

Meeting of National Focal Points on
Ageing in the UNECE Region
Segovia, Spain, 13-15 November 2006

CAPACITY BUILDING NEEDS IN THE FIELD OF AGEING

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One of the paradoxes of the process of socioeconomic development of our century is that while, on the one hand, the remarkable advances in medical science and technology have made it possible to prolong life, although at exorbitant costs, on the other hand, the provision of these very resources remains a major economic and social issue both for individual families caring for older members and also for every society at large.

The significant increase in life expectancy unavoidably implies not only a heightened demand for existing services but also for new services and alternative approaches aimed at meeting these new challenges of population aging . Consequently, new approaches to medical care and the delivery of social and economic services are needed.

The first quarter of the twenty-first century has often been called the Age of Ageing. It is projected that by 2025, older persons will constitute almost 14.3 per cent of the world's population amounting to almost 1.2 billion persons.

The majority of older persons is to be found in rural and remote areas where resources tend to be rather scarce. There is a lack of services and programmes especially in the areas of health, housing and social welfare.

This reality is often coupled with the significant changes that the family is undergoing. The traditional role of the family in the care and support of the older members, especially, those who are frail and dependent, is being subjected to various economic, social and psychological difficulties.

Population aging poses unique challenges to every society. It has profound effects on every aspect of individual, community, national and international life. The significant increase in life expectancy unavoidably implies not only a heightened demand for existing support services but also for new services and alternative approaches. Consequently new approaches to medical care and the delivery of social and economic services are needed.

Following upon the 62 recommendations of the Vienna International Plan of Action on Aging, a number of countries throughout the world did develop innovative and concrete measures aimed at improving the situation of older persons in their countries. In spite of this, however, the results achieved were only modest.

The most serious deficiency being faced by many countries in economic, social and health planning to meet the challenges of population aging is the pronounced scarcity of trained caregivers. Although in many countries the need for training in the fields of geriatrics and gerontology has been recognized, this recognition has not yet been translated into action, as one would have expected.

How true is the Recommendation of the Vienna Plan of Action which stressed the fact that the implementation of the same Plan fundamentally required trained personnel in the various fields of aging. The standard of care provided to any person, especially to older persons, depends on the personal qualities and professional preparation of the caregivers.

This was reiterated various times by the representatives of the 159 countries which were represented in Madrid during the Second World Assembly on Aging between 8-12 April 2002 and the ensuing Madrid International Plan of Action on Aging.

Although in many countries the need for training in the fields of geriatrics and gerontology has been recognised, this recognition has not yet been translated into action as one would have expected. The growing needs far outweigh the efforts made so far. Most of the people providing a service to older persons still lack the necessary training. This is the more so in rural and remote areas where the need is very pronounced.

Governments are thus being faced with a two-edged sword. On the one hand they are being faced with a rapid growing older population especially in the rural and remote areas. On the other hand, very often these areas lack the basic resources and trained personnel to provide these services.

WHO NEEDS TO BE TRAINED?

The past decade has seen the emergence of a number of community-based programs and services for older persons. This has, in turn, increased the variety of skills needed and the level of training.

When referring to education and training in the various aspects of ageing, there is the danger of restricting them to high levels of specialisation given at universities resulting in the production of geriatricians and gerontologists.

While not minimising this need, it is important to emphasise the fact that training should be made available at all levels and for different functions. This includes all those who work with older persons at home, in the community or in institutions, be they volunteers or family members as well as the older persons themselves.

HelpAge, the international organization dedicated to disadvantaged older people, has been very successful, especially in the rural and remote areas of South America and Africa, in training the young old who in turn would be able to teach others. Moreover, the population at large should be informed in regard to dealing with the elderly.

Thus, for example, Caritas Malta, the Catholic Church secretariat for social and charitable action, had in 1987 started a “Schools’ Programme” aimed at raising school children’s awareness about the phenomenon of aging and the needs and potential of older persons, while at the same time creating a positive image of older persons.

In a number of countries, an effective network of primary health workers at the community level is the focus of health care policy. This includes deployment of locally recruited community health workers aimed at reaching the most vulnerable and isolated older persons.

In short it can be said that education in the field of aging needs to be multi-sectoral in nature covering 1) levels of specialisation for the professionals; 2) those who directly work with older persons; and 3) the older persons themselves.

23 years ago, Recommendation 7 of the Vienna International Plan of Action on Aging clearly pointed out that “Practitioners and students in the human care professions ... should be trained in principles and skills in the relevant areas of gerontology, geriatrics, psychogeriatrics, and geriatric nursing”.

However, Recommendation 54 of the Plan of Action clearly spelt out that, “education and training in the various aspects of ageing should be made available at all levels”. This includes all those who work with older persons at home or in institutions, be they volunteers or family members as well as the older persons themselves.

The same Recommendation emphasised that “Efforts should be made to regulate the training skills and educational requirement for different functions”.

Twenty years later, The Madrid International Plan of Action on Ageing 2002 constantly reiterated, in various articles, the importance of training and of having trained personnel. Issue 4 in the Second Priority Direction is totally devoted to the training of care providers and health professionals.

Article 82 states “there is an urgent worldwide need to expand educational opportunities in the fields of geriatrics and gerontology for all health professionals who work with older persons and to expand educational programmes on health and older persons for professionals in the social service sector”.

However, even in The Madrid Plan of Action, the need of education and training is not only limited to the health professionals and the formal carers but emphasises the need of such training at all levels.

In order to maintain the well-being and independence of older persons new orientation and skills among the older persons themselves, their families, and health and social welfare workers in the local communities, are of the utmost importance.

Education in the field of ageing needs to be multi-sectoral in nature covering:

**levels of specialisation for the professionals;
those who directly work with older persons; and
the older persons themselves.**

Healthy aging should not be considered only from the medical point of view, but must be fully integrated into an overall holistic approach. Moreover, because of the multi-faceted nature of aging, the Plan of Action emphasizes the need of developing multi-disciplinary and inter-disciplinary education and training programmes.

These should include a basic understanding of ageing from the biological, social, and psychological perspectives. Furthermore, one has to bear in mind the fact that, especially in the case of the caring disciplines, these cannot function competently when isolated.

**WHAT SHOULD BE THE
CONTENT
OF THE TRAINING
PROGRAMMES?**

Recommendation 54 lays particular emphasis on the need “to regulate the training skills and educational requirements for different functions in the field of aging”

Training programmes have to be tailored to the nature of the participants, the work they are doing and the needs entailed. Though the basic issues dealt with might often be the same, the approach differs.

The processes extending healthy aging and postponing the onset of chronic diseases and disabling conditions exist already. Unfortunately, these processes are not disseminated in appropriate ways.

This is the more so at the primary care level and at the village level. It is, therefore, imperative, to disseminate this information by training people at the grass roots level so as to reach the most vulnerable and most isolated older persons.

Para-professionals and primary care workers should have the necessary knowledge, skills, and attitudes to facilitate good care, namely concern, maintenance, and treatment of older persons in their localities. They should be knowledgeable in problems of older persons and risk factors of aging, as well as in health in old age and its common ailments, their prevention, management and rehabilitation.

CONCLUSION

The gap between the projected increases of the older population and the consequently required services, combined with the parallel development of the personnel needed to carry out these services, creates a pressing and urgent need to train appropriate staff.

In order to meet the special needs of the rapidly expanding older population adequately, training of personnel has become a major issue that needs to be tackled with urgency, lest events overtake history.

It will be important in the not too distant future to explore innovative ways of providing education and training in rural and remote areas and to apply, as much as possible, the new and emerging communication technologies to facilitate and enhance these programmes.