Submission to the House of Representatives Standing Committee on Ageing

Issue: Professional Education for an Ageing Population

Summary

An ageing population intensifies the educational needs of helping professionals and policy makers and adds new demands and dimensions. This submission identifies key target areas for educational development over the next 40 years and suggests that planning for an appropriately qualified workforce needs to assume higher priority in any national policy framework.

An important feature of the ageing of any population is the ageing of the aged population. The 80 years and over age group (often referred to as the 'old old') is growing very rapidly. In Australia, for example, the decade 1981 to 1991 saw this group increase by 52 per cent. The need for care and use of support services increases markedly with advancing age and the growth of the 'old old' population is a major consideration in the development of health care policies in modern societies.

One of the most pressing needs in an ageing population is for an appropriately knowledgeable and skilled professional workforce. Important target areas for specialised professional development include clinical skills, management, and policy/planning.

Clinical skills based on the treatment of younger adults are often inadequate for the management of the multiple pathologies that typically characterise older patients.

Management of mainstream health services is rarely geared to the special needs of older patients. For example, hospital wards are not well designed or equipped to deal with the problem behaviours of dementing patients. Research has shown that older people presenting at hospital emergency departments are sicker and should be prioritised in triage, yet this is often not the case.

The scope and speed of social, economic and cultural change increasingly renders old structures and institutions inadequate or inappropriate. For example, most countries, including Australia, have placed increasing reliance for long term care on *policies* that assume an unchanging supply of informal family supports. Yet demographic, structural and normative changes are producing a decline in the family capacity for caring. This is so for a number of reasons, including higher rates of women's participation in the workforce, the effects of urban sprawl and geographic mobility, and growing numbers of unmarried, childless older people.

So how well prepared are professionals currently for the demands of working with an ageing population? From my 20 years experience of teaching health professionals the answer is, probably not very well at all. Training programs for health and welfare workers still orient their course content primarily towards work with children and families. At the same time, research consistently demonstrates that the aged care workforce experiences high levels of turnover, stress and burnout, and lack of job satisfaction. Nor has the need for an appropriately qualified workforce been addressed

in any systematic way as a key policy and planning issue under the framework of the National Strategy for an Ageing Australia.

This submission accordingly proposes that there is urgent need to put in place a longterm strategy to address educational needs at all levels of the aged care workforce over the next 40 years. Few would deny the importance of effectively preparing a qualified workforce to address this significant and growing social health issue, yet to date there has been little national policy direction.

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