

Editorial

Bridging knowledge in long-term care and support. Crossing boundaries between ageing and disability

During the next years over 15 million persons with disabilities will enter old age; and a similar number of elderly people will become disabled in Europe. This estimation has placed knowledge transfer between the fields of disabilities and ageing into the central point of the European health and social policy agenda.

Links do exist between the groups of persons with disabilities and the ageing population that go far beyond the subgroup of persons with both conditions. Experiences, methods and programmes may be shared in a broad range of topics, from concepts and values to the assessment and meeting of needs, or the development of tools for evidence based policy in both areas. Bridges have always existed across the two fields of disabilities and ageing, but they have been limited, and they coexist with significant barriers to communication and information sharing. Although health and social care providers have been encouraged to work in partnership and build interdisciplinary teams, the success of this approach has been limited.

New notions such as 'networks', 'knowledge brokering' and partnerships have entered this discourse but the lack of consensus and understanding about what they mean and how to implement it limits its use in the care sector. The health sector has already developed strategies for knowledge brokering, translational exchange of experiences and integrated care, while the social sector has developed the conceptual background in the areas of functioning, social inclusion and cohesion.

On the other hand, a series of key international documents have provided a new perspective on care and support for persons with disabilities and the elderly (i.e. Graz Declaration on Disability and Ageing, the UN Convention on the Rights of Persons with Disabilities, several international documents on ageing and the EU recommendation on care for dependent population in Europe).

There are a number of key and common topics across these fields that deserve international interest. For example, the existing difference between the concepts of autonomy, dependency, independency and inter-

dependency; the ontology and the semantic interoperability of the information systems developed in both areas; the best way to develop and to implement a holistic integrative care/support; or the procedures and experiences in translational research, transdisciplinarity, and in the development of multidisciplinary groups in research, education and management. Being a transrelational concept, bridging is not an endpoint, but a tool for reaching an integrative care and support.

The international conference 'Bridging knowledge in long-term care and support. Crossing boundaries between disabilities and ageing' (5–7 March 2009, Barcelona, Spain, <http://www.bridgingknowledge.net>), was organised by the 'Obra Social Caixa de Catalunya' with other European organisations and sponsored by the Executive Agency for Health and Consumers (EAHC), the Spanish Ministry of Health and the Department of Health of Catalonia. The current supplement of the International Journal of Integrated Care gathers the information produced in this conference. This is a first European and international knowledge-base in the field of knowledge transfer in long-term care. It incorporates an overview of the on-going policies and related cross-cutting aspects in the field of ageing and disabilities being developed by the Council of Europe (Garabagiu, *Council of Europe actions to promote the rights and full inclusion of ageing people with disabilities*), a critical summary report of the conference's content made by three researchers with long experience in knowledge brokering between these areas (McDaid et al. *Bridging knowledge: reflections on crossing the boundaries between long-term care and support*), and the abstracts with, if available, links to the presentations. This knowledge-base will eventually incorporate a Declaration on this topic agreed by the organising partners.

We are confident that this seminal conference will be just a first step of a long and fruitful expedition in new ways of exploring cooperation and care efficiency in the fields of disability and ageing.

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