



Statement to Open-Ended Working Group on Ageing from Global Ageing Network

July 2018

The Global Ageing Network is pleased to provide input on the focus area – long term care and palliative care – in preparation for the ninth session of the Open-Ended Working Group on Ageing in July 2018. The Network includes 50 countries and its mission is to improve the quality of life of people as they age. The vast majority of organizations in the network are care and service providers.

Definition:

Increasingly, we believe that the term “long term care” is too narrow a descriptor of the diverse array of services and supports provided to people of all ages with chronic conditions and functional limitations. Needs range from personal assistance with daily activities such as bathing dressing, grooming to more skilled nursing care over a sustained period of time. These needs are met in a variety of settings, from people’s homes to nursing homes. The vast majority of long term care throughout the world however, is provided by individuals – family, neighbors, or other caregivers – often unpaid and informal. Governments, no matter how wealthy, could never afford to pay for the informal care that is being provided by family members and friends who also need to be considered an integral part of our long term services and supports system.

Access:

Access to long term care, services and supports varies greatly, as does the quality of services and supports. Paying for services can be a big challenge but, across countries, a bigger challenge is the availability of people trained to provide this care. A further challenge is the fragmentation of service providers. Long term care needs are not linear; they tend to change over time and vary from individual to individual. A seamless system to meet needs as they change is an enormous gap. An effective system must incorporate the promotion of preventive, wellness, and restorative services to foster healthy and successful ageing for all older adults.

Throughout the world, a critical problem facing the ageing population is loneliness. Over one million people aged 65 and older in the United Kingdom say they always feel lonely in their own homes. The health risks associated with loneliness are well-documented. There is no country that is immune from the scourge of loneliness among older adults around the world. To prevent or delay health issues including those requiring long term care, and to improve well-being, the prevalence of loneliness and depression among older adults needs to be addressed.

In the United States alone, every American faces a 50/50 chance that, as older adults, they will need someone else’s help with basic activities of daily life like bathing, dressing, eating and getting in and out of bed. The expenses associated with such support are largely born by families.

Advocates are promoting reforms that include a dignity-driven and universal long term services and supports insurance program grounded in the principles of shared risk and individual flexibility. It is believed that a system that promotes choice and flexibility will stimulate and reward innovation, improve quality, and incentivize the creation of services that people want and need.

Education:

There is a universal need for better education and health literacy for older adults and their families. It is simply too hard to navigate the services that may be available in a community and to determine what services or supports may best meet individual needs at a given time. This includes information for caregivers as they support their loved ones.

Quality:

Provision of formal long term care requires an adequate, skilled, and diverse workforce. Nurses and nursing assistants, social workers, therapists (physical, speech and occupational), mental health providers, dietitians and physicians all provide essential services. A healthy supply of skilled professionals with knowledge of geriatrics and long term care is a global deficiency. We support the development of a quality ageing services workforce that is well trained, culturally sensitive and paid a living wage in order to deliver quality care and support quality of life. Nonprofessionals provide the vast majority of services and many are untrained. Yet, they have an enormous impact on the health status and quality of life of long term care users.

A big gap is a universal set of metrics to measure quality. We encourage the use of reliable and valid data indicators to monitor and evaluate the accessibility, affordability, quality, and impact of services.

Consumer Rights:

No matter the service or care need, older adults have a right to choose, to make their own decisions and to access quality services and supports. To realize these rights, societies need to ensure an adequate supply of services and trained professionals and unpaid caregivers to deliver these services. At present, we are falling short. Furthermore, older adults have the right to dignity, equity, nondiscrimination and cultural sensitivity as they access services.

In addition to access, quality and choice, older adults have a right to be free of inappropriate restrictive practices (restraints – physical and chemical) and to continue to contribute to society as they wish. Abuse and neglect must never be tolerated and should be punished to the full extent of the law.

Palliative Care and Hospice:

Palliative care is specialized medical care for people with serious illness. The focus is on providing relief from the symptoms to improve quality of life. It treats pain, depression, shortness of breath and other symptoms that may be causing distress. Palliative techniques are often used in home settings as well as nursing homes. Availability of this care varies tremendously across countries or regions but more widespread use would go a long way towards improving the quality of life for those with serious illness.

Hospice care is at the nexus of many of the needs people face at the end of life: medical care and psychosocial support. Hospice recognizes that as individuals approach death, the benefits of “curative” care diminish and the need for holistic care which meets the medical, psychosocial and spiritual needs of individuals and families becomes paramount. Hospice focuses on quality of life rather than the prolongation of life. It is widely recognized as valuable, and needs to be more widespread.

The Global Ageing Network is an international community of leaders in ageing services, housing, research, technology and design. We bring together experts from around the world, lead education initiatives and provide a place for innovative ideas in senior care to be born. We pave the way to improve best practices in aged care so that older people everywhere can live healthier, stronger, more independent lives.

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