



TRAININGS

The training activities aiming at the elderly target group continued during the last quarter of the project. The small group sessions remained to provide the participants with useful knowledge targeting and improved quality of life. Complementing the previous training occasions where the basic exercises introduced to the elderly followed physiotherapeutic principles February and March saw three trainings with a dietary aspect in their focuses. The trainings were led by a dietary expert and their ultimate goal was to introduce the participants (total 54) and the target group in general into the topics of a healthy and more importantly a health-conscious diet. For this a series of ingredients and whole meals were on display that could help them mitigating the effects of various diseases that are more prone to the elderly or even preventing them by applying a more balanced diet. The training occasions were organised in an easy to follow manner, and their interactive nature also facilitated the better understanding of the topic.



Basic mobile lab tests were performed on the participants

A balanced and healthy diet and proper nutrition intake are the most important factors determining a healthy ageing process that are quite challenging to achieve. The reason for most elderly fail living by these factors is either the small quantities and calorie value of their meals as a direct result of the lack of physical activities, or their appetite is affected by some sort of disease or illness. In addition to that the loss of appetite can be linked to the side-effects of their medication or the decline in their tasting and smelling functions that has a negative effect on craving for something delicious. Furthermore, dementia can trigger malnutrition (they simply forget to eat), or they face some physical hindrance (lack of tooth, not strong enough arms to eat, lack of family to feed them etc). These factors on their own as well as in any sort of their combination can lead to malnutrition when the person in question lacks fundamental vitamins, micro nutrients and trace elements essential to a properly functioning body.



Food-tasting at of the training events

Most people lose weight as they age, but the amount lost is variable and those that are already lean, also lose weight. The problem with this weight loss is that it is not only unwanted adipose tissue that is lost but lean skeletal muscle. The loss of lean tissue is associated with reductions in muscle function, bone mass and cognitive function, anaemia, dysfunction of the immune system, slow wound healing and recovery from surgery, and consequentially an increase in both morbidity and mortality. Although lean muscle can be regained in younger people this is often not the case for elderly people. This means that being underweight becomes more of a health problem in older age, than being overweight.

Increasing age has several effects on gastrointestinal function. Secretion of gastric acid, intrinsic factor and pepsin is decreased, which then reduces the absorption of vitamin B6, B12, folate, iron and calcium. Other gastrointestinal problems such as gastritis and gastrointestinal cancers can reduce nutritional status. In addition to the "anorexia of ageing", there are physical, social, cultural, environmental and financial reasons for an inadequate diet.

The training covered the food related risks that can affect circulation leading to a decline in mental and cognitive functions. Such risks include hypertonia and the increased level of blood cholesterol. Since these conditions rarely produce symptoms at a younger age, it is advised to have lab tests done on an annual basis once over 50 years old. If diagnosed on time there are multiple complementary preventive/mitigation strategies including changes in one's life style and diet as well as introducing adequate medication. In line with these aspects, there were a series of basic and fundamental mobile tests performed on the participants checking on their blood sugar and cholesterol levels as well as their blood pressure. The training interactive nature was boosted by food tasting, considering the limited financial capacities of the target group to purchase fancy and often exotic ingredients. For this reason, the food on display were predominantly representing easy-to-prepare salads and smoothies using ingredients that are available even from local farmers. Ultimately some of the most popular recipes were distributed among the participants.

STUDY TOUR

The second study tour organised within the frame of the project, rather unconventionally, did not aim at the Hungarian experts visiting Norway and gathering valuable experience, but on the contrary we have invited Norwegian experts to come and visit our

facilities and learn more about how we do things here, in Hungary. The rationale behind this approach is, that we believe that bringing over a few experts from Norway to talk in front of a large Hungarian audience has bigger impact and financially is more feasible than hauling the same audience over to Norway to gain first hand experience. In addition to that the Norwegian expertise will not be available only to a small group of selected experts but within the frame of the vocational day non-professionals and the residents will have the chance to listen to the Norwegian practices. The second study tour on one hand hosts the program coordinators of the Menn i Helse (Men in Health care) Norwegian national initiative, who will also contribute to the topics covered within the frame of the second gender event. On the other hand, we are pleased that representatives of those institutions visited in September 2016 within the frame of the first study tour have accepted our invitation to present their facilities to the wider Hungarian public as well as to gain first-hand experience about the local social care practices with special attention to the farm-caretaker service. Norway's geography also promotes the small and scattered settlement structure; thus it is expected that certain Hungarian practices could be implemented in Norway as well.

OTHER EVENTS

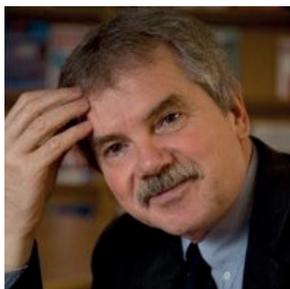
The second event related to the topic of gender equality will have been taking place at the end of April, following an agenda that features significant donor country expertise, that are aiming to complement relevant local competences. The backbone of the event, organised within the frame of the vocational day scheduled for April 27, is the 2-hours introduction to the Menn i Helse national initiative by its two coordinators. The program seeks to overcome,



successfully, the ever-pressing issue of overwhelming female dominance in the health care sector jobs. The Norwegian national success story could spark ideas regarding potential solutions to mitigate the same tendencies in the Hungarian health care sector. The vocational day will facilitate all sorts of group thinking sessions to get one step closer how to implement and which elements of this initiative into the Hungarian everyday practices and what might be the potential challenges such a program in Hungary would face.

FINAL MEETING

The final meeting will take place on the very last business day (Friday, April 28) before the official closure of the project at the very same venue where it kicked-off 12 months earlier. At the half-day meeting the keynote speech will be given by Prof. Imre Semsei, Dean of the Medical Faculty at the University of Debrecen and Head of the gerontology Department. The title of the keynote speech is: Age-friendly Europe: 2020



Prof. Dr. Semsei Imre

After this one hour keynote session a series of presentations will demonstrate the project results to the audience. Hereby we invite all interested parties to attend the programs of both the vocational day as well as the final meeting.

INFRASTRUCTURE DEVELOPMENT



Az elkészült Termálfalu Községi Épület

The building of the community center had been finished by the set deadline currently the necessary audits are taking place to issue the relevant permits for the property. The progress of the building process had been heavily documented and these pictures were made available on the project website, and updated regularly

<http://www.morahalom.hu/beruhazas>

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