



Society for Psychosomatic Medicine: Symposium 27 augustus 2010

Ouder worden en wél zijn

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ABSTRACT

Older people: the challenge

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The challenge to improve physical and mental health of older people can be seen from different angles and points of view.

Combating the problems of ageing and preventing damage can be seen in the general context of improving quality of life. Quality of life is not a goal for older people alone. What counts for everybody in our society still counts for older people.

However, they also have specific needs and they meet specific obstacles.

What is important for our quality of life?

Some examples

to have a meaningful life

communication

mobility

general well-being

Meaningfull life

Proposition

What gives a sense to our lives, what makes it meaningful. One of the major things is to have (a) goal(s). Something to look for. Something to prepare for. Experiencing interesting, pleasant, joyful, intense moments. These are different for each person. It is up to us to seek what individuals experience, what they expect to be intense, interesting, joyful.

Many want to have frequent contacts with their family and participate in the activities of the family. Others prefer meeting their friends or former colleagues or sharing moments with neighbors. Some need to continue a hobby or specific activities.

Making a collection, going to exhibitions, seeing or participating in dance and music, doing sports, arts, gardening, still getting involved in production and professional activities. .

Some people still like competition, in different forms. Some like cosines and cocooning. Some need to participate in religious activities, others seek spirituality in different ways.

Action

-This means that their participation in the society must be preserved as much as possible. We must prevent the obstacles and impeachments that make this participation impossible. We should activate sport centre, museum, festivals, exhibitions, etc. to facilitate the participation of older people, or even to engage them in specific activities. Families should be activated or even helped in their efforts to engage their older parents into activities they know that they like.

-This means also that we should look at ways to stimulate people who have a beginning and even a severe damage of their physical or mental possibilities and to seek the alternatives as to stimulate them to participate in activities. Sometimes we see apathic, lethargic people who 'light up' when we sing old songs, let them tell about their professional activities, let them argue about a soccer champion, an actor or diva in cinema or theater, a fashion designer and the lifestyle when they were young. We see that some activities, where they can participate, such as cooking or gardening, can revive people and restore communication.

-Other action: these examples are but a few of thousands.

Communication

Proposition

We are all very dependent of, and at the same time very active, when we have many and diverse contacts with other people.

Consequently we use our senses and we rely on the good functioning of these senses.

Action

-Therefore it is of utmost importance that we should pay attention to the best functioning possible of the senses of older people. A regular medical follow up is therefore necessary. The hearing: hygiene of the ear (control of possible cerumen), use of good hearing aid devices, and much more simple: clear and slow speaking, not loud but with better articulation. The sight: regular control of glasses, seeking for the best light balance (some older people need more light, others feel more comfort in dimmed light). Eating: diversification and adaption to altered smell, tasting and need for less or more stimulating food, teeth hygiene and regular control, adaptation of food to possible problems of chewing, digestion, constipation, diarrhea. Avoid industrial cooking that is based on statistical standards (70 % of the target group need this or that, so everybody should eat or drink it). We must also try to find out if people like to be touched, or simply need this: taking their hand, hold, hug, embrace, caress, comb their hair, helping in toilet.

-We should try to find out if they cannot benefit from modern communication techniques and facilities: GSM, SMS, Facebook, chat on the pc ... Why not give them

adapted courses on how to use these new technology.

-When people have problems because of handicaps, infirmities or illnesses we should continue to try very actively to keep contact. We should talk to the person, not to his/her sickness.

-Other action

Mobility

Proposition

We all need to move. This keeps our body in a good condition and our mind in a good mood.

Action

-To move to the place we prefer, to see other people, to seek the activities we like, all this needs to be kept as accessible as possible. Appropriate transport is important.

-Exercise, physiotherapy, gymnastics, must be available and even activated. Physiotherapy must be adapted to the person and also be oriented to communication and meaning. When we are in touch with the body, we can sometimes better reach the sensibility and openness of people. When we talk to people we sometimes can milder their pain or discomfort. Mobility is not only the capacity to go to different places but it is also a must to keep the body supple and performing. It is also enhancing the general condition, working on flexibility and endurance and preventing bad postures and pain.

-Other action

Well-Being

Proposition

Every person feels at best when he experiences 'that' particular sensation of well-being. This sensation is hard to define but easy to say when it is there or not.

Action

-For older people we should benefit maximally of the means and possibilities of the environment they live in. Everybody has a comfort zone where he feels at best and must nearly spend no energy to have a sensation of well-being. Some people need challenges, others conversation and cosines.

-Some must be entertained others still want to be in the leading position, enjoying others attention and admiration.

-Even people with severe dementia prefer some specific food, lying in specific

positions or sitting in front of a garden or a street with all kinds of activities, or being involved themselves in activities.

-Other action

General conditions

It is of utmost importance that we should pay a continuous and vigilant attention to illnesses, exhaustion, damage. Older people have to be seen by medics and paramedics on a regular base. These consultations should not be routine and superficial, but meet standards of emergency medicine. A few people tend to exaggerate complaints or symptoms but the majority tend to hide, to put too much into perspective or to be unaware of severe damage or alarming signals of severe diseases.

Society must also be very cautious about the poverty in which older people can live and the influence on the above mentioned conditions. Poverty can ruin the meaning of life, the possibilities of communication, mobility and the feeling of well-being. Poverty has direct influences on nutrition, hygiene and activities.

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