

Ageing of the population and home care services

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Abstract: From a demographical perspective, ageing of a population is defined as an increase in the proportion of elderly people within total population. In physiological terms, it is pointed out that ageing is considered to be an inevitable case and the risk of incompetence and diseases increases with age, which decreases quality of life dramatically. Although there are a great number of factors that affect ageing of population, it is reported that especially the decrease in fertility and an increase in life expectancy at birth are influential. As a result of ageing, some health problems related to old age and a need for care emerge and this case resulted in a tendency towards home care services in particular while organizing health services. From the perspective of the elderly, it is seen that in general they want to stay in their own environment, receive the needed care at their own homes and tend to decide in this way. Home-care service is defined to be a caring model which includes psycho-social, physiologic, and medical support services and social services. It aims to help the disabled, elderly and chronically ill to adapt to social life in their own environment. It is of great importance to adopt a holistic approach in terms of physical, emotional, psychological, moral, and socio-cultural aspects while providing the elderly with the needed health service without taking them away from their own environments. This results in the need for an organisation of health services for the elderly and regulations to create an effective geriatric health management.

This study elaborates on some topics including ageing of population, which is a modern problem of our age, health problems related to old age, life quality of the elderly, health services to be provided during old age, and organizing home care services etc. while mentioning national and international regulations on home care services. It is thought that covering a problem that is of great interest to any society and the regulations on home care services will provide a perspective to future researchers on this subject.

Keywords: *Ageing, old age, protective health services, home care services.*

1. Introduction

Ageing of a population is a reduction in the share of the children and young people in a population while there is relatively an increase in the share of elderly individuals (65 and over years), with a change in the age structure of a population (1). It is stated that the population of the world gets older (2,3); this ratio increases especially in the industrialized western countries (4); ageing of population is considered as a global phenomenon (5); and this situation is a significant development accompanying twentieth century (6,7). Life expectancy has increased as a result of developments in technology and its contributions to human life, improvements in medicine, and an increase in the awareness of

protection and maintenance of health. This increased the proportion of elderly people in society. This change in the population pyramid is among the issues which have gained more and more attention in Turkey, though it is not as extensive as in developed countries. From this perspective, it is necessary not to regard ageing merely as a personal problem; but to regard it as a social problem (8).

In terms of social aspects, the perception of old age is described as undergoing some losses in roles and status by an individual. An increase in the risk of non-self-sufficiency as a result of ageing is the main reason for considering old age as a both social and individual problem (6). Furthermore, it is also stated that the background, educational status, and the

culture of the individual in a society form the perspectives of societies on old age since social structure is of great importance to transfer value systems across generations. The general opinion is that the elderly moves from being a producer to being a consumer, cannot get on well with younger people, do not behave tolerantly and flexibly (8). Apart from this social perspective and its reflections, especially the physical and mental losses of the elderly increases their dependency on others for their daily and self-care activities, which makes old age distressing. Related to this, disabilities increase while the expenses for the diseases and for their rehabilitation increase (6).

Ageing of a population is a deep concern to many sectors such as health, environment, social security, employment opportunities, family life etc. After all, in parallel with the ageing of the population, it becomes highly important to organize health services, to meet the expectations of the elderly from the new products and services and that the elderly can adapt to changing conditions (7).

Furthermore, ageing also implies the need for regulation on such matters as rearranging the relations in family, redefining the roles of an individual in a society, protecting self-esteem, solving mental problems etc. Therefore, this study includes information related to health services provided for the elderly and their ideal characteristics, how to increase life quality of the elderly, organisation of home-care services and national and international approaches on this matter besides the concept of old age and its possible effects.

2. Old Age and Its Possible Effects

Old age is defined as an irreversible and inevitable process (9). Ageing is considered to be a universal process that is seen in all the organisms without any exception and that causes a reduction in the bodily functions (10). Ageism includes the retardation of both physical and mental functions of an individual in general terms and it is defined as an age of losses in which the individual has lots of problems in health, youth, productivity, sexual life, roles and statues, income, and social life (9).

In other words, it is all the structural and functional changes observed in the cells, tissues, organs and systems of an organism. There are various factors that affect ageing and old age is defined in terms of physiological, psychological, social, economic and chronological aspects. **In biological terms**, ageing is the change that occurs in time in the anatomy and physiology of an individual. **In physiological terms**, ageing is all the changes in behaviour that account for the transition from independence to dependence,

which appears in parallel with biological ageing. **In psychological terms**, ageing is the adaptation disorder based on the changes in the social position and role of an individual. **In social terms**, ageing is referred as the change in the position and roles of an individual depending on the society and its values. **In economic terms**, ageing is defined as the decrement in work life and retirement period as a result of the decrease in the working performance and productivity. **In chronological terms**, ageing is the sum of the years from the birth of an individual until the time he/she lives in (10). In addition to these definitions to explain old age, there are various theories developed in order to clarify the meanings attributed to ageing. These theories can be listed as Effectiveness theory, theory of Leaving Roles, Disengagement theory, Social Transformation theory. **Effectiveness theory** interprets the effectiveness of the elderly in terms of their previous life style, socio-economic condition, and health level and claims that the effectiveness in life decrease gradually. **Theory of leaving roles** asserts that some of the previously active roles of an individual change as a result of retirement, widowness etc. because of ageing and these roles disappear in time. According to **disengagement theory**, ageing is considered as a tendency of the elderly to live in their own mental life as they isolate themselves gradually (8).

Although there are some common aspects special to old age, there are some individual differences based on individual characteristics. With ageing, the dynamism of an individual decreases and a period of stability emerges. Although the elderly individual wants to maintain his individual independence, he still needs the support of his family and friends to adapt to old age. Functional changes resulting from the loss of physical strength are accompanied by depression and shifts occur in social roles and relations. Adaptation problems observed during old age result in some mental problems such as dementia, depression and suicide attempts. Self-esteem of an individual related to its social role and relations tend to decrease during old age and this makes the elderly feel dependent and not self-sufficient. Furthermore, the prevalence of chronic diseases increases with age. An elderly frequently visits a health care centre for health problems mostly related to his musculoskeletal, respiration, circulation and nervous systems. This leads to economic losses for the country, since hospitals are visited to seek for solutions to the problems that can sometimes be prevented by home-care services and counselling services (8). The reason for this is the financial burden to the countries of the services provided by the hospitals for a long time for the elderly on the countries. Moreover, among the other problems that

are deep interest to health system are the reasons such as the rapid increase in the population, decrease in the number of beds per person, increase in the health care expenses etc. (2). At this point, it is thought that the care for the elderly and providing a qualified, effective and efficient care services for the elderly is among the important problems that need to be solved. Furthermore, we should not ignore the fact that although all the old people over 65 years old may not always be ill or may not need care, they have the risk of getting ill, their life quality is important, and the probability for their need for care will increase in time (9).

3. Life Quality of the Elderly

Life quality is considered to be a significant matter for the elderly and it is stated that there is a general tendency for a long and healthy life (10). The main emphasis is on the addition of life quality to their years, not to add years to their life. What needs to be done is to prevent the elderly from being dependant and consuming position and to support them in maintaining their life actively in accordance with their power, tendencies and potentials. When we take into consideration an individual's right to live, it becomes highly obvious that it is important to remove the factors that decrease life quality and to fully, significantly and healthily sustain life rather than only to live (8).

In the studies to analyse the well-being of the elderly, it is seen that there are some definitions as physical well-being, spiritual well-being, mental well-being, social well-being, and emotional well-being.

Physical well-being is defined as avoiding harmful habits, doing regular physical exercises and having conscious dietary habits. **Spiritual well-being** implies having a goal to connect oneself to life despite advanced age and having strong ethical values. In a state of **mental well-being**, it is emphasized that the individual maintains its process of creativity and ability to solve problems. **Social well-being** refers to contributing to both society and environment and developing communication. **Emotional well-being** means having an emotional balance (6).

To maintain a qualified life for the elderly varies depending on many factors such as diet, exercising, having different hobbies, being able to work, being able to travel, or being able to make friends. Besides, it becomes highly significant for an elderly to accept neurological, emotional, perception and so on changes that accompany ageing, to be able to adapt to these changes and to accept the loss of their accustomed independent life style in order to achieve life quality and well-being (10). It is observed that this matter is particularly emphasized by the World

Health Organization in their Health for All in 21st century and the fifth goal is regulated as enabling the people over 65 to have full health potentials and to have active roles by 2020. The elderly differ in their personality, world-view, expectation from life, perspective of old age and acceptance and this is a deep concern for the knowledge and skills of health professionals who serve, for administering health services, and their organization. In particular, it becomes highly important to create an awareness of characteristics, expectations and values of old age in health workers who serve for the elderly (8). As it is obvious from these statements, it is necessary to have multi-disciplinary perspective to increase the life quality of the elderly (2). With respect to health workers in particular, some measures should be taken to decrease the symptoms observed in the elderly in order to increase their life quality and to make it possible for them to do their everyday activities; attention should be given to improve doctor-patient, doctor-caregiver, and doctor-family relations; and the due support should be provided (6).

When we analyse the National Action Plan for Ageing and the Conditions of the Elderly held in 2007 in Turkey, it is seen that nowadays the policies and programs related to old age focus on the improvement of life quality and general health levels. The underlying reason for this is the wish to protect the productivity of the elderly, to enable a physically, mentally and socially healthy ageing period, and to decrease their dependency on others. In order for the extended life span to be accompanied by life quality, it is necessary that the elderly should be supported by their family and society; their needs should be identified; due attention should be given to the rights of the elderly; social and cultural places should be created for the elderly; the elderly should be provided with sufficient income; their physical needs should be met; and sufficient service for the elderly should be provided (9).

4. Old Age and Home Care Services

An increase in the population of old people in a society is accompanied by regulations regarding the care for the elderly and the presentation and administration of health services (9). In order to protect the health of the elderly and to increase their life quality, it is of great importance to control the diseases that accompany ageing, to maintain health, to develop the capacity of the elderly to move independently, to create a change in behaviour and to provide proper health care. To provide a comprehensive health service for the elderly, first a detailed analysis should be made; the needs of specific risk groups (socially and financially weak ones, homeless ones, mentally ill ones etc.) should be

identified; their health habits should be identified; and a good communication should be made to meet the wishes, needs and expectations of the patients. As is seen, in order to organize health services for the elderly and to administer an effective elderly health care, it is extremely important to adopt an integrated approach in physical, emotional, psychological, spiritual and socio-cultural terms (10).

The aim of home care services for the elderly is to make them continue their everyday activities in their own homes or environment without making them dependant on anyone (2). Home care service is also seen as an instrument to make the elderly stay in society and continue their usual life while maintaining their productivity. It is thought that in this way not only the communication between generations will continue, but also it will be possible for the elderly and young to exchange experiences and novelties (6). Moreover, home care services have some other significant contributions such as a decrease in health expenses and costs, a decrease in the bed occupation ratios as they are given care in their own environment, a lower risk of infection in comparison to hospital care, an acceleration of recovery through individual-oriented care, saving time, providing social and psychological support to the patient, and increasing life quality (11).

It is observed that while organizing health services for the elderly, the focus is given especially on the fields such as maintaining physical health and enabling the ability to move independently, providing support to create psychological well-being, to establish a secure environment to live in, and to provide rehabilitative treatments to reactivate functional skills (10). It is also crucial to plan proper treatments in the process of solving problems such as disability, cognitive losses, depression which accompany ageing (8).

A lot of factors such as improvements in technology, increasing expenses of health care services, the wishes of the elderly to receive a long term treatment at hospitals, their preference to be close to their family without being isolated from life have led to a current point of view regarding the organization and management of health services and home care services have become more and more important. Home care services is a caring model which includes psycho-social, physiological and medical support services and social services that aim to adapt the elderly to social life by supporting the disabled, elderly and chronic patients in their own environment. Home care service is a bunch of services provided in a wide spectrum to meet the different needs of individuals. In this respect, it is observed that home care services provided for

countries include services such as the opportunity to help at home, providing follow-up services at home, home health services, continuous care, food service to home, tele-care service, and maintenance and repair services at home etc. (2).

In the declarations concerning the ageing of the world population, World Health Organisation (WHO) reports that there is an increase in health problems such as cancer, diabetes, cardiovascular diseases, chronic lung diseases, dementia etc. and the main reason for this is smoking, inactive lifestyle, and unconscious diets (6). These records are of great importance for planning home care services for the elderly.

While organising home care services, the individual and his family is seen as a whole with all their physical, emotional, social, economic and environmental dimensions and team work becomes significant. According to the health condition and needs for care of the elderly individual, the physicians, nurses, home economists, pharmacists, social workers, psychologists, physiotherapists, speech therapists actively take part in providing the health service. What needs to be remembered here is that the family members who are a part of the treatment and the elderly individual cared should be included in the process (2).

In terms countries, it is seen that home care services are provided in a good number countries such as United States of America (USA), England, Spain, Canada, Italy, France, Germany, Ireland, Denmark, Greece, Saudi Arabia. It is reported that in Europe, home care services are provided under the state guarantee with the idea that the life quality of elderly who needs care can be protected and their care can be given at their homes or in their own families. The main emphasis of ageing principles prepared by United Nations (UN) concerning this suggests the necessity of the support of the elderly by their own family and society, providing an effective care service to those in need of it, and reimbursement of these services for the elderly by government (2).

The "World Ageing Assembly I" report issued in 1982 includes some basic topics such as the necessity for avoiding the physical and mental abuse of the elderly, their right for benefiting from all kinds of social, cultural, and educational resources, the necessity to protect their basic freedom and human rights, their rights to benefit from all kinds of health services in the process of protecting from illness, their need for the opportunity to live as long as possible in their own environment, their right to live in a secure environment with a sufficient income, and the importance of having a productive life in which they can exchange their knowledge and experience. In parallel with these, WHO named the year 1999 as

“International Year of Older Persons”, pointing out that it is not correct to perceive the elderly as passive, useless individuals without any benefit to their families and society and emphasized the importance of a productive and active old age period. The “International Action Plan for Ageing 2002” published by “World Ageing Assembly II” in 2002 included the necessity for the guarantee to protect the rights of the individuals to age in secure and respectful conditions and their rights in the society. The declarations by International Association of Gerontology and Geriatrics (IAGG) and European Union Geriatric Medicine Society (EUGMS) emphasised the significance of geriatrics and the necessity to include subjects concerning the health of the elderly, ageing concept, problems related to old age, and suggestions for solutions during all pre- and post- graduate educational periods of all professions and principally medicine (6).

When we take the regulations for the elderly in Turkey in a chronological order, it is seen that The Act of Municipalities passed in 1930 during republican age is significant and it gives the responsibility to care and help the elderly to the municipalities (4). The concept of services for the elderly was included for the first time in public services when the Social Services Directorate General was established under the Ministry of Health and Social Aid in 1963. The constitutional regulations for the elderly were included in the 1982 Constitution. According to the Article 61, which covers these regulations, the elderly will be protected by government and providing state aid to the elderly will be enacted by law. Under the regulations, it is seen that the main aim of the services for the elderly is to enable the elderly to live in their own homes as comfortably and peacefully as possible, to provide alternative residence opportunities to which the elderly will adapt because of old age, homelessness and the need for care, and to provide the due hospital conditions to those who need it for physical or mental problems (9). To sum up, the general policy in performing the home care services in Turkey is to provide the health services needed by individuals effectively, efficiently, accessible and as home visits in accordance with the social state understanding and while performing these services the legal regulations of the “Regulations on Providing Home Care Services” published in the Official Gazette issue numbered 2575 and dated 10/3/2005 should be followed. The fact that the organisation to provide this service should get “Appropriateness Certificate by the Ministry of Health” is another basic criteria that is expected to be met while performing home care services (11).

With regard to Turkey, the first project concerning home-care was implemented as a pilot scheme in Ankara, Adana, İzmir and İstanbul by the Directorate General of Social Services and Children Protection in 1993, but the desired outcome was not obtained. With a regulation in 2009, the elderly solidary centres were closed in Ankara, Çanakkale, Eskişehir and İzmir and they have turned into Elderly Service Centres (9). But for our country, the main problem fields are the insufficient number of institutions that provide home-care services, lack of a home-care service integrated into general health system, and not defraying the expenses for home-care services by the health insurance companies. This results in directing the elderly to a hospital or rehabilitation centre although it is possible to care at home. Furthermore, the inadequacy of knowledge and skills of the caregiver may lead to a decrease in the life expectancy of the elderly who is cared at home. Therefore, attention should be paid to some points while organizing the health services for the elderly. Accordingly, objective criteria should be applied in identifying the elderly who can be provided home-care service, the needs of the service providers to care should be met and some care standards should be established (2).

Turkey has also made some changes concerning the health of elderly under the terms of International Action Plan decided in the 2nd World Assembly on Ageing in Madrid held by UN. To that end, State Planning Organization held a conference on the problems of the elderly and the possible solutions for these problems. The main aim of this conference was to determine the policies to increase the life quality of the elderly and to enable their integration to the society. Another action taken for the elderly is the Monitoring Program for the Health of Elderly by Uludağ University. This action aims to visit the elderly over 65 in Nilüfer Province in every six months and to measure their blood pressure and pre-prandial blood glucose. In this way, the changes in the health of the elderly is kept under control and it provides an opportunity to organize their treatment when necessary (12).

As clearly seen, although the main aim of the home care services for the elderly is to provide an effective, efficient and qualified service that is in accordance with the priorities of the elderly and that meets the expectations of the elderly, it varies.

5. Discussion

The ageing of the population is stated to be an inevitable process and it is observed that the elderly population in countries increases gradually. Although the general problems that the elderly encounter parallel, there are some individual differences. From this perspective, ageing is a process in which chronic

diseases appear, the individual needs more health services, has adaptation problems to his environment and it has physiological, mental, and social effects. Among the crucial matters are to increase the life quality of the elderly, to improve preventive health services, to develop home-care health services, to provide the elderly with the opportunity to maintain their lives in a respectable and participative way, to organize health services in accordance with their needs and to increase the public awareness of ageing. It is highly important to prepare meticulous health policies to organize and manage health services to execute these activities.

In this way, it will be possible to achieve the goal to maintain and protect the health of elderly, to enhance the quality of the health service provided, and to provide and effective administration of the health of the elderly. It is crucial to head for the goals to increase the life quality and general health while developing policies for the elderly. In this way, the risk to be dependent on someone for the elderly may disappear and he will be supported to actively maintain his life.

With respect to Turkey, it is thought that it will be helpful for the elderly care to give emphasize on home care services, to support the elderly and their families by involving them in caring process, to make regulations that enable the elderly to continue their life without being isolated from the society and getting lonely and protecting the life quality, to act with a team spirit while presenting these services and to improve the quality standards of the services by the organisations that provide the care. In this way, the old population will be able to maintain their existence without being exposed to social and emotional isolation. It is thought that it will provide helpful outcomes to take home care services under social security, to increase the number of applications in planning it as a public service rather than a private service, to make mobile visits to the elderly living in the country in certain periods, and to plan the care service in line with the expectation and needs of the elderly. Although the ratio of young people is higher in the population of our country today, the number of old people in the population will increase in time. Based on this idea, it is thought that it is necessary to make sufficient regulations, to benefit from international examples of applications concerning these regulations and to increase social awareness. In this way, it will be possible to minimize the adverse effects of ageing on both health status and economic and social structure. So, an effective management of the health of the elderly will be implemented.

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