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## **Public Health Nursing and the Ageing Population**

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## **Editorial**

The world population is ageing rapidly; this concerns not only the developed countries - which already have a large proportion of their population over 65 years of age - but also for the developing ones where older people are expected to double within the next 20 years [1]. Ageing by itself is a natural process, and for most people an era for tasting the fruits of a long working life. Older people today are living longer and although this fact is not synonymous with poor health, it is without doubt that health problems increase as age increases. Therefore, a part of older people acquire various chronic conditions throughout their life that gradually lead to frailty or disability, thus requiring long-term care.

Nurses through their education are prepared to meet the health care needs of the total population; however, health care needs of older people - who are the majority of those requiring health care - are becoming the focus of health care systems, especially today that cost-effectiveness seems to be the priority and for this new situation nurses are not always adequately prepared for this. These demographic, social security and financial changes need to be addressed in nursing education in much more detail that it was necessary in the past.

Nurse educators seem to have already acknowledged this need and are conducting research studies to assess the educational needs of nurses either at undergraduate or postgraduate level [2]. Based on such studies new competency frameworks are been developed to help educators inform curricula both at undergraduate and graduate studies [3]. This is the case of an Erasmus project, financed by the EU, the European Later Life Active Network – ELLAN (http://ellan.savonia.fi/). In this project the emphasis is placed on the care offered by the multidisciplinary team working with older people and the core competencies required for successful care. In addition to that specialized competencies are required by each separate profession to be able to meet the specific needs of older people and formal education has to respond to that need.

Public health nursing, either as postgraduate specialized education or actual practice - has to follow these changes and apply evidence based practice [4]. Public health nurses need to be aware that the health care needs of older people have to be met in order for them to continue to be robust for as long as possible. All public health nursing specialties – being

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primary health care/community nurses, occupational health nurses, etc. - should be prepared to respond to the changing needs of the population they serve.

Occupational health nurses for example need to be able to meet the additional needs of older workers as it is quite common today that working life continues well beyond the former retirement age of 65. In order that work ability of older workers is maintained, appropriate measures have to be employed and although the changing working conditions make this difficult, occupational health nurses have to be prepared on know how to employ appropriate workplace health promotion interventions and to propose alternative work conditions to help older workers stay healthy.

Following retirement, older people continue to be in their vast majority healthy and public health nurses working in primary health care or relevant public health services should be able to provide appropriate and adequate health promotion and prevention programs. These programs must be inclusive and tailor made so that there are easily accessible by all. Furthermore, when older people are becoming frail, community/home care nurses need to be able to recognize early signs of chronic diseases so that they provide prompt information for early diagnoses and treatment, but also be ready to support them during rehabilitation following an acute or chronic health problem.

Finally, although public health nurses are trying to be appropriately prepared for the challenges of caring for older people they need to be aware that they actively involve older people themselves in their care, but also the family and the social environment so that care is holistic and that the younger generations understand these challenges and contribute their share. Older people after all have offered what were requested throughout their lives and it is unfair to be marginalized when they need the care for which they have contributed through their work in order to feel safe and well cared for when in need.

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