

The role of informal (adult) education in the promotion of successful ageing*

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Abstract

Framed by a community-focused and ongoing, or lifelong, vision of education, this paper aims to demonstrate the importance of adult education in the promotion of successful ageing, based on an action research project at a Private Institution for Social Solidarity (Instituição Particular de Solidariedade Social) in Northern Portugal. The project involved a group of twenty-five retired and partially retired adults, aged fifty-six to seventy-five. Qualitative and hermeneutic interpretive research paradigms were considered to be the most appropriate for this project, while the preferred methodology was participatory action research, for its capacity to promote participation and engage the social actors involved. In light of the interests, needs and potential of the participants, the action took the form of three workshops: Computer Skills; Pedagogy & Healthy Living and a Topical workshop. These consisted of activities based on active, participative methodologies that foster effective, willing participation, providing opportunities for learning, socialising and recreation and transforming the daily lives of the participants. The project highlights the processes involved in educational intervention programmes for older adults and shows positive outcomes in terms of learning, interpersonal relationships, and improved wellbeing, signalling the urgent need for widespread third age educational provision as a means of promoting successful ageing.

Keywords

Adult education – Community action – Successful ageing.

* The authors take full responsibility for the translation of the text, including titles of books/articles and the quotations originally published in Portuguese.

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Introduction

A new perspective on ageing

Despite the fact that the human body becomes more vulnerable in old age, the ageing process itself is increasingly losing its negative connotations, as the result of a vast panoply of studies in recent decades (ABELES; GIFT; ORY, 1994; BALTES; BALTES, 1990; HAZARD, 1995; ROWE; KAHN, 1997a), which tackle the question of ageing from a more positive perspective. This strand of research, strongly backed by the *MacArthur Foundation Research Network on Successful Ageing* in the United States in the 1980s, rapidly spread to other countries and, in the wake of research by Rowe and Kahn (1987), forged a new paradigm for conceptualising and experiencing the ageing process, based not only on loss and decline, but instead on a more wholistic approach, highlighting biological, psychological, and social dimensions.

Based on their research, Rowe and Kahn (1987) propose a definition of “usual ageing”, understood to be non-pathological. However, they make a distinction between two types of ageing: “usual”, which refers to individuals whose ageing process is not pathological, but carries a high risk of disease, and “successful”, referring to individuals whose ageing process carries a low risk of disease and high functional potential (ROWE; KAHN, 1987). A decade after the initial study, focusing their research on the criteria and factors that determine successful ageing, Rowe and Khan (1997a, 1997b, p. 38) present a new, broader, approach to the concept of successful ageing, which combines three elements; “(...) i) low risk of disease and disease-related disability; ii) maintenance of high mental and physical function, iii) and continued engagement with life”.

Despite some minor variations, the scientific community and the wider public still believe that successful ageing presupposes the fulfilment of these three basic criteria: health, a high level of physical and mental function and participation in society (FONTAINE 2000; JACOB, 2007; PAÚL; FONSECA, 2005; RIBEIRO; PAÚL, 2011; ROWE; KAHN, 1997a, 1997b). In Rowe and Kahn (1997a, 1979b), the concept of successful ageing is founded on the idea that the ageing process is not solely determined by physical factors and/or genetic/biological probabilities. The process is also strongly determined by sociocultural factors, (BALTES, 1987), active engagement in life and the impact of human intervention, which can be advantageous or detrimental to a successful ageing process.

This approach to understanding the ageing process is supported and reinforced by pioneering research in the field of developmental psychology, notably studies by Baltes (1987) and Baltes and Baltes (1990), who classify ageing according to three categories: i) pathological – where disease, pathologies and developmental dysfunctions are present; ii) normal – referring to the inevitable changes associated with ageing; iii) optimal – referring to an ageing process characterised by a low risk of disease and disability, a high level of physical and social function and active participation in life (BALTES, 1987). Optimal ageing appears to be associated with the new understanding of the potential for development at every stage in life, in a dynamic relationship between growth (gains) and decline (losses) (BALTES, 1987; BALTES; BALTES, 1990). Thus, in old age as at any other

phase of life, there is a balance between gains and losses, which will be more positive the more an individual chooses activities and behaviours that favour a successful ageing process. Within this context, in order for human beings to continue to develop throughout the ageing process and old age, they must have access to activities, programmes and educational/cultural projects that promote learning, knowledge and skills, offer them benefits, or help them deal with their new conditions of life, in other words, gains with the potential to compensate for the losses intrinsic to the ageing process.

We believe that with their focus on enabling or empowering individuals to age successfully, the most recent European documents (EUROPEAN COMMISSION, 2012; WORLD HEALTH ORGANIZATION, 2001, 2002, 2013; PORTUGUESE DIRECTORATE GENERAL OF HEALTH, 2015; CALOUSTE GULBENKIAN FOUNDATION 2014), follow the same line of thought, guided by the idea that successful ageing is also a matter of education.

The evolution of the concepts of “ageing” and “education” appear to have converged, forming an alliance that is increasingly visible in subject-specific literature and international documents, which identify education as an incredibly important factor in promoting successful ageing.

Education during and for the third age

Today, underlying the concept of education is the concept of Lifelong Learning, understood in its genuine sense of “*life long education and learning*”, which appeared for the first time in the Declaration of Nairobi (UNESCO, 1976). In this document, education is viewed as an ongoing, community-focused process, a driver of individual and collective development. This vision of education assumes that humans are unfinished beings, constantly making and remaking themselves according to the events they experience and the new knowledge and learning they acquire throughout their lives. From this viewpoint, Lifelong Education requires the restructuring of the existing (predominantly formal, school-based and youth-orientated) education system and the strengthening of educational opportunities outside the traditional school system, in which learners, active agents in their own learning, experience the symbiotic processes of life and of education/training simultaneously in order to develop fully as individuals. As such, education as an ongoing, community-focused process, throughout the life of an individual can and should be understood as a “long and manifold process embedded in the life of each individual” (CANÁRIO, 1999, p. 11), by which he or she acquires the skills and knowledge required to comfortably adapt to his/her current stage of life, while participating effectively in the society.

In Portugal, despite its prominence, adult education provision within the formal education setting is just one aspect of a varied range of socio-educational initiatives which, though less widely acknowledged in society, play an important role in promoting education, social transformation, and cultural enrichment (GUIMARÃES; SILVA; SANCHO, 2000; LIMA, 2007). These informal education initiatives, which aim to transform the living conditions of social actors, are based on, and centred around, existing problems, using human and material resources from within the community in local development

and community projects, the majority of which are led by civil society organisations (LIMA, 2007; MELO, 2006).

As a process that fosters wholistic human development and is understood as a right insofar as it prepares its beneficiaries to live well at every stage of life, education in the third age, a period in which living conditions undergo drastic change, has become an important area of educational action. Beside turning free time into an opportunity for education/learning, through artistic, physical, and cultural activities (CACHIONI, 2003; VENTOSA, 2009), third age education promotes information and knowledge while developing motor, cognitive and social skills that equip the elderly population to better adapt to the changes that characterise this phase of life. Acknowledging that cognitive capacity remains active even in very old age (LEMAIRE; BHERER, 2012), many authors have identified education as a determining factor in successful ageing (SIMÕES, 2006; VENTOSA, 2006; 2009; CUENCA CABEZA, 2004; OSÓRIO, 2008; PINTO, 2008; NERI, 2004; CACHIONI; NERI, 2004; JACOB; FERNANDES, 2011).

Echoing the views of authors such as those named above, in the first two decades of the 21st century, several international organisations have also recognised the role played by education, understood as an ongoing, community-focused process, a tool for promoting ability, with the potential to address the challenges society faces today. These documents outline the measures required to allow all humans to develop their potential, irrespective of their age, gender, race or social class, with a particular focus on the adult and elderly population. As Patrício (2018) notes, these recommended and seek to increase the visibility of programmes involving lifelong education/learning; education on healthy living; awareness, information and learning about the factors that promote a longer active and engaged life; intergenerational relationships; active ageing; access to new technologies, etc., focused on the acquisition of the knowledge and skills needed for a longer healthy, active and engaged life (UNITED NATIONS, 2002, 2008; COMMISSION OF THE EUROPEAN COMMUNITIES 2002; EUROPEAN COMMISSION 2018a, 2018b; WORLD HEALTH ORGANIZATION, 2005, 2013; UNESCO, 2010).

The impetus behind these programmes must be the holistic development of all human skills and abilities (literacy; science and technology; digital skills; language skills; personal and social skills; entrepreneurial and civic competencies and cultural and artistic expression) in order to prepare individuals for full and effective participation in society (EUROPEAN COMMISSION, 2018b; PATRÍCIO, 2018).

Among these skills, digital literacy has emerged as a new priority in education/learning settings and content and is therefore become a necessity in the field of education. This new element of the right to education must be accessible to all ages – children, young people, adults, and elderly people (RODRÍGUEZ, 2008; PERÉZ TORNERO, 2013), not only to promote access the job market, but also to foster social and civic cohesion, participation, and intergenerational relations, and is therefore as important as literacy or numeracy. Both personally, as a means of communication and interaction, and professionally, information and communication technology (ICT) now plays a fundamental role in society, woven into the everyday lives of individuals, workplaces and communities. Therefore, in today's high-tech digital society, the acquisition of computer skills and digital literacy is a key

factor in adaptation and integration, especially for adults and elderly adults (RIBEIRO; MEDEIROS, 2016; CALVO et al., 2017; PEREIRA; NEVES, 2011; PÉREZ TORNERO, 2013; CARMO; ZAZZETA, 2016; EUROPEAN COMMISSION, 2012; EUROPEAN COMMISSION AGE, 2012).

They are, without doubt, the population segment most strongly impacted by the digital revolution, experiencing major difficulties in using devices which, consequently, deprive them of their benefits, generating feelings of exclusion from this progress of change (PEREIRA and NEVES, 2011). Following international recommendations, Portugal, like other developed and developing societies, has seen a rise in programmes, projects and initiatives aimed at promoting digital skills among adults and older adults, in order to ensure the digital inclusion of this bracket of the population, enabling them to benefit from technological advances (GOMES, 2014).

Digital literacy among retired and partially retired older adults has emerged as a key factor in promoting successful ageing, as it represents a new means of accessing information, learning and knowledge, as well as facilitating communication and interaction with family and friends, thus mitigating isolation and loneliness. By promoting the active participation of elderly people in the information society, the use of ICT helps increase self-esteem and feelings of participation and belonging, resulting in increased independence, social integration and satisfaction, wellbeing, and quality of life (PALMA, 2013; PEREIRA; NEVES, 2011).

Research design and methodology

Based on theoretical framework set out above, we developed an action research project focused on the promotion of successful ageing through physical/motor and cognitive stimulation and the (re)activation of interpersonal relationships using ICT.

Description of the context

The action research project described in this paper was delivered in an *Instituição Particular de Solidariedade Social* (Private Social Solidarity Institution - IPSS) in the North of Portugal, which promotes education/learning among older adults through community-based facilities for adult education and the elderly, helping them retain their independence and quality of life.

Participants

The project involved twenty-five (25) participants, eighteen (18) female and seven (7) male, aged between fifty-six (56) and seventy-five (75).

The age bracket with the largest number of participants, thirteen (13), was sixty (60) to seventy (70) years. Thirteen (13) participants were married; seven (7) widowed; two (2) single; two (2) divorced and one did not respond to this question.

In terms of their academic history, four (4) participants attended school for a short time and obtained no academic qualifications; one (1) completed 3 years, twelve (12)

completed 4 years; five (5) completed 6 years and three (3) completed 9 years. In terms of employment, the participants worked in roles requiring few qualifications, such as builder; tailor; market stallholder; cleaner and driver.

Data collection methods and tools

This educational project is based on a qualitative interpretive/hermeneutic paradigm, as it seeks to understand social phenomena and actors. Its methodology focuses on describing and interpreting the everyday situation of the individuals, in order to understand their experiences and perceptions, as well as the meaning that they attribute to them, with a view to generating individual/collective (trans)formation, the social actors becoming drivers of their own change (SERRANO, 2004; BOGDAN; BIKLEN, 2013).

The research/action is guided by methods belonging to the qualitative paradigm, in particular ethnography and participative action research. Ethnographic methods, which require detailed observation and description of factors such as culture, ways of life and social structures, help us understand the individual/group behaviours of the participants and the context in which they exist (SERRANO, 2004). Participatory action research, a methodology that simultaneously combines research and action and engages social actors in resolving their own problems by improving their awareness of them and providing the skills and techniques required to transform situations and contexts (SERRANO, 2004; ANDER-EGG, 1990; BOGDAN; BIKLEN, 2013), was considered an appropriate methodology for a socio-educational intervention project that aimed to change conditions of life.

Various qualitative research techniques were used to collect the data, including ethnological-style direct participant observation; surveys conducted by means of questionnaires; documentary research and analysis; informal conversations; logbooks and photographic records.

Due to their active and participatory nature, the activities were delivered using intervention techniques, in the form of socio-cultural activities. According to the classification devised by Ander-Egg (2000), group techniques, information/communication techniques and recreational activity-based techniques were used.

With regard to data processing, simple descriptive statistical analysis helped us understand the characteristics of the individuals and social phenomena that are the subject of this action research project, by studying characteristics and regular processes and behaviours, (PARDAL; LOPES, 2011) such as age, sex, academic qualifications, and profession. Content analysis was important when analysing the qualitative data resulting from the open-ended questions in the questionnaire, permitting a systematic and structured analysis of the information following the content analysis procedure established by Bardin (2014).

Procedures

The action research project was structured around three phases, each of which encompassed various procedures:

I. Phase one - Corresponding to the period in which we familiarised ourselves with the context, including diagnostic evaluation, a phase that lasted two months during which we

sought to identify the interests, motivations, needs and potential of the participants, in order to design a programme of intervention capable of driving positive change in the conditions of life of the participants. During this phase, all participants were also introduced to the institutional framework and purpose of the project, as well as relevant ethical issues, in particular the voluntary nature of participation in the study, the protection of their identity, the confidentiality of data collected and the (anonymous) dissemination of the results.

II. Phase two - Corresponding to the action planning and delivery period, which lasted approximately ten months. Having identified the interests, motivations, needs and potential of the participants through observation, informal conversations and analysis of data collected using the questionnaire, which revealed a particular interest and enthusiasm for ICT, information/education around healthy living and current affairs, we began planning actions and strategies that would enable us to achieve the proposed goal: to promote the holistic development of the participants. This took the form of three workshops: an workshop, a Pedagogy and Healthy Living workshop; and a Topical Workshop.

Table 1 – ICT Workshop

ICT WORKSHOP - 17 Participants
Objectives
<ul style="list-style-type: none"> • To provide the skills required to use new technologies; • To foster self-esteem and an interest in using new technologies; • To promote interaction and communication; • To stimulate cognitive function.
Activities delivered
<ul style="list-style-type: none"> • Introduction to ICT – Explanation of the components of a desktop computer (keyboard, mouse, monitor, etc.); distinguishing between hardware and software; explanation of the development of the computer; start-up/shutdown; the desktop and shortcuts; creating folders; the recycle bin. • Introduction to Microsoft Word – Copying texts to practice typing; formatting texts by exploring “basic” tools. • Introduction to the Internet – Understanding search engines and searching the internet. • Google Maps – Exploring places of personal interest: parish, city, country, and places visited in the past. Some participants searched for places they would like to visit and others searched for places they had already visited, such as the Buddha Eden Garden. • How to retrieve and save content from the internet – Participants explored healthy recipes, museums, and places of interest in their city of birth, to prepare for a visit. • Creation and maintenance of an email account – Participants created an email account in order to Exchange information, content, and photographs among themselves and with friends and relatives. In several sessions, they practised attaching photographs and text files, learning to send and download files. • Youtube - Participants searched for songs, recipes, episodes of soap operas and other programmes according to their personal interests. • Participating in an online game: Kahoot – An activity involving an online general knowledge quiz, in which each participant had to select the correct answer to the question using his/her computer. • Managing files and copying them from a USB stick, mobile phone, or camera – Participants copied photographs and files from external devices to the computer and vice-versa. • Accessing online media – in several sessions, participants accessed various media. In terms of the press, they accessed both local and national newspapers. In terms of radio, the participants preferred local stations, with the exception of Rádio Comercial, and appreciated learning how to access programmes they had missed when they were originally broadcast. • Chat and videocalls – Using email, a chat was created, which was used to share information and made videocalls. • Creating a Facebook account – How to change profile picture; like and comment; share content; find friends and make friend requests; distinguish between profiles and pages; classify pages. • Creating a Dropbox account – Storing content online, which can be accessed from anywhere, even on your mobile phone.

Source: Survey data

Table 2 – Pedagogy and Healthy Living Workshop

PEDAGOGY AND HEALTHY LIVING WORKSHOP - 12 Participants
Objectives
<ul style="list-style-type: none"> • To awaken creativity, the senses and memory; • To provide information on the prevention of illness; • To develop feelings of togetherness, friendship and sharing; • To provide opportunities for learning, discovery, fun and relaxation;
Activities delivered
<ul style="list-style-type: none"> • Mental exercises – Participants completed exercises such as filling in missing words, decoding a poem written in numbers, spotting the differences between images, solving riddles and proverbs. • Activity: What is healthy living? – The participants brainstormed the idea of “healthy living”. Next, they compared the brainstorm to the WHO definitions of health, quality of life, wellbeing, lifestyle, and healthy living. This was a starting point for discussion of facts and myths about health. • Food board game – A game based on the “jogo da Glória”*, on the topic of health eating. • Healthy eating: myths and interesting facts – This session explored tips and interesting facts about healthy eating, understanding food labels and the difference between “light” and “diet”. • Lateral thinking – The first part of this exercise was expository, with an explanation of lateral thinking. The second stage involved completing exercises and solving puzzles to stimulate lateral thinking. • Strokes – This activity had both a theoretical element and a practical element. The former focused on the acquisition of knowledge regarding the definition of stroke, the symptoms to look out for and the causes and consequences. The second part was a practical exercise involving a glass of water, straws and cotton, which illustrated how a blood clot prevents normal blood circulation. • Bingo – This activity aimed to stimulate concentration and memory. • Trial yoga class. • The senses – an exploration of the senses of smell, taste, and sight. • “Let’s move” – physical exercises • Communication: verbal and non-verbal – the session began with a short introduction to communication. Next, the group worked on various types of non-verbal communication in order to transmit a message non-verbally. • Teamwork – Various competitive team games to stimulate cognition.

* “Jogo da Glória” is a board game that can be themed around any topic, in this case healthy eating. Players roll a dice then answer the question matching the number shown on the dice. If they answer correctly, they move the corresponding number of squares forward on the board. If they answer incorrectly, they move the same number of squares backward.

Source: Survey data

Table 3 – Topical workshop

TOPICAL WORKSHOP – 11 Participants
Objectives
<ul style="list-style-type: none"> • To provide a space for sharing and exchange of values and culture; • To promote new learning/knowledge; • To appreciate history, experience, culture, and knowledge • To develop critical thinking and creativity;
Activities delivered
<ul style="list-style-type: none"> • Session on healthy eating – Session with a dietician dedicated to healthy eating • Spotlight on sun protection and discussion – Discussion session on sun protection (benefits and harm caused by the sun, the importance of protecting ourselves from the sun, sayings and interesting facts about the sun). • The 6 thinking hats – Session dedicated to Edward Bono’s concept of the 6 thinking hats. The aim of this activity was to equip participants how to solve problems creatively. The approach involved thinking from the perspective of your hat. Each hat had a specific colour and characteristics: the white hat presents the facts; the blue hat moderates; the black hat considers the negatives; the yellow hat considers opportunities and benefits; the red hat considers emotions and feelings; and the green hat represents creativity. • Trips – The group visited cultural sites and monuments chosen by the participants.

Source: Survey data

III. Phase three - Assessment - This process seeks to understand and qualify the outcomes of the action research project (failures and successes). Continuous assessment took place throughout the duration of the project (SERRANO, 2008), over the course of twelve months.

In the initial phase, the assessment gave rise to the identification of needs, interests and potential, through observation, informal conversations and a questionnaire, data from which enabled us to familiarise ourselves with the potential participants and understand their interests and motivations.

Secondly, continuous assessment was carried out by means of questionnaires, informal conversations, and participant observation. This type of assessment was used throughout the intervention, in order to determine whether the processes and approaches adopted were helping us move toward the intended goals (SERRANO, 2008), enabling us to identify problems and self-correct.

Lastly, a final assessment was conducted by questionnaire, in order to collect data to determine whether the objectives had been fulfilled successfully and identify possible areas for improvement.

Presentation and discussion of the outcomes

In this section of the paper, we present and discuss the outcomes of the final assessment, gathered using a questionnaire completed by the participants, which included open-ended and closed questions. Note that we have chosen to group information according to the three main themes arising from the participants' comments on the impact of the project: "Increasing wellbeing"; "Learning" and "Interpersonal Relations/Interaction".

According to the participants, the "Increase in Wellbeing", was one of the greatest benefits of the project, as it improved both their quality of, and satisfaction with life. This is evident in the following comments: "Being in good company improves our wellbeing and helps us escape our everyday routines, so for me it's better than a sedative" (Q11); "Getting out of the house, where I wasn't doing much. Now I feel better"(Q19); "This routine has helped me feel happier and make new friends, as I am someone who likes to socialise and get out" (Q1); "It has helped me overcome some health problems" (Q3); "Getting out of the house, socialising more, finding out about the topics covered"(Q5); "The workshop helped me get out of the house, so I feel more active" (Q6).

The feedback quoted demonstrates that educational action not only helps mitigate the isolation and inactivity of daily routine, very common at this stage of life, but also promotes socialising and interpersonal relationships, as well as a more active and positive attitude, which translated into a perceived improvement in wellbeing and satisfaction with life, as suggested by authors including ANTUNES (2016); ANTUNES; ABREU (2017); SIMÕES (2006); VENTOSA (2006, 2009); CUENCA CABEZA (2004); OSÓRIO (2008); PINTO, 2008; NERI, 2004; CACHIONI; NERI, 2004; JACOB; and FERNANDES, 2011, who view educational provision as a key factor in successful ageing.

When analysing the data around participant views, "Learning" also emerged as one of the strong points of the project. All participants surveyed (N=17) state that they learnt

something new, supporting the beliefs of scholars who argue that the potential for human development exists throughout life (LEMAIRE; BHERER, 2012; BALTES, 1987; BALTES; BALTES, 1990).

When we attempted to ascertain what type of knowledge participants had acquired, two subcategories emerged: “general knowledge” and “knowledge of information technology”.

The results appear to reflect the views of authors such as SIMÕES (2006); VENTOSA (2006, 2009); CUENCA CABEZA (2004); OSÓRIO (2008); PINTO (2008); NERI (2004); CACHIONI; NERI (2004); JACOB; and FERNANDES, 2011, who argue that even in the later stages of life, it is possible to continue learning. This is reflected in the following comments: “I learnt many things I didn’t know before and had never even heard of. Now I am more open minded (...)” (Q2); “New things I didn’t even know existed” (Q3); “I remembered many things and learnt new ones (...)” (Q1); “(...) it was quite important remembering History and other subjects” (Q6); “I learnt to be more independent, pay closer attention to things and put my ideas into practice” (Q5); “(...) learning things I never thought I’d do in my life is great” (Q17).

Framed by the views of authors who identify new educational needs in today’s high-tech society, particularly in terms of Information and Communication Technology (ICT) and in reference to adults and older adults (RIBEIRO; MEDEIROS, 2016; CALVO *et al.*, 2017; PÉREZ TORNERO, 2013; CARMO; ZAZZETA, 2016; GOMES, 2014), this project helped a group of people from this population segment acquire digital skills and fostered e-inclusion. It also generated positive findings regarding the capacity to acquire digital skills at an older age, as illustrated by the following feedback: “I learnt a bit about IT in general and other things” (Q8); “It was worthwhile participating in the workshop. I learnt and developed some computer skills” (Q12); “I improved my computer skills” (Q13); “I quite enjoyed all the classes I attended and they helped me learn more about computers” (Q16).

Echoing the aforementioned authors, Palma (2013) and Pereira and Neves (2011) note that the acquisition of digital skills promotes more active participation of older people in society, contributing to increased self-esteem, social inclusion and satisfaction with life, a view that is further corroborated by this paper, an increase in wellbeing having been identified as the greatest benefit of the project.

From the point of view of the participants, another strength of the project was the fact it promoted “Interpersonal Relationships/Interactions”, an aspect which, in one way or another, is reflected in the feedback of every participant. Two major subcategories emerge: “break from routine” and “interaction”, as the following comments illustrate: “As well as the teaching provided, it helped me get out more and enjoy myself” (Q12); “It was great that this activity came up. It helped me fill my diary and get out of the house. It was really good.” (Q13); “It kept me busy in my spare time, helping me relieve stress and break from my daily routine” (Q16). “It helped me learn a lot and spend time with friends” (Q8); “I met new people, the social aspect was good” (Q3); “Meeting neighbours and interacting with other people” (Q5); “The social aspect and companionship was really good” (Q7); “I have really changed. Before I didn’t go out. I have started going out more and socialising more with other people” (Q2).

This feedback, which demonstrates that one of the most significant benefits of the project was increased social contact and networks of interpersonal relationships, creating new purpose and objectives in life, reactivating active participation in society and mitigating the isolation and passivity of domestic routine, supports the viewpoint of authors such as RIBEIRO; MEDEIROS (2016); CALVO et al. (2017); PEREIRA; NEVES (2011); PÉREZ TORNERO (2013); CARMO; and ZAZZETA (2016), who consider the acquisition of digital literacy skills an important factor in social adaptation and integration, particularly for adults and older adults.

Concluding remarks

While it is not possible to make generalisations, due to the small sample size and the fact that the data is fixed and limited in terms of context, geographic scope and timeframe, the results of this educational intervention appear to confirm literature, showing that education is a powerful tool in successful ageing (SIMÕES, 2006; VENTOSA, 2006; OSÓRIO, 2008; PINTO, 2008; JACOB; FERNANDES, 2011, ANTUNES, 2016; ANTUNES; ABREU, 2017).

In this context, we must firstly note that one aspect referred to by other authors and confirmed by this study is the fact that educational intervention promotes enhanced wellbeing among participants (NERI, 2006; YASSUDA; SILVA, 2010; INOUYE et al., 2018). As the aforementioned authors observe, by providing new learning opportunities, the educational intervention described in this paper improved physical and cognitive function, fostered interaction and strengthened networks of interpersonal connections and friendships, helped rebuild a feeling of belonging and participation in the community and gave new meaning to life experiences and goals, contributing to increased wellbeing and satisfaction with life.

Secondly, the results demonstrate not only that humans continue to learn in the later stages of life, but also that they enjoy participating in education/learning activities. These findings support the movement, now well established, to promote and develop educational provision for elderly adults befitting of the contemporary definition of lifelong education, as proposed in the literature and in Portuguese and international documents.

Thirdly, the outcomes also show that the educational intervention helped foster togetherness and increased social interaction, making it an important means of mitigating situations and feelings of isolation and loneliness, very common in this segment of the population. In this sense, and understood as one factor among many, educational intervention helps attenuate two problems considered to present a risk to the health of elderly people: isolation and solitude, as referred to by BOSWORTH; SHAIÉ (1997); FONTAINE (2000); KRAUSE (2001); PAÚL; and FONSECA, (2005).

In short, the positive outcomes of the study corroborate the importance of informal educational provision for the elderly population, as a tool for promoting the skills and knowledge required to better adapt to and cope with the ageing process and old age itself. They provide further evidence of the urgent need to restructure the education system

in order to promote the democratisation of education during and for the third age, an essential factor in successful ageing.

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