



Nordic Gerontological Federation

GeroNord

News on research, developmental work and education within the
ageing area in the Nordic Countries

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LESSONS OF A LIFETIME



The 24th Nordic Congress of Gerontology (24 NKG) will take place in Oslo, Norway, May 2-4 2018. The theme for the 24 NKG – “Lessons of a life time” – indicates that not only the state of being old is important, but also the journey individuals and societies travel to get there. We want to take stock of current scientific knowledge on individual and societal ageing, and we also wish to take a critical look at where we need to focus in the future. In what way can hard-earned lessons provide the wisdom and knowledge to guide us to improve ageing in current and future populations?

We invite you to share your most recent findings and ideas, and to meet old and new colleagues and friends at the 24 NKG in Oslo. All sessions will be in English. The venue is the Oslo Congress Centre – located in the middle of Oslo and close to the city’s many attractions and hotels.

The 24 NKG is organised by the Norwegian Gerontological Society (NSA) and the Norwegian Geriatrics Society (NGF), in collaboration with the Norwegian National Advisory Unit on Ageing and Health, Norwegian Institute of Public Health and Norwegian Social Research (NOVA).

Dear Nordic colleagues

In the Nordic countries, we as researchers have advantages that are lacking in many other countries. Our exhaustive population and care registers give us reliable information on the ageing populations, length of lives and use of health and long-term care. With these data, we can also follow the trends in care use for the whole populations, not only in the more or less selected samples. Another clear advantage is that still today, people in the Nordic countries are usually willing to participate in research studies perhaps more than elsewhere. For example, in all waves of our Vitality 90+ study in Tampere we have reached a participation rate of ca 80%, and in our recently completed survey with 60-69 year-old people, 68% of the sample responded. Among other things, these two advantages have helped the development of ageing research in our five countries. There are many reasons why we can be proud of our gerontological research and why we should make it known in the world even more effectively than we do now. I hope we will hear many excellent Nordic presentations at the IAGG World Congress of Gerontology and Geriatrics in San Francisco in July this year, and, first of all, we have good reasons to invite our international colleagues to participate and learn of the Nordic research in the 24th Nordic Congress of Gerontology in 2-4 May 2018 in Oslo! By the way, the abstract submission for the 24NKG opens 1 September, so it is wise to plan your contribution to the congress already before summer vacation. Please follow the web pages www.24nkg.no.

Some news about our Federation. The long-time secretary of the NGF, Anna Siverskog, after defending her doctoral dissertation, has moved on for new challenges. Anna has been a central and vital force in the NGF activities, in keeping in touch with the member organizations, in organizing meetings, and in editing the GeroNord. Thank you so much Anna, good luck, and see you in Oslo! Our new secretary is Linda Enroth who already has put together this GeroNord issue. She is based at the Gerontology Research Center and the Faculty of Social Sciences at the University of Tampere. Linda's research focuses on health and social inequalities in ageing.

Linda and I believe that GeroNord and the NGF web pages could be used even more efficiently than today. We would like to publish news on new research, particularly by younger researchers and new PhDs, and news informing of meetings and other activities of our member organizations. To facilitate that, we have already decided the dates for the next issues of GeroNord. Next issues will be published in September and December, and the deadlines for sending materials for the secretary are 8th September and 1th December. The submissions to the GeroNord do not need to be lengthy articles, also very short comments and news are most welcome. Let's be in touch!



Marja Jylhä
President of the NGF

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24NKG: Lessons of a Lifetime - Oslo, Norway, May 2-4, 2018

The 24th Nordic Congress of Gerontology (24 NKG) – taking place May 2-4, 2018 in Oslo, Norway – is a core meeting place for researchers and professionals from a broad range of disciplines engaged in ageing and geriatric medicine. We invite you to share your most recent findings and ideas, and to meet old and new colleagues and friends in Oslo!

The theme for the 24 NKG – “Lessons of a life time” – indicates that not only the state of being old is important, but also the journey individuals and societies travel to get there. The diversity of the old population is a result of this journey, and requires a high level of expertise among caregivers and those involved in the treatment of geriatric conditions and chronic diseases. “Lessons of a life time” also reminds us that older people are heterogeneous, and that people working with geriatric medicine and elderly care need to take into account more than just the obvious symptoms older individuals may present in order to give optimal treatment and care.

We want to take stock of current scientific knowledge on individual and societal ageing, and we wish to take a critical look at where we need to focus in the future. In what way can hard-earned lessons provide the wisdom and knowledge to guide us to improve ageing in current and future populations?

Population ageing is of great concern in most modern societies, both within the micro-cosmos of families and the macro-cosmos of society: Are families able to balance the needs of older and younger generations? Are the health care professionals ready to meet the complexity of geriatric patients? In the context of the Nordic welfare states, we need to know more about the strengths and weaknesses of current care regimes, and the potential for developing more sustainable models for an ageing population. We know even less about the opportunities of population ageing, which may be equally urgent to explore, as longer lives and ageing populations are characteristics of modern society, which we shall have to adapt to eventually. For these purposes, we explicitly welcome comparative approaches to ageing research across (historical) time and (geographical) context. More information will be available shortly on our website www.24nkg.no.

KEY DATES

Submission Symposia Deadline:	15 th November 2017
Submission Abstracts Deadline:	15 th December 2017
Abstract Decisions:	January 2018

Confirmed keynote speakers

- Ursula Staudinger – Director of the Columbia Aging Center and Professor of Sociomedical Sciences at Columbia University, New York.
- Camilla Stoltenberg – Director General of the Norwegian Institute of Public Health.
- Mika Kivimäki – Whitehall II Study Director and professor of social epidemiology, Department of Epidemiology and Public Health, University College London, London, England.
- Sandra Torres – Professor in Sociology and the Chair in Social Gerontology at Uppsala University in Sweden.
- Karen Andersen Ranberg – Professor of Geriatric Medicine at University of Southern Denmark and Odense University Hospital in Denmark.
- Maria Krogseth – Postdoc, Oslo Delirium Research Group, Department of Geriatric Medicine, Oslo University Hospital, Oslo, Norway.

Nils Holand
President of The 24th NKG

The date for 25th NKG in Iceland has been set

25th NKG will be 3-6 June 2020

Welcome to Gerontological 2017 congress to Turku!

Gerontology 2017 –Congress, 9th edition will be held in Turku in 7th-9th of June 2017. The theme of the congress is “Being old in the 100 years old Finland”. With the selection of the theme, we want to celebrate the achievements of the Finnish society in benefitting the citizens, ageing population and increase of welfare. <http://gerontologia2017.fi/>



This congress is aimed for the researchers and professionals aiming to raise questions, provide answers and presenting the latest Finnish research results in gerontology and geriatrics. The programme of the congress includes the latest innovations and achievements in the area and also provides a forum for discussing new developments.

We have a pleasure to learn from our international and national keynote speakers. Professor Chris Gastmans from the Katholieke University of Leuven, Belgium speaks about Dignity-Enhancing Care for Persons with Dementia: A Foundational and Clinical Ethical Framework

Finbarr Martin, Professor of Medical Gerontology, Kings College London, UK, speaks about the topic: “Does frailty assessment help us achieve better outcomes for older patients?” He is currently the president-elect of European Union Geriatric Medicine Society (EUGMS)

Thomas Scharf, a Professor of Social Gerontology in the Institute of Health & Society at Newcastle University, UK, speaks about the topic: “A focus on social relationships within an ‘age-friendly’ context”.

Please see more information in the congress webpage <http://gerontologia2017.fi/kutsupuhujat/>

The programme includes more than 100 oral presentations and plenty of poster presentations during the three days.

Especially we want to highlight older people’s capacities, and the development of care and services that best support older individuals’ health, well-being and independent living.

The organizers are the five Finnish associations: Kasvun ja Vanhenemisen tutkijat ry, Societas Gerontologica Fennica ry, Suomen Geriatri ry, Suomen muistiasiantuntijat ry, Suomen Psykogeriatrinen yhdistys ry and University of Turku, Department of Nursing Science.

On behalf of organizing associations and the organizing committee you are all warmly welcome to 9th Gerontology 2017 –Congress held in Turku in June 2017.

Riitta Suhonen
President of Gerontological 2017 Congress

Queer lines: Living and ageing as an LGBTQ (lesbian, gay, bisexual, transgender, queer) person in a heteronormative world

The 25th of November 2016, the dissertation *Queera livslopp: Att leva och åldras som lhbtq-person i en heteronormativ värld*, was defended by Anna Siverskog for a PhD in Ageing and Later Life, Linköping university, Dept. of Social and Welfare Studies, National Institute for the Study of Ageing and Later Life (NISAL), Sweden.

This study is based on life-course interviews with 20 LGBTQ-identified people, born between 1922 and 1950, 62-88 years old at the time of the interviews. Older LGBTQ-identified people have experienced tremendous changes in how gender identities and sexualities have been re-negotiated during their lifetimes. Even though there is a small but growing field of LGBTQ ageing studies, queer studies rarely problematizes age or ageing. At the same time, the gerontological field often assumes heterosexuality and cis-gender experiences. This dissertation uses a life course perspective and focuses on queer lines, life courses that move beyond the heteronormative expectations of how one should live one's life in relation to gender identity and/or sexuality.

The overarching aim of the study is to explore experiences and meanings of living and ageing as LGBTQ in a changing heteronormative world. Thematic analysis is used to analyse and interpret the empirical material. The theoretical framework in this study refers to critical gerontology, feminist theory and queer theory. The analysis points to how experiences of gender identity and sexuality relate to historical and geographical contexts, and change over time. It illustrates how gender, age and sexuality intersect with heteronormative expectations of what a life is



supposed to be like. To not live up to these expectations by not adjusting to binary gender norms or not getting married and having children may have large social as well as material consequences. These include having to hide one's gender identity or sexuality, being socially repudiated and discriminated against or being subject to physical violence. Despite these conditions, the interviewees have oriented toward other lines - other ways of living where there is room for their gender identities and sexualities.

The interviews point to the significance of social relations, networks and LGBTQ communities. LGBTQ groups and meeting places that have been created over time have facilitated in finding these other lines. Most of the narratives on ageing are similar to those of other people the same age, but there are also narratives that are specific to LGBTQ experiences. For some the ageing body has ruled out the possibility of undergoing transgender-specific surgeries. Others are worried about encountering homophobic or transphobic treatment when in need of care. The results point to the importance of including critical approaches of gender and sexuality within gerontology and life course studies, and to including materiality when theorizing the ageing body. The dissertation also constitutes a theoretical bridge between gerontology, feminist theory and queer theory and contributes to more complex understandings of intersections between age, gender and sexuality to these fields.

Full text available at: [http://liu.diva-portal.org/smash/record.jsf?dswid=7865&faces-redirect=true&language=sv&searchType=SIMPLE&query=&af=\[\]&aq=\[\]&aq2=\[\]&aqe=\[\]&pid=diva2%3A1046379&noOfRows=50&sortOrder=author_sort_asc&onlyFullText=false&sf=all](http://liu.diva-portal.org/smash/record.jsf?dswid=7865&faces-redirect=true&language=sv&searchType=SIMPLE&query=&af=[]&aq=[]&aq2=[]&aqe=[]&pid=diva2%3A1046379&noOfRows=50&sortOrder=author_sort_asc&onlyFullText=false&sf=all)

Obesity in old age: A bad or good thing?

The 7th of April 2017, the dissertation *Obesity in the Oldest Old: Associations of body mass index and waist circumference with physical functioning and mortality*, was defended by Inna Lisko for a PhD at the Faculty of Social Sciences (Gerontology Research Center) at the University of Tampere, Finland.

Low body weight is a greater concern in terms of mortality than general obesity among 90-year-old persons. However, a central finding from the doctoral study of Inna Lisko was that abdominal obesity was associated with both mortality and low physical functioning especially among women.



Evidence on the adverse health effects of obesity is strong until middle age. However, in many studies on older adults, mortality risk has shown to be higher among overweight and obese persons than among normal weight persons. On the other hand, obesity is associated with low physical functioning in both younger and older adults. Yet, there is only scarce data on the association of obesity with mortality and physical functioning among the oldest old, i.e., persons aged 85 years and older who are the fastest growing segment of the population in the developed countries.

The aim of the doctoral study was to examine the associations of both low and high body weight with physical functioning and mortality in the oldest old, with body mass index (BMI) indicating general obesity and waist circumference indicating abdominal obesity. Furthermore, the aim was to investigate the combined associations of obesity and inflammatory status on mortality in the oldest old. Data for the study were derived from the Vitality 90+ Study, including 596 participants living in the city of Tampere, Finland.

The study showed that among women, the longest survival was among those who had a low waist circumference combined with overweight (BMI 25.0–29.9 kg/m²) or low inflammation, indicating low disease burden. The number of men was low in these examinations but among them normal weight (BMI 18.5–24.9 kg/m²) and low waist circumference were associated with an increased mortality risk regardless of inflammation.

Women who had a large waist circumference, often had poor physical functioning. However, among those who had good physical functioning, general obesity or abdominal obesity did not predict the development of disability. Among women, it was rather those who had a low waist circumference that developed disability in activities of daily living. The results of this doctoral study emphasize the risks associated with low body weight. In the health care and health services, malnutrition and low protein intake should be screened more and nutritional care provided when needed.

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Link to the doctoral thesis: <http://tampub.uta.fi/handle/10024/100814>

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