

Mid Wales Regional Committee MID 04-01(p.4)

Date: Friday 2 November 2001

Time: 10.30am to 1.00pm

Venue: Village Hall, Aberporth

PRESENTATION TO THE

NAFW MID-WALES REGIONAL COMMITTEE by

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STRATEGY FOR OLDER PEOPLE IN WALES

LET'S NOT FORGET THE BIG IDEAS

In this presentation, the presenter will argue whilst there is no shortage of detail about the demographics of old age, or the factors that contribute to extended morbidity in old age, or the technical things we need to do to improve stroke or cancer care, what are not always clear in strategy documents, are the big ideas that are needed to drive the development of health care. To redress this imbalance, the presenter will outline the phenomena that cause extended morbidity in old age, before considering three big ideas that he believes should be central to the development of a strategy for older people in Wales.

In the first part of the presentation the presenter will consider the demographics of old age and how immunization, improved housing, reduction in road traffic accidents and modern medicine and surgery has extended life for people in the west. But along with

the extension of life there has been an extension of morbidity in old age that has lead one observer to comment that we are ' ... living longer but doing worse.' The reasons for this are clear; on the one hand, we now have population that has lived long enough to suffer degenerative diseases for which there are few identifiable risk factors, on the other, a population that is living longer but which has failed to address the risk factors that produce the common-or-garden diseases, and is being shored-up x, y or z lowering drugs.

Which big ideas are relevant to this situation?

The first big idea is high-level wellness. The presenter will make clear that this is not his idea, but one developed by Donald B Ardell and first presented in his book *High Level Wellness: An Alternative to Drugs, Doctors and Disease*. The components of high-level wellness are self-responsibility, nutritional awareness, physical fitness, stress management and environmental sensitivity. The presenter will argue that this big idea and the themes should be clearly articulated in all health strategies or service frameworks as it is these that will compress morbidity in old age for this generation and generations to come.

The second big idea is participation. The presenter will argue that for a country with a system of socialized health care, there is a democratic deficit in Wales that devolution is only just beginning to address. The presenter will suggest that it would be easy to lay the blame at the door of a paternalistic medical profession, but the problem goes deeper than that. He will argue that for too long, all health care providers have assumed that they know what is best for the population, which they clearly don't in the light of the above, and the only way forward is to involve consumers in all aspects of decision making.

The third big idea is dwelling. The presenter will remind the committee that when Martin Heidegger surveyed the ruins of Germany at the end of the Second World War he said that the greatest need was not for new houses, but that man must ever learn to dwell; the presenter will argue that the attack on the World Trade Center has again highlighted the importance of this debate. He will argue that health in old age is a changing mixture of familiar dwelling, fractured dwelling and new dwelling and that government in Wales has a responsibility to invest in each of these. He will close by suggesting that life for older people in Wales will only get better when dwelling again moves up the agenda.

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