

## Academy Hosts Conference on Meeting the Future Challenges of the Baby Boomer Generation

"The Road to 2015 and Beyond" draws 225 people to discuss important issues of care needs and caregiver recruitment and training

NEW YORK CITY, Sept. 23--Baby boomers say: "Aging is not for us." "We want to live better, not just longer."

Many aging baby boomers hold strong attitudes about how their later years should be, and their image differs greatly from how their parents lived out their later years, according to Robert Blancato, keynote speaker at "The Road to 2015 and Beyond: Meeting the Future Challenges of the Baby Boomer Generation." Mr. Blancato, who has a three-decade career in federal and local aging policy and is President of Matz, Blancato & Associates, was among the compelling speakers at the Sept. 23 conference hosted and organized by the Section on Social Work of The New York Academy of Medicine.

Stimulating addresses and workshops highlighted crucial aspects of baby boomer aging: policy making and politics; funding; health care; community involvement; models for living in the future; and new systems, roles and responsibilities. The 225 participants included social workers, physicians, nurses, hospital and healthcare facility administrators, and students. Setting the tone for the conference, Academy President Dr. Jeremiah Barondess characterized baby boomers as "a tsunami ... a clinical, policy, social tsunami" and noted that "they are a big-deal problem." In his welcome to participants, Dr. Barondess stated bluntly, "We are behind the curve in how to jointly have the health professions address a galaxy of issues" relevant to baby boomer aging. He went on to address the need for the fields of medicine, nursing, pharmaceuticals and even architecture to work together toward expanding the support systems needed by active (and not-so-active) baby boomers as they move into later phases of life.

How do policy makers and health care professionals address the issues facing baby boomers? This complex question was shaped into three goals for the day by Dr. Barbara Brenner, Mount Sinai Medical Center, in her introduction to the conference. The goals were: 1) to highlight key social and public health trends and policy needs over the next ten years; 2) to identify new or different paradigms of care and caregiving that need to be tested, studied, promoted, and disseminated; and 3) to develop models of multi-professional education and practice for dealing with these new paradigms. No doubt a tall order when talking about the 76 million people born between 1946 and 1964 (of whom one million are immigrants) – and one well met by the distinguished speakers and panelists.

## Keynote Address: Impact of the Baby Boomer Generation

In his keynote address, Mr. Blancato opened with an intriguing question: What will the baby boomer impact on policy will be? As a member of the Policy Committee of the White House Conference on Aging, and Executive Director of that Conference in the Clinton Administration, Mr. Blancato has a unique perspective on the question. He has observed that baby boomers don't intend to age "...or at least not in ways their parents did," he said, and as a result have a tenuous commitment to working toward policy changes. "Certainly, they participate – in cultural activities, sports, work. But we need a deeper commitment on the part of boomers as we all face the issues of aging," Mr. Blancato said. Key issues that he said need attention are: planning along the lifespan; the workplace of the future – with an intergenerational mix; communities and services available for baby boomers; family caregivers and their support; healthcare; and civic and social engagement. Financial health and economic security are especially coveted by baby boomers, who want to have enough to retire. Adequate Social Security and pensions, and continuing to work, are of great importance to many baby boomers. Mr. Blancato emphasized that a major concern is age-based discrimination in the workplace. There are many aged-based discrimination cases before the EEOC, he said, and

older workers "encounter discrimination at every turn."

Despite all of these pressing concerns, baby boomers fall "somewhere between enigmatic and inconsistent" when it comes to engaging politically to influence public policy changes, he said. "This population needs to get motivated by the issues that drive their votes." He challenged participants and boomers not to wait too long to get engaged in the many issues that face boomers: housing, re-schooling and re-training, better geriatric health care, and a new and more determined focus on long-term national health care.

Following the keynote address, two workshops ran simultaneously, addressing models for baby boomer living in the future, and ways to ensure an adequate supply of geriatrics-trained professionals. Panelists in the first workshop were Dennis Kodner, Executive Director of Brookdale Center on Aging at Hunter College; The Honorable Edwin Mendez-Santiago, Commissioner, New York City Department for the Aging; and Nancy Wackstein, Executive Director, United Neighborhood Houses.

Commissioner Mendez-Santiago shared a striking set of observations. "As I travel throughout the city, I see denial among a lot of people," he said. "People aren't dealing with the issues of aging – and 15-20 percent of our population is over 60." He noted that the rate of poverty among the urban elderly is increasing – in New York City, 17.1 percent of seniors are impoverished. Aging citizens are a diverse group: one of out two is a minority or immigrant, which can lead to disparities in identifying and addressing problems.

Additional problems arise because services to the aging are funded in specific categories, and often cannot be adapted to the needs of some communities. To address these problems, Commissioner Mendez-Santiago advocated greater support for caregiver programs that involve family and friends of the aging, and tapping into existing funding streams that can serve more diverse populations. In short, government needs to "move away from fragmentation" in order to deliver "services at the community level to our diverse aging population."

Ms. Wackstein echoed those sentiments. "The aging are not a homogenous generation," she said, noting that she has seen this firsthand during her leadership of United Neighborhood Houses, the non-profit umbrella organization for the 37 social service organizations known as settlement houses in New York City. "There is as much diversity here as in any other age group. And we need to move beyond a limited scope to a more universal approach with a more universal appeal." To meet this need, Ms. Wackstein advocated creating a network of services that allow people to "age in place" among family and friends, in situations where local organizations can "respond nimbly and quickly" to changes in needs.

In his remarks, Dr. Kodner focused on the need for a domestic long-term care model and discussed its implementation in several European counties, including The Netherlands and Germany. He also highlighted problems with the model, but said that American providers and policy-makers can avoid similar problems through the building of partnerships, preventative gerontology, and an examination of the role of urban neighborhoods in the aging process. He pointed to the United Kingdom's Social Care Institute for Excellence as a possible model for the United States.

Panelists in the second workshop discussed on a wide range of important professional issues, especially the shortage of geriatrics-trained professionals. The panelists were Dr. Ronald Adelman, Medical Director, Irving Wright Center on Aging of Weill Medical College; Dr. Terry Fulmer, McGriff Professor and Dean, College of Nursing, New York University; and Patricia Volland, Senior Vice President of the Academy and Director of its Social Work Leadership Institute.

The salary disparities between social work and other health care professions were cited as a barrier to better geriatric care. Social workers receive less public recognition and lower pay than other health professions, which are both barriers to recruitment, Ms. Volland said. Considering that 20 percent of the global population will be at least 60 years old by 2030, there is a pressing need to attract enough social workers to keep pace with aging populations and to influence the government's policies and financial commitment to social work care, Ms. Volland said.

Currently only three percent of social work students pursue aging specialties due to a variety of barriers, including a lack of geriatrics-infused curricula and mentors, ageism, and a shortfall of financial incentives. With generous funding from the John A. Hartford Foundation, Ms. Volland is leading efforts to increase the aging focus in social work graduate school programs nationwide through the Academy's Social Work Leadership Institute. The improvement of classroom instruction along with expansion of fieldwork will provide more students with positive experiences working with seniors, and lead more students to be excited, and trained, to work with older adults, Ms. Volland said.

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