested in two sections. The first comprised design learnings and the second visual material. Findings from key themes were subsequently organised in a matrix of design recommendations for wards and community mental health hubs. These fed the dialogue of designers, stakeholders, clinicians, and service users that followed. By treating design and place-making as therapeutic tool we could challenge the way people view mental health buildings. Creating the means to disrupt a normally segregated architectural dialogue was essential to this process.

55218**Closed-Loop Living Models and Practices for Living Across the Lifespan**

Larissa Lai, University College London, United Kingdom

Evangelia Chrysikou, University College London, United Kingdom

To age in place, the required infrastructure, capital, and services have to all be in place - this has proven to be especially difficult to sustain for vulnerable aging adult communities. This research aims to investigate the application of circular economy concepts and in particular closed-loop systems for potential solutions. These closed-loop systems exploit the possibilities of recycling and reusing resources instead of generating waste and leakage of capital. When applied to healthcare-oriented communities, these should employ practices associated with the communities' physical infrastructure as well as the provision of services, where residents exchange services, produce food and items necessary for daily living with the aid of automated systems and specialists within their own intergenerational communities. We examine relevant literature and existing projects that aim to operate in a closed-loop manner, including an Icelandic ecovillage, which will be studied and presented using anthropological methods. These practices will then be projected in an exploratory mode to create hypotheses for the development of tools to inform more effective aging communities that encourage mutual aid, socialization, participation in activities, and self-sufficiency, reaping with eco-psychosocial benefits for older adults that lead to better health outcomes - all with a decreased amount of inputs needed.

Sunday Session II: 13:10-14:00

Room: *To be Announced in Final Schedule*

Workshop Presentation Session

53981

Supporting Entrepreneurship and Innovation in Silver Economy from an Intellectual Property Perspective: Do's and Don'ts

Yannis Skoulikaris, European Patent Office, Netherlands

In the framework of independence and interdependence, a number of technological developments aim at supporting autonomy and/or intra-group reliance of the aging population. The Silver Economy study prepared for the European Commission's DG Communications Networks, Content & Technology, clearly recommends supporting innovation of products and services targeted towards independent living in age-friendly communities, as well as supporting the digital revolution in health and care. Exploring and exploiting these innovative technologies does not come at zero cost. On one hand, substantial investments are needed, and on the other, resulting products have a demanding set of specifications. Against this backdrop, securing return on investment calls for effective protection of one's Intellectual Property (IP). This highly interactive, hands-on workshop will present the basics on protection of technological advancements' IP, explore how to go about these issues in a structured approach, and harvest the participants' own experiences and ideas on the issue. It can be either a standalone workshop or in combination with a number of papers on Silver Economy products, med-tech, pharma IP, specific devices or applications, which can be brought as case studies to the participants to work with. It is intended to compile and make available the outcome of the workshop's presentation material, insights and recommendations in a short report, with valuable, IP-related do's and don'ts, useful for Academics, Researchers, Entrepreneurs and Olderpreneurs operating in the context of Silver Economy.

54084

Developing an Interactive Mobile Phone Self-report App for Self-management of Fall Prevention of Elderly: Content and Usability Evaluation

Keren Mazuz, Hadassah Academic College Jerusalem, Israel

Digital interventions using M-health, such as Smartphone applications (apps), are becoming an increasingly common way to improve adherence to prevention treatments among elderly. Thus, it is important to investigate how elderly patients feel about and engage with these technologies. This paper based on a qualitative and quantitative study to explore elderly patients' perspectives and usability of a Smartphone app to improve adherence in fall prevention interventions. Falls remain an important risk factor for elderly worldwide; as the population gets older, more older people will fall but less tells their doctor despite the fact that falling once doubles your chances of falling again. This fall type called ""silent events"" and one out of five silent falls does cause a serious injury such as broken bone or head injury and hip fractures. The interactive self-report system app called Age TechCare facilitates patients' understanding of the interconnections between behavior, lifestyle and fall prevention. It designed to manage silent events by documenting them via a digital diary and recommending the user what is best to do to prevent fall. The app aims to increase the elderly know-how and self-responsibility to prevent falls. Knowing what happens and what to do can help to cut down a person's risk of falling. It was found that the mobile phone self-report system was reliable and perceived easy to use.

Sunday Session II: 13:10-14:00

Room: *To be Announced in Final Schedule*

Workshop Presentation Session

55363

Living Architecture: Learning from Time-based Performance Practices

Ava Fatah, University College London, United Kingdom

The human body can be used for all kinds of cognitive purposes, as simulation and modelling systems that enable us to project to unseen things that would otherwise be more difficult to access. Following on this, and as a response to one of the greatest challenges humanity currently faces: the ageing of the population, this paper calls to rethink the role of architectural education and suggest to provide new tools and methods to be incorporated into the architectural education that draw on the human body as a design material. This paper presents an attempt to foster new ways that extend beyond traditionally applied modes in architectural education and supports re-inventing it as a mediated spatial and social experience through integrating space, the body, digital media and computation within the studio context. Here, I suggest that to be able to capture, respond and regulate people's experience, understanding the human body and body movement, is key. This is especially critical within the context of an ageing population. The paper will outline my teaching approach within the context of the studio 'Body as Interface', which draws on lessons from time-based performance pedagogy and throws light on the nature of body-based design process and the explicit bodily involvement by designers as part of the design iterative process towards a time-based architecture. Donald Schon's concept of the 'knowledge in action' and Kirsh's concept of the 'thinking with the body' provide a useful framework for interpreting this teaching approach.

Sunday Session II: 14:10-15:40

Room: *To be Announced in Final Schedule*

Session Topic: Lifespan Health Promotion

Session Chair: *To be Announced in Final Schedule*

55451

Bioclimatotherapy as a Therapeutical Approach on Aging and Gerontology

Sofia Tzouvara, National and Kapodistrian University of Athens, Greece

Climate affects human health more than any other environmental factor. Since ancient times, it was believed that some climates exerted a positive influence on health and served to reinforce human defensive system. Hippocrates is considered the creator and founder of this therapeutic field. Bioclimatotherapy is based on the adaptation to natural environmental factors and the relief from stressful climatic elements, and it is conducted in three bioclimatic zones (near the sea, in upland areas, in alpine regions), which differ in the intensity of their climatic stimuli. The main therapeutical methods are climatic terrain treatment, fresh air rest treatments, aerotherapy, heliotherapy, speleotherapy, thalassotherapy, mud therapy and balneotherapy. Bioclimatotherapy as a treatment is highly indicated in Aging and Gerontology, specifically in dermatological diseases (psoriasis, vitiligo, atopic dermatitis), rheumatological diseases (psoriatic arthritis, rheumatoid arthritis, spondylitis, fibromyalgia), respiratory diseases (asthma, chronic obstructive pulmonary disease, cystic fibrosis), psychiatric diseases, chronic fatigue and pain syndrome. Bioclimatotherapy has been widely used in Ancient Greece and now returns dynamically as a new approach on Gerontology and Anti-aging.

53637

Advantages and Limitations of Older-adult Volunteers in Conducting a Well-being Course as 'Facilitators' in the Provision of a University's Open Studies in Japan

Naoko Suzuki, Tokushima University, Japan

As the proportion of those aged 65 and over has sharply risen in recent years, how to make use of their potential manpower as "volunteers" as well as "workers" has been generating an inordinate amount of attention in Japanese society. This study intends to indicate the advantages and limitations for older-adult volunteers by employing a case study of two female older volunteers. These women have launched a "well-being" course as a pair in the university's open studies programme, consisting of giving brief lectures on various topics and later facilitating small group discussions among the participants in order to stimulate their brains through social participation and conversation. The participatory observations and informal interviews with these older facilitators before and after the course were undertaken by the author, who was also supervising their roles as lecturers and facilitators in the process of the course. The study found that older volunteers can demonstrate competent leadership, particularly in facilitating effective conversations in each of the groups by referring to their life experience and vast knowledge of human nature. Yet, difficulties were observed in terms of classroom control, such as how to deliver a convincing speech, how to respond to unexpected reactions from participants, and how to treat those with special needs. It is therefore suggested that the institution seriously deliberate over and define the role of "volunteers" in this context and consider to what extent they should be further trained so as to be resilient in the face of a various kinds of challenge.

54257

Epidemiological of Health Problem Among Elderly and Need Assessment for Developing Healthcare Environmental Services Program for Elderly People in Town

Sirima Mongkolsomlit, Thammasat University, Thailand

Katiya Ivanovitch, Thammasat University, Thailand

Nontiya Homkom, Thammasat University, Thailand

The purpose of this research was to studies the epidemiology of health problems, need assessment of health problems and factors associated with a health problem in elderly people in the town of Thailand. The study design was a cross-sectional study among 2,027 elderly people. The results found that the majority of elderly people were female (62.8%). There were 54.6% in the young-old group (60-69 years old), 31.6% the middle age-old group (70-79 years old) and 13.7% the old-old group (more or equal 80 years old). Almost of the elderly has underlying diseases around 80.9%, such as hypertension, diabetes, arthrosis, osteoarthritis, cardiovascular diseases, allergic rhinitis, asthma, and paresis. Physical health and mental health need assessment of the elderly in the town was health check-up 82.8%. Social environmental need assessment of the elderly was the elderly club 31.6% and activities for the elderly such as occupational training or exercised 15.9%. Moreover, elderly need for good waste management, community cleaning, and facility management. In conclusion, Health services provided for elderly people by local government should be offered promotion and support the activity both physical health, mental health, and social environment for quality of life among elderly people.

Sunday Session II: 14:10-15:40

Room: *To be Announced in Final Schedule*

Session Topic: Resilience

Session Chair: *To be Announced in Final Schedule*

53661

The Daily Life of Caregivers

Audrey Duceppe, University Laval, Canada

Jean Vézina, University Laval, Canada

The purpose of this study is to investigate day-to-day fluctuations in burden and behavioral disorders, whether these two variables vary together day-to-day. A total of 27 caregivers of people with a major neurocognitive disorder were recruited in the community (age = 66,81 years old, 81,5% women, 81,5% spouse). These caregivers completed a behavioral problem observation grid for 28 consecutive days. This grid aims to specify the type of observed behavior (wandering, apathy, aimless activity, disinhibition, agitation, verbal and physical aggression) as well as the level of disturbance associated with each behavior. The caregiver's Burden Inventory was also completed during these 28 consecutive days. The multilevel analysis confirmed the hypothesis that the feeling of burden and the number of behaviors vary significantly from day-to-day. When this variance is integrated, it is possible to observe that the total number of daily behaviors significantly predicts the feeling of burden. In addition, the results demonstrate a significant random effect of time, suggesting that several trajectories are possible for the feeling of burden. These results indicate that the feeling of burden is far from being the static concept that is described in transversal studies. In addition to the number of disruptive behaviors, time is revealed to be an important indicator of the fluctuation of the feeling of burden. Interventions aiming at the caregiver's wellbeing should consider the dynamic component of the caregiver's burden and the disruptive behaviors.

54086

Progressing Understandings of Resilience Among Older Adults Experiencing Homelessness: A Conceptual Model for Research, Policy and Practice

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Current conceptualisations of resilience are ambiguous with no consensus on the definition nor agreement on how resilience is measured and experienced across populations and sub-groups. Yet, guidance on how to further understandings of resilience, and, develop research, policy and practice to consider resilience experiences across one of society's most vulnerable groups is sparse. Specifically, existing definitions of resilience are non-inclusive of the lived experiences of homeless older adults – individuals who have the most to offer in terms of progressing notions on how some people 'stand up' to adversity and 'bounce back' to a state of physical and psychological homeostasis across the life-course. To address this problem, we use data from a community-engaged research project that examined the health supports needed for individuals experiencing homelessness upon hospital discharge to develop a conceptual model of resilience – informed by Bronfenbrenner's ecological theory. In-depth interviews (October 2017 - January 2018) were conducted with 10 shelter/housing providers, 10 hospital-based social workers, and 20 persons with lived experience of homelessness in Metro Vancouver, Canada. Narratives of significant adversity were shared by those who experienced homelessness while accessing (or attempting to access) healthcare, and by those who provide support to persons without a fixed address at the time of hospital discharge. Amidst reported adversities and challenges were significant accounts of resilience at the individual and community levels. Such rich insights

informed our conceptual model, which can be used to shape research, policy and practice (i.e. service provision) across high-income and lower- and middle-income societies.

53991

Voices of the Unheard: Housing Older People in the Klong Toey Community in Bangkok, Thailand

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This paper presents a study on Klong Toey (KT), a community of informal settlements in Bangkok, located on a large land area owned by the Port Authority of Thailand (PAT), which plans to evict untenured families from its land. PAT is proposing three alternative housing solutions to the affected families. The first option is a cash compensation scheme, to help affected families purchase a housing. The second is the rehousing of the families in new 24-storey residential buildings. The third option is the relocation of the affected families, through the provision of land in the outskirt of Bangkok. A focus group undertaken with the affected families found that none of the options proposed offer a satisfactory solution. Housing, infrastructure and livelihood are interrelated for the families in KT, and these three domains play a crucial role in the health and well-being of its low-income older residents. Families have created a positive livelihood around their existing housing, with their home often supporting their economic activities, such as a grocery or household shops. While there is a recognition by the community to vacate their existing housing, attention should also be given to non-physical meanings of home, such as familial relationships, community support and social networks, all of which provide older urban residents in KT a sustainable livelihood and a sense of place.