

Comprehensive public health action for our aging world: the quintessence of public health policy

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Abstract

The number of elderly people is increasing rapidly because of decreasing mortality rates and increasing lifespans throughout the world. Policies and programs for elderly people are limited, and existing programs/policies are not implemented effectively towards the goal of healthier aging. Unlike other public health issues and actions, there is an urgent need to build an evidence-based comprehensive public health action policy for healthy aging.

Keywords

Geriatric health, public health action, aging, elderly, health policy, education

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Today's youth are tomorrow's older people. Currently, 8.5% of people worldwide (617 million) are age ≥ 60 years. By 2050, this number of people is expected to more than triple to 2 billion, and the global life expectancy is expected to increase by almost 8 years (climbing from 68.6 to 76.2 years).¹ This demographic change has several implications for public health because elderly people are likely to have disabilities, three-quarters of which are noncommunicable diseases. Lifelong health promotion and disease prevention activities can prevent or delay the onset of the rising burden of noncommunicable and chronic diseases. Early detection and treatment of these diseases is necessary to minimize their consequences, and individuals with

advanced disease require effective long-term care and support.² These services are best delivered through comprehensive primary care, which is dependent upon resilience of the health care system and supremacy of the public health action force.

Differences in public health taskforces and action levels between developed and developing nations have altered the priority of geriatric care.³ Public health activities can

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provide immediate benefits to community health. Unlike other domains of public health activities, geriatric health care requires quick public health action.⁴ For example, when a water supply becomes contaminated by microorganisms, the reason for the contamination is quickly identified and communities are advised to boil all drinking water until further notice. Steps are also taken to prevent similar health issues from recurring, thus protecting community health. Similarly, older people and their health should be prioritized, and quick universal actions are required in accordance with the nation's priority.

Public health action should draw on the capacities of older people. For example, older people's participation in volunteering, transmitting experience and knowledge, helping their families with caring responsibilities, and engaging in the paid labor force play critical roles in this growing population worldwide. Functional impairments can limit older adults' ability to engage in daily life⁵; hence, an ideal public health action should emphasize maximal engagement, thus improving the quality of life of older adults when they actively engage in the dimensions of wellness. Expanding the physical dimension of wellness to include the importance of evidence-based nutrition along with health care and physical activity must be an integral part of public health action. Stereotypes and negative attitudes regarding age could be abridged through public health education that advocates not only to elderly individuals but also to other community members. An active-aging philosophy needs to be established in our aging world.

Author contribution

SY contributed fully to this editorial.

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