

DEVELOPING POSITIVE ATTITUDE TOWARDS OLDER PEOPLE

Dr Tan Boon Yeow

Ageism was coined by Robert Butler in 1975, to indicate how older members of the community may be regarded as inferior subjects because of their age. It is prevalent in contemporary societies. However, aging does not mean inevitable physical and mental decline. Each elderly person is an individual with a story, who has become old but who can still positively contribute.

The first step towards change is that the attitudes and perspectives of society at large must improve. The notion that illness in the elderly is an inevitable consequence of aging and that the elderly are little more than a drain on resources should be dispelled. This may be achieved through formal education and informally via creative use of the mass media. For health care professionals involved with care of the elderly (doctors, nurses, therapists, social workers, and psychologists), this is even more crucial. Adequate training of health care professionals is important. Both at the undergraduate and the relevant postgraduate level, care of the elderly should be incorporated into the curriculum. Apart from lectures and seminars, practical experience may be gained from home visits, visits to geriatric/psychogeriatric units, daycare and hospitals. Education about prevention and treatment of old age related conditions are essential. Greater knowledge will breed greater confidence in the delivery of care, and more practical experience will enable the health care professional to better anticipate the specific difficulties that may be encountered. This will help prevent discouragement and disillusionment in the face of management difficulties.

Improving the services and support for the elderly is another important aspect. This may require gaining the government's attention to

provide sufficient funds to develop such resources for the elderly. Apart from physical resources, human resources should not be overlooked. Adequate manpower in the field will help prevent burnout from overwork. Staff morale also has to be maintained through sufficient remuneration and welfare for them. Good human resource management that also ensures good personal mental and physical health among staff will help maintain energy to cope with work demands and view work towards the elderly as a challenge instead of a chore. This will in turn translate to better care and attitude towards their patients.

A multidisciplinary approach towards the care of the elderly is also important. This will usually include a team of doctors, nurses, social workers, occupational therapists, physiotherapists, speech therapists, psychologists etc. There are many limitations to a one-man band in caring for the elderly which may easily result in frustration and discouragement. Good communication among the various service providers is also critical in ensuring that there is no duplication of services, demarcation disputes, buck-passing or backbiting. Regular meetings or a coordination body is essential to ensure that grounds are adequately covered.

Finally, the health care worker should view his elderly patient as a person and not just as a clinical problem. Accepting the old as they are and working towards improving their overall quality of life instead of just focusing on getting them clinically well should be the goal of treatment. Then will he find his services towards the old be worthwhile, exciting and deeply rewarding.

REFERENCES

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TAN BOON YEOW, MBBS(S'pore), MMed(Family Medicine)
Senior Registrar, Normanby House, St Georges' Health Service,
Kew Victoria, Australia