

Guest Editorial

The older person in 2022. What now?

Stephen Lungaro-Mifsud

Dean – Faculty of Health Sciences, University of Malta

We are who we are because of those who came before us. I have heard this statement so many times, I take it for granted that we all understand what it means. As a health professional and an academic, I live in a society that offers services to our older citizens, aimed at improving their quality of life. In Malta, over the last decade, the number of people aged over 60 years has increased by almost 34,000, accounting for approximately 19% of the total population at the end of 2018 (NSO Malta, 2019). A similar increase in pattern is noted globally, highlighting the enlargement of the top of the age pyramid, although in Malta, the effects of migratory flow and the COVID-19 pandemic would need further exploration. So, what are the advantages of an ageing population?

It may be argued that the obvious benefit of an ageing population is that more people will enjoy long lifespans, as access to food, decent housing and healthcare continues to increase across society. Malta has long been striving to support a healthy ageing population, with incrementally significant successes.

The healthcare sector has been strengthened over the years with recent data-driven initiatives and the rise in telemedicine. These have the potential to enable health professionals to better care for people living with chronic illness, which is arguably more prevalent in old age. The COVID-19 pandemic has caused a rush of high potential digital solutions into the local scene that are now being explored more deeply, while service providers and

researchers struggle to keep abreast with the advances in the field. It is now globally recognised that digital solutions are a cornerstone of many initiatives aimed at enhancing digital technology and infrastructure to improve the quality of care. Exciting proposals such as mass networked wearable devices that track symptoms and shared digital platforms that facilitate medical and health communication across the board are literally around the corner. These person-centred solutions would help both the health service providers and the family caregivers provide focussed support to older persons. The mentioned rise in telemedicine, as it exists today, is often operationally inaccessible to older persons with weak digital or internet literacy, or with a cognitive impairment, or to people with health conditions like poor eyesight or hearing. The challenge continues.

Malta's older population may also bring many opportunities for the economy. Again arguably, a good number of older persons have significant spending power and consume services, such as healthcare, more than their younger counterparts. It is comforting to observe that public and private health services are increasing their focus on the older client. It means that the country is geared to preparing the health and support workforce for a population that is ageing, for industries that older persons will use.

The Covid-19 pandemic exacerbated and exposed care deficiencies in Malta, in similar fashion to many other countries. It reacted rapidly in protecting the public. However, none have suffered more than older persons. Considered at risk because of their ageing bodies and their varied co-morbidities, older persons perished in circumstances that may be considered tragic. However, what was more tragic was having loved ones living in physical isolation and with the daily terror of contracting the virus and dying before speaking to their families.

Correspondence to Stephen Lungaro-Mifsud
(stephen.lungaro-mifsud@um.edu.mt)

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Indeed, the threat of physical, psychological and financial abuse during the pandemic was real. It stood to reason that poorer health outcomes and higher mortality among older persons would be associated with feelings of greater perceived loneliness, memory concerns, lower life purpose and feeling discriminated, all characteristics exposed by the pandemic.

The ravages of the war for Ukraine adds to woes caused by the COVID-19 pandemic. Older persons in almost every country in the world will bear the brunt of skyrocketing prices of essential products such as food and medicines and of energy prices. Their vulnerability in modern society will expand to the extent that dignity and safety will become the operational words in health care as services creak under the financial burdens of international politics. The older demographic of populations would need to be protected by new thinking, re-organisation of health and social services, offering innovative responses to the needs of the increasingly vulnerable. Opportunities for healthy older persons to continue contributing to their nation's economies and fortify their own position against the threat of poverty will need to become paramount.

The education and training of all health professionals is evolving, sensitive to the impact of research outcomes, environmental changes and world events. Undergraduate programmes need to include content that addresses use of upcoming technologies to future-proof health care, preparation for international health crises and pandemics, discussion on the identification of ageism and related abuse, mental first aid, the collaboration of practices, and the removal of artificial and antiquated traditional professional boundaries that limit flexibility and person-centred focus.

The COVID-19 pandemic is far from over, but the world has armed itself against it and is cautiously moving on, keeping a watchful eye on the phenomenon of Long COVID. A good number of our vulnerable older citizens have died in the saddest of circumstances. A larger number were subject to forced isolation, arguably for their own protection. It will take some time for the loss and suffering to be reconciled with the hope of a healthy future. Informed health students may be the catalyst for a prepared socially sensitive, intelligent health workforce that is ready to care and fight simultaneously. The Faculty of Health Sciences at the University of Malta is a main stakeholder in that process, and it is committed to raise benchmarks commensurate with the needs of all our citizens.

Reference:

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