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Panel C: *Towards a balance care strategy*

Rapporteur:

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Statement by Rapporteur

The **key points** raised by the keynote speaker and the panellists concerned mainly the demographic changes and the great challenges which these are presenting us. These demographic changes are a result of:

- (i) improvement in health care services,
- (ii) better standards of living,
- (iii) more health awareness, and
- (iv) longer life expectancy.

Today's main challenge is that of *providing a balanced care strategy to make good for the ever increasing ageing population.*

Common measures which are actually being adopted by most European and North American countries as pointed out by the panellists are:

- adopting and developing care services in order to address elderly needs;
- helping the elderly poor, the elderly frail and lonely;
- the provision of formal and informal care;
- seeking possible forms of care, that is choosing between institutional care and community care or a combination of both;
- assessment of effective care;
- dealing with quality standards and quality assurance in the delivering of care;
- various method of financing;
- rights/obligations and protection of both care users (ie.elderly) and care providers;
- provision of long term care;
- the deployment of social workers to specifically deal with elderly matters;
- regular monitoring and evaluation of care services; and
- day care centres and social clubs.

The main problems/challenges raised by the speakers included:

- financing, integration and sustainability of long term care;
- the issue of finding and recruiting the right persons to work in the caring field as well as their training and retraining;
- how to assure standards of care and provide good quality care;
- how to provide dignified care as well as protective care for the elderly;
- how to promote independence and active ageing within their own homes and their communities ;
- how to keep up the social and well being of the elderly;
- how to take care of the elderly persons with special needs such as the disabled, mentally ill and those with dementia;
- the issue of lack of coordination between different care providers that is the government, the private sector, the family and civil society; and
- how to deal with elderly abuse.

Initiatives and suggestions brought up by the keynote speaker and panellists *towards a balanced care strategy* were:

- more intercollaboration between all care providers, that is government, the private sector, the family, social society and other stakeholders;
- intercollaboration between various government departments such as Health, Social Security, Family Affairs, Education and Housing, and other government agencies was emphasised;
- adoption of healthy lifestyles through health promotion campaigns;
- intergenerational collaboration and family solidarity;
- finding an equilibrium in the reconciliation of individual and social needs and responsibilities more particularly with respect to intergenerational solidarity, aid and care;
- community living incentives through flexible options and choices for high risk individuals;
- subsidisation of elderly services by the government;
- consumer empowerment through, for example, a one step-shop where an elderly person can choose services for his/her needs;
- integration of health and social care services;
- systematic support to non-professional care providers;
- compulsory social insurance for long term care;
- drafting and implementation of social and economic legislation in order to help the elderly to continue living in their own community;
- further research in the elderly field;
- ethical issues in the provision of care for the elderly;
- use of modern technology including IT both by care providers as well as by the elderly;
- the use of benchmarking on a national as well as on an international level;

- rights and obligations of senior citizens as for instance the right to be treated with human dignity and the right to decide for his/her own life by himself/herself without any interference.

During this Panel (c) the **questions** and **points** raised from the floor included:

- the issue of migrants, that is:
Are we adequately prepared to deal with elderly persons coming from a different cultural background?
- architecture in elderly homes, that is:
Are we structuring our elderly homes appropriately to suite our elderly needs or otherwise?
- what is being done to help the most disadvantaged elderly persons namely the mentally ill and those suffering from dementia?