

A new pattern in long-term care in Hungary: Skype and youth volunteers

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Abstract

This paper presents the results of a model programme in Hungary designed to test the hypothesis that internet-illiterate elderly people receiving long-term care at home would cease to feel lonely if they could learn to use Skype. The research had positive results: older people learnt to use Skype, and communication via Skype not only strengthened family and interpersonal relations but also improved the elderly persons' mental state without the need for physical activity on the part of the carers. A new element of the action research was the inclusion of young 14–16-year-old volunteers. It was the transfer of knowledge from the youngest actors that enabled this change in the network of contacts and the mental state of the elderly people. The rapid and positive result of the transfer is linked to the regular voluntary activity, in a new form of “playful” volunteering. For the young people, the volunteering (a subject they take at school) became enjoyable, not just something they had to do. Through the young people, sick home-bound elderly people were successfully integrated into society, and new intergenerational relationships were formed. The research found a way to involve a potential new human care resource, teenagers, in eldercare.

KEYWORDS: Skype, young volunteers, loneliness, intergenerational relationship, care

Background

Much of the research focused on the loneliness and social isolation of older people has shown the negative impact these factors have on psychosocial well-being. According to Alpass and Neville (2003), lonelier men reported higher scores on the Geriatric Depression Scale (GDS), leading the authors to conclude that social isolation may influence the experience of depression. Anderson (2001) found that among 10–15% of the people over 65 depression was two to three times more common than dementia, and emphasised the high cost of this disease.

In societies with advanced technology, computers and the internet are widely used. In Canada and the United States, the connection between eldercare and technology is a key research area (Marziali 2005; Chiu et al. 2009). In Canada, two-thirds of people aged 65 and older use the internet at home (Milliken et al. 2012). The use of Facebook and

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Twitter for social networking increased by 13% and 35% respectively between 2009 and 2010 (CBC 2011). Different studies show that video communication is especially helpful in reducing loneliness and isolation (Fokkema and Knipscheer 2007; Sum et al. 2008) and increasing self-esteem, satisfaction, and the quality of life (Shapiro et al. 2006; Slegers et al. 2008). In a case study of people aged 55–77, Milliken et al. (2012) emphasised that older people felt closer to others when they could not only talk to them but also see their faces via video-communication.

The use of info-communications technology to help the elderly has appeared in EU policy (ICT and Ageing, ISISEMD). The EU places particular emphasis on the development of ambient assisting living projects (AAL-JP programmes) and research related to ICT and eldercare (Mollenkopf et al. 2010) research to help carers via ICT (CARICT 2011) was also part of this policy. Case studies also illustrate in depth the different ways ICT can be used to support carers and care workers (Yeandle & Fry 2010). In the EU, loneliness and suicide is regarded as problems of distinct importance. In its Summary Reflections 2010, the European Commission cites loneliness, dependency and isolation among the causes of depression and, in serious cases, suicide among the elderly.

There has been an extremely wide gap between the info-communication skills of the 55–74 years age group in the countries of Northern Europe and in many countries of Southern and Eastern Europe (e.g. in the Czech Republic, Tošnerová & Zvoníčková 2006). The figures for Hungary are still extremely low; despite the improving trend in the level of info-communication skills of the elderly. Numerous programmes designed for healthy elderly persons to learn to use the internet, such as *Kattints rá nagyí* [Click on it Granny!] and *Folytassa nagyí* [Carry on Granny] are bringing improvement, but in 2008 only 20% of persons over 65 years used a computer and barely more than 5% used the internet (KSH 2009: 55, 58).

Interpersonal relations are a key factor in eliminating or preventing loneliness. Only a small proportion (3%) of the elderly living with a spouse or partner struggled with loneliness in Hungary. However, more than a tenth of those over 65 felt lonely often or always when family members lived far away (Spéder & Bálint 2013: 26–7).

This paper presents the results to date of a model programme that remains in progress. Its starting point, based on a case study, was the hypothesis that if they could learn to use Skype, digitally illiterate care recipients would cease to feel lonely, and their network of family relations would expand. An 89-year-old widow with cardiovascular problems and lack of outdoor mobility felt lonely and became depressed when her grandchild and a three-month-old great-grandchild moved to the United States. The elderly woman had no computer skills and at first rejected the idea of learning, but using Skype soon became an essential daily task, making her very active. Soon video communication not only substituted for personal communications but was preferred as it enabled a more intensive contact. When the grandchild came home for a visit, the elderly woman had “withdrawal symptoms”, stating ‘I can hardly wait till they go back, then I can see them every day and talk to them.’

Questions to be answered

The question was whether this can be regarded as generalisation, i.e. whether the loneliness and depression of people receiving long-term care will end if they are able to learn to use Skype. Could family contacts be maintained or even expanded in this way? If so, could it become a burden for the family if Skype becomes important to the elderly person? Could the difference between the generations in info-communications skill be reduced by teaching? Would older people receiving long-term care feel less isolated despite their poor health? Would their daily passivity be transformed into activity? Who would teach them, help them to practise and encourage them if they forget something? Would it be the family, i.e. the grandchildren in particular?

A key research question was whether young volunteers could help them. The assumption was that young people have the most up-to-date internet skills, and they might also have a very tolerant attitude towards older people.

Key factors of the model program, characteristics

Financial difficulties¹ allowed only a limited sample size of 15 persons: 10 in the Care Centre of the Hungarian Maltese Charity Service (Budapest) and five persons in the care centre of a local government in a county seat (Székesfehérvár). The criteria for selection were: participants should be over 75 years, should receive home care (physical or/and mental care such as personal hygiene, basic nursing, shopping, medication, delivering or giving food, handling administrative affairs, conversation, etc.), they should have limited outdoor mobility, be lonely and/or depressed, should have no computer skills or internet knowledge, but should have family members with a computer and computer skills. Through their activity, the carers were the most familiar with the physical and mental problems and the interpersonal relations of the elderly persons, and it was the carers who were fully trusted by the elderly. With the help of the carers, it was also possible to include in the sample two elderly persons who had attempted suicide and another one with mental problems (severe depression). The average age was 82 years, the majority of participants were women; two men had been blue-collar workers, and the others were white-collar workers (with secondary or tertiary education).

Qualitative methods were used: observation, in-depth interviews, reports, case studies and the intervention of the researcher to elaborate new elements in the pilot program in response to problems that arose.

The *observation* (by the head of the care centre, a carer, the researcher and the technical staff) during the *installation* and conversation with the elderly person were of fundamental importance for later comparison, as they made it possible to judge the initial attitude of the elderly person towards technology. Summaries of *intensive observation* in the first week by the carers indicated the problems that needed to be solved.² The carers observed the elderly persons' behaviour, reported weekly on when they used Skype,

¹ Companies approached found the idea ridiculous and refused to support it.

² E.g. icons were made larger or the elderly were encouraged to do several minutes of warm-up hand exercises before using the mouse.

for how long, with whom, what contacts they had, and the extent of change in their mood, daily schedule and activity. From the third month, secondary school students were involved with the task of helping the elderly persons and reporting on their difficulties and progress. In the fourth month, two social worker students joined in the pilot programme. Their task was to make a case study on the impact of Skype and the internet.

Motivations of older people

Before the computers were installed, the elderly persons went through successive waves of emotions: *amazement* (that they are getting a computer); *interest*; *a great degree of fear*; *alarm*, declaring 'I'm too old for that; that's for the young.' Carers were able to dispel these negative emotions with reassuring talks, giving examples and explaining the benefits of the computer, which finally set off a wave of positive emotions: *impatience*: 'When will I be getting it?'; *excitement*: 'What will it look like, how will I use it?'; *joy* at reduction of the knowledge gap between generations: 'I'll have one, just like my grandchild.' The biggest motivation in most of the cases was the "magic word" *grandchild*, because the video camera enabled a two-sided relationship: 'I can see my grandchildren all the time, and they can see me' (reported by the head of the care centre).

The communication was based on a bilateral equality, both the family and the old person could monitor each other: 'I don't worry so much (about them), because I can see them every day' (89-year-old man, reported by the head of the care centre), or: 'I'm very glad that my mother is using Skype. Besides, I have to see whether everything is in order with her' (reported by daughter).

The prolonged daily use of Skype did not become a burden for the family. It replaced the activity of the family member who had been providing care and the younger generation also took an active part in the communication:

I am on Skype every day with my grandchildren too, sometimes I practically fall asleep at the PC because they could go on talking forever while I am tired, but I don't mind (78-year-old man, Uncle M. observed by the head of the care centre).

In addition, the video communication enabled a "value-creating" activity:

My great-grandchild will be born soon, and I can use the web camera, too, to show a lot of things, like things (hobby carpentry) I have made at home (78-year-old man).

The new computer and internet skill improved intergenerational relations within the family:

My contact (with my grandchild) is much better since I have my computer and use the internet. We finally have something to talk about that interests us both! (78-year-old man, reported by the head of the care centre).

Family members with good internet skills helped in the process of learning:

When he got the computer (before Christmas 2010), one of his sons who is good at computers went over and did all the settings for him. He wrote down everything on a piece of paper for Uncle A.: how to turn it on, all the basic steps (social work student).

The sense of achievement gained with Skype encouraged the elderly people to learn to send email, chat, browse the web for topics of interest to them (e.g. fishing), and they continuously learnt something new. Learning to use Skype gave them the skill base they needed to exploit other opportunities provided by the internet, encouraging them to acquire new knowledge. The desire to *learn* appeared as a strong motivation mobilising will-power and each obstacle overcome enabled them to advance to a higher level: 'Uncle A. told us that he would never have learnt how to operate the PC without a strong will' (social work student). Despite their illnesses, their daily routine completely changed; passivity gave way to *new activity*. An elderly woman with Parkinson's disease became extremely active and even got as far as editing a newsletter; it gave an elderly husband, who cared for his wife, a new goal, a challenge.

The motivations appeared separately but were often interlinked. An 88-year-old bed-ridden woman whose child and grandchildren lived in the United States became very uncertain and had learning difficulties, but she did not give up her will to learn in the hope of being able to have contact with her grandchildren (carer's observation). The video camera played a key role because it encouraged various forms of activity in the elderly: she got out of the bed, did her hair and put on make-up before speaking with her grandchild in the US. This example coincides with the one that served as a basis for the pilot programme and shows a pattern of mutually reinforcing motivations: family, daily activity/goal in life and learning with family as the primary motivation.

Changing social network

Maintaining or strengthening family relations

At first, the communication by Skype was used solely for communication with family members, for about an hour a day; the elderly persons did not want to maintain earlier personal relations or seek new acquaintances: 'I don't want to talk to anyone else, just my son and my grandchildren' (78-year-old man). The strongest connection as already mentioned, and the one that took up the most time, was between a grandchild and the elderly person.

Keeping old relationships alive

The family contact was soon joined by an expanding network of interpersonal contacts: 'I look up old acquaintances to find out if they have a computer too' (The 78-year-old man who at first rejected contact with others, reported by the head of the care centre). 'I looked up an old fishing friend, and I found him' (84-year-old man, reported by the head of the care centre). 'I saw six people connected. Uncle A. tried to talk to one of his old friends while we were there, but for some reason the other person did not reply, so he said: "No one's answering, let's talk instead"' (social work student).

Widening social network

Besides family and old friends and acquaintances, elderly people began looking for contacts in general, they also wanted to have contacts with persons they had not previously known and wanted to make contact with each other via Skype, discussing their problems and solutions, seeking new knowledge and helping each other. The expansion of the interpersonal network could be clearly seen. As their info-communication skills grew, they began to make efforts to contact other acquaintances or unknown persons and also helped each other. This research has refuted the earlier widely accepted view (Utasi 2002) that old age brings a shrinking of the network of contacts.

Change of mental state

Positive change

The many opportunities offered by the internet had a beneficial effect on the mental state: 'Uncle A. seemed to be a well-balanced, confident, communicative, optimistic person with good empathy' (social work students). 'Uncle A. has opened up like a rose' (head of the care centre). The conclusions drawn by the social work students and the head of the care centre are the same, and it should be emphasised that the students did not know about the man's earlier mental problems (this information was deliberately withheld). On the basis of their conversation and observation, both of them found an open, enquiring and *optimistic* personality:

Uncle A. said that the computer is very good for him because he goes out very little and it gives him a little extra challenge, something to keep him busy, and he can talk with his family members and friends every day on Skype (one of the social work students).

The old person himself experienced a *positive* change in the general mood and sense of well-being:

He himself said that he feels much better since he has the computer. Because he could finally get in touch with his old friends and with his grandchild in Italy. It seemed to me that he was making an effort to learn to operate the computer as soon as possible (social work student).

In this case, *three different types actors* spoke about the positive impact of the internet skill: the carer, observers (students) and the old person himself. The positive effect is all the more striking in the light of the initial attitude towards technology:

The carer told us that the first time she mentioned to Uncle A. that there was a possibility for him to get a computer (and use it to talk to people), he at first refused (case study by social worker student with carer).

The positive effect of Skype was even more striking in the case of the elderly persons who had earlier made suicide attempts. Both of the suicide attempts had been caused by passing or lasting depression resulting from loneliness and a lack of purpose in life. The 89-year-old man attempted suicide while the family was away for a short

holiday: ‘He wanted to commit suicide because he was overwhelmed by loneliness and depression, we found him by chance’ (head of the care centre). In his case, the possibility of using Skype set off a process of info-communications learning, it gave a feeling of success and encouraged further learning. This process activated him and transformed his daily activity. Skype and the internet together kept him occupied for three to five hours a day: ‘Since then his mood is well balanced and good’ (head of the care centre).

The other person, a seriously ill woman (asthmatic), carefully planned her 15 suicide attempts (conducting electricity in the bathtub) and constantly made alarm calls to the carers seeking urgent intervention. Because of her permanent mental problem and psychosomatic illnesses, the general practitioner requested her forced admission to a closed institute, but the carers thought that such a permanent solution was not appropriate and instead accepted the additional burden of care.

Learning to use Skype strengthened her family ties (regular conversations with her two sons) and expanded her other interpersonal connections (regular chats with others). Using the skills, she had acquired she began to explore the virtual world offered by the internet. The Google search engine and visits to various websites gave her access again to leisure programmes that had been part of her life before she became ill: attendance at concerts, visits to museums and theatres. She made a conscious effort to end her loneliness by visiting dating sites. Apart from her main illness, her symptoms soon disappeared, and she made no further suicide attempts; she became well balanced, although addicted to the internet, often continuing to browse while the carers were present.

In all the above cases, the positive effect of Skype and the internet appeared within four months. By the fourth month, the elderly person who had not even dared to switch on a computer, was capable of doing what the bolder and more skilful do, only perhaps a little more slowly: ‘... she was the timid one, now she keeps in touch with five people on Skype, reads email messages and uses the Google search engine like an expert’ (head of the care centre).

Six months after the start of the programme, the elderly participants regularly read the newspaper, watch television and films, and look at photos; some of them went to church; one of them began research on her family roots. Their vocabulary has expanded with info-communications terms, a) with entirely new Hungarian expressions: drive, surfing, mobile internet, keyboard, systems manager, email, chat, Facebook, website, Google, browser, download, YouTube, virtual; b) or with existing words that have acquired an info-communications content: mouse, window, library, virus. Before reaching this skill and knowledge level an elderly lady had been afraid that the mouse would eat her food. Another was afraid that a (computer) virus would infect her and asked for immunisation (an injection). All their fear that seemed ridiculous for younger generations disappeared and they soon acquired internet knowledge and habits similar to those of young (e.g. online shopping):

You ask what information technology has given me. It has opened up the way to acquiring knowledge! The computer has brought great help and constant curiosity into my home... (76-year-old woman).

The role of young volunteers

Originally teaching would have been the task of family members, but seeing the empathy of grandchildren towards grandparents and their lack of prejudice, it was the grandchildren who were able to devote the most time to conversation, to helping the elderly persons practise and develop their skills. Seeing these results, soon a new research question arose: whether teenagers could be recruited as a source of Skype-internet knowledge transfer. In 2011, practical voluntary activity as part of the curriculum in secondary schools was a new model; students were required to carry out voluntary activity with a choice of various types of voluntary work. Eight 16-year-old students agreed to examine the problems, level of competence, and attitude towards technology of the elderly. Their reports reflect the ICT skill the old person achieved but also the positive feeling of the volunteers towards the old person:

Aunt G.'s technical skills and problems: watches soap operas online, has difficulty using the keyboard, searches for her friends on international sites, searches for information, her use of the net is made difficult because of the keyboard. We will continue to visit her. Because we like to see the progress she is making' (Volunteer 1).

We spent time on the internet with Aunt K. We browsed for things that she wanted to buy. We showed her how to watch the TV magazine on the net, but she wasn't very good at it. She wanted to buy woollen yarn on the net, but she has not succeeded yet. We will continue to visit her (Volunteer 2).

We taught Aunt K. to use the internet. She learnt to switch the PC on and off and to use the mouse, to visit port.hu, create an email account. I have a lot of other plans for her, which is why I would like to continue intensive voluntary work with Aunt K. (Volunteer 3).

Behind the positive feelings of the young volunteers, the pleasure they felt at the progress made by the elderly learners is quite obvious. There is a change of role between the generations as the student became the teacher and the elderly person a "good student":

O. has made a lot of progress, it was worth helping her. She is very enthusiastic and attentive. She accepted everything we told her ... It was a pleasure to work with her (Volunteer 5).

The way the elderly woman improved her info-communication skills with the help of the young volunteers is clearly expressed. The relationship between the old and the young became what could be regarded as a quasi "grandparent-grandchild" relationship. Empathy played a key role in the learning process.

Comparing the reports of the volunteers and the case studies written by social work students reveals a striking phenomenon. Neither volunteers nor social worker students were given the task of recording their feelings, but they described their own enthusiasm:

That day when my student partner and I visited Uncle A. in the morning, the meeting had a positive influence on our whole day because it was a very good feeling to talk with him; that conversation gave us a lot of energy (social work student).

The reference to “a lot of energy” was surprising even for the social work students although they are learning in theory and in practice how to deal with and help to relieve human and social problems.

New elements of the programme

At the end of 2011, all participants wanted to pay the monthly internet fee (access had been free of charge during the first year). This can be considered as a “success story”. However new research questions arose. How can the positive process be launched for people with disadvantages, even multiple disadvantages (low education, poor infrastructure, backward region, etc.)? What phase lag must be anticipated for elderly persons of different age, social background, level of schooling, gender, type of settlement and region? Could the attempt be unsuccessful and, if so, to what extent and in what cases? What other type of problems could arise and what intervention would be needed to solve them?

These questions could only be answered by a second pilot programme elaborated in 2012 (also financed by the HMCS). A small town (Fehérgyarmat) with fewer than 10,000 inhabitants) and six small villages in the vicinity (below or around 1000 inhabitants) in a rural region of eastern Hungary not far from the border with Ukraine were chosen. The new sample consisted of 25 persons (10 of them living in the town); the majority were women with a low level of schooling. At the beginning of 2013, 10 computers were already installed, and the results so far have justified the fine-tuning of the programme.

A methodological difference compared to the first phase was the involvement of volunteers *right from the start* as volunteering was included in the national curriculum for secondary schools in 2012. The subject comprised two parts, theory and practice. The 1.5-hour theory lesson was given by the researcher, a) explaining that Skype was to be taught, and b) what kind of attitude they should show towards the older person. However the “how and what to teach beyond the Skype” was intentionally not discussed as it was assumed that the younger a student is the more affection, patience, tolerance and freedom from prejudice she/he would show towards the old person, and that she/he would have the most up-to-date internet knowledge. The age limit was therefore lowered to 14–15-years. The “theoretical” lesson was interactive. It was quite clear that the students had positive feelings for their grandparents. Based on this feedback, the instruction was given in simple terms, emphasising the difficulties they could expect to encounter and the importance of patience:

All you have to do is the things you enjoy doing, using the internet, chatting online, searching for things in Google, etc., and teach these to the elderly persons as though you were teaching your grandmothers.

It was a basic aim to evoke empathy because society has a strong prejudice regarding the poor learning capabilities of frail older people, especially anything connected

with ICT; this prejudice was also revealed in the research. At a family level, it was only mild: 'Oh, I hadn't thought of that, but if it could be done it would be good' (daughter). 'The family didn't believe that it would be worth giving an old person a computer' (head of the care centre). However, it was strong among 30-year-old young men installing the computers: 'I'd like to see what these old people are going to do with these computers: probably put a lace doily on them, and a vase on that and then look at them.'

Child volunteers (14 years old) helped to fulfil the wish to learn that was a strong motivation for close to one seventh of the women, a gender-specific feature in the rural region caused by the former strong discrimination: 'My parents didn't let me study' (78-year-old woman), or: 'It was very difficult for women to find an opportunity to study' (79-year-old woman). These women kept their desire to learn and they felt that by acquiring the new internet skill they would start a new life: 'It is opening up a window for me' (82-year-old women).

The involvement of volunteers right from the beginning accelerated the learning, and the successive steps of the first period where Skype was followed by the internet, *became parallel and simultaneous*. The students visited the elderly persons twice a week at a set time after school, for an hour. Students used different teaching methods. Some of them started the lesson with mapping the existing computer and internet skill and then decided what and how to teach:

We didn't decide in advance what to teach her (to write email, etc.) ... we decided on Skype because that seemed to be the simplest program but the one with the most functions ... Aunt I. could then contact her family members and keep in touch with them.

Others followed the teaching methods of their school: acquiring new knowledge, practice, doing homework and applied the same pattern to their elderly "student". Other pairs had separate theoretical (explanation of the different functions of the internet etc.) and practical lessons, or they often divided a lesson into a theoretical and a practical part. Whatever method they applied all of them ended with success, the old person learnt what was taught. One important observation was that as a communication tool Skype was preferred to Facebook for its easier use even when they became familiar with Facebook, communicated through it or used its other functions (e.g. liking). Another important recognition of the "teachers" was that they needed to always pay attention to the interest of the old person as this accelerated learning: 'She showed great interest... She was ready to learn, so it was easy to work with her' (1st visit). Right from the outset, the two-way and rapid learning created an intergenerational relationship with a positive emotional charge: 'We learnt (that is they taught her) how to reply to email. She was very charming; we like working with her' (2nd visit). The emotional change and development in the young people can be clearly followed: on the first occasion only the "easiness" was stressed and already on the *second occasion* affection felt for the elderly person also appeared. In all cases there was a change of role from student to teacher and both the older person and the young were aware of this. The older people called the students their teachers or "little teacher". Some used even stronger terms, such as "school": 'I never thought I would go

back to school in my old age.’ The students felt the change in role, too, but at the same time some of them started to learn to respect the knowledge of the old person as well the significance of the volunteer activity:

To be honest, at first I didn’t think it would be more than just a “compulsory school task”, because I had never done any voluntary work before. But after we had visited Aunt Ica a few times I began to feel how good it is to help someone and to teach someone something new. It also gave me pleasure to see how Aunt Ica progressed, and how much she enjoyed the whole thing. I think it was a lasting experience to get to know an elderly lady who had already learnt countless things in the course of her life but was still prepared to learn things from two young girls.

The affectionate feelings for the quasi-grandparent changed the negative views of old age (missing teeth, wrinkles, sickness, etc.) typically held by the students. In this pattern, both inter- and intra-generational relationships are important.

Social inclusion – future aspects – a new pattern

The research resulted in a wide range of positive impacts on micro-, meso- and macro-levels. The relationships affected different actors on the micro-level: older persons; young volunteers; family members; family carers; interpersonal contacts of older people. These actors continuously interacted. The elderly came into contact with all generations in society, resulting in a strong network of intensive intergenerational and intragenerational relationships. Through their personal contacts with the young volunteers, the previously very limited network of contacts of the elderly gradually expanded through the opportunities provided by the internet (Skype, Facebook, chat, etc.). The communication via Skype not only strengthened family relationships but also helped family members and the carer by improving the elderly person’s mental state without the need for physical activity on the part of the carer (e.g. travel, visits). It was the transfer of knowledge from the youngest actors that made possible this change in the network of contacts. The rapid and positive result of the transfer is linked to the regular voluntary activity, in the new form of playful volunteering. For the young people, the volunteering, one of the subjects they take at school, became enjoyable, not just something they had to do. The internet is an integral part of their daily activity, an indispensable element of their contacts and leisure activities; the time they spent with the elderly persons actually increased rather than reduced the time they spent on the internet. The lower age limit for volunteering proved to be successful.

The volunteering incorporated into the school curriculum differs in character from other informal, voluntary training and sheds light on a new possibility not previously taken into account for eldercare. Various projects involving technology as an important part of care have approached the problem of eldercare from the social and health care angles or by linking it to the use of ICT. However, none of these research projects have linked education, health care and the social system or involved young volunteers in care. The research discussed here found a way to involve this potential new human care resource,

the young age group, in eldercare. Without their role, the elderly could not have set out on the path of self-integration, of successfully reversing their own disadvantaged situation of social exclusion and reintegrating themselves into society through their own activity. In doing so, they not only changed their quality of life. The new connections between the elderly and the young transferring their ICT knowledge could also have a tangible effect at macro level through greater cost-efficiency of social and health services (less medicine, hospital treatment, carer time input, etc.). This new pattern of relationships is also capable of eliminating the multiple disadvantages arising from regional inequalities, lack of education and the housing situation. It can also lead to social redistribution (distribution of slightly outdated, but perfectly functional computers to the elderly) enabling them to overcome disadvantages arising from income differences. Since the method can be easily transferred, if it is successfully disseminated it could also win market sponsors after they become aware of the appearance of a potential new market segment. The most important thing, however, is the social inclusion of the older people. In the sixth month of the second phase, one elderly person died; later, another one was hospitalised but up to that time they had enjoyed their life, had had goals, curiosity, and extended interpersonal network and hobbies. What is social inclusion if not this?

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Povzetek

V prispevku predstavljamo rezultate programa na Madžarskem, v okviru katerega smo testirali hipotezo, da lahko uporaba Skypa zmanjša osamljenost pri internetno nepismenih starih ljudeh, ki prejemajo oskrbo na domu. Program je pokazal pozitivne rezultate: stari ljudje, ki so pričeli z uporabo Skypa, so okrepili svoja družinska omrežja, hkrati pa so tudi izboljšali svoje mentalno stanje brez dodatnih aktivnosti s strani oskrbovalcev. Posebna novost je bila vključitev mladih prostovoljcev (14-16 let) v program. Hiter in pozitiven rezultat je povezan z rednim prostovoljnim delom, ki je imelo elemente zabave. Za mlade, ki so prostovoljstvo imeli kot obvezen šolski predmet, je bila aktivnost zabavna. Z njihovo pomočjo so bili starejši bolje vključeni v družbo in vzpostavili nove medgeneracijske odnose, kar kaže možnost uporabe novih virov pomoči pri oskrbi starejših.

KLJUČNE BESEDE: skype, mladi prostovoljci, osamljenost, medgeneracijski odnosi, oskrba

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