

HIGH TECH AND HIGH TOUCH: ELDERCARE IN THE XXI CENTURY

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89% of Americans do not want to leave their homes when they age. Most of these people will live alone and receive support from a variety of health and community-based providers, family caregivers.

How will the long-term care system provide care to a growing number of seniors living in increasingly scattered locations? And more importantly, how can that system continue to provide quality care in the face of workforce shortages, rising care costs and decreasing resources? Technology has the potential to play a critical role in launching a new model of geriatric care that allows older people to live independently for as long as possible, supports family caregivers in the important work they do and gives health care providers the tools they need to deliver high-quality care at a reasonable cost.¹

The mix of caring people, technology, and expertise in gerontology is the key to being able to keep people living and aging within their own homes regardless of whether they are healthy and engaged or dealing with chronic physical illness or dementia.

The High Tech Element of the Equation: Technology Helps Seniors Live Independently

In March of 2008, the Center for Aging Services Technologies released a useful report on the state of technology in aging services. Three groupings of technologies are cited: health and wellness technologies, safety technologies, and social connectedness technologies.

Recently showcased at the Silver Summit at the CES in Las Vegas, there are many exciting technologies being developed to help seniors to stay independent and aging in place . Some of them are:

- Home Monitoring Systems - connect monitoring devices, deploying in ASP model with web interface including: emergency response, fall detection, passive motion monitoring (for persons with Dementia/wander risks), bed monitoring (for fall risks and incontinence). Intel, GE, Inpenda, and Grand Care are two of the providers at the fore- front of these technologies
- Tele-medicine Devices: Blood pressure, weight scale, pulse oximeter, all blue-tooth devices connected to a main platform that communicates information to the caregivers or medical centers. These can be combined with the home monitoring technologies

¹ On the *State of Technology in Aging Services report (2008)* by The Center for Aging Services Technologies (CAST). You can download the report from the website at <http://www.agingtech.org/ResourceLink.aspx>

- GPS Shoes designing footwear with a built-in GPS device that could help track down "wandering" seniors suffering from Alzheimer's disease. This will provide the location of the individual wearing the shoes anywhere on the planet and provide a virtual fence around the elder, enabling them to walk to familiar places but alerting others if they veer off track.
- Medication Monitoring Systems that range from InRange's EMMA device to the "smart" pill dispensers that work with sensors to alert them to missed dosages and give reminders of the appropriate time to take their medications.
- Walking aids like walkers that can steer away from obstacles and be retrieved by remote control or a cane that can detect warning signs when a person is in danger of falling
- Intelligent phones helping people with memory problems to remember who called last time or the name and relationship of the person calling
- Robotic Nurses developed to help nurses, home health workers and caregivers lift people who cannot walk or help older folks with other activities. A prototype is developed by Vecna Technologies of College Park, MD, with funding from the U.S. military
- Care and connection systems like Care Mavens, Independa, Grand Care and other technologies that help with the care of our elders and help keeping them connected.

There are serious barriers to technology adoption, including negative experiences and misconceptions, lack of financial incentives, lack of consensus on value, and inadequate infrastructure. More work needs to be done to support research on the value of aging technologies, involve older adults in product design, and design new financial models which combine prospective payment and pay for performance.

A common belief is that seniors do not use gadgets or Internet based technology. But, according to the Pew Research Center's Internet & American Life Project, larger percentages of older people are doing more activities online, The biggest increase in Internet use since 2005 can be seen in the 70-75 year-old age group.. According to Ken Leebow, author of *300 Incredible Things for Seniors on the Internet*. It is a natural progression "some people are bound in their homes, so it's an unbelievable way (to communicate)."

Leebow points out many helpful sites for seniors, starting with SeniorNet, which hires seniors to train beginner Web surfers. Need larger type on your screen for easier reading? SeniorTips.Com guides you through the steps. The AARP website is exceptional for topics like estate and financial planning, health, community engagement and politics. AARP also tries to simplify the Internet by recommending Web sites, like the 100 best health Web sites. On the lighter side, iGrandparents.com is a fun site to plan activities with the grandchildren. In brief, the upcoming dramatic surge in the aging population, seniors' desire to remain at home, and the shrinking long-term care workforce should provide the U.S. with the necessary mandate to promote Aging in Place technologies. Now is the time to create awareness of these technologies and demonstrate their value.

On the other hand, although technologies are badly needed, we need to remember the human factor. People need to be involved with other people. Sometimes, when reading the exciting reports of all these new high tech devices and the jobs they will perform it is painful to see what isn't discussed - the

human side of high tech. Common sense and the human touch can save lives and keep elders safe at home, and will never be substituted by a set of bells and whistles.

The High Touch Element of the Equation: Personalized Care and Wellness

“The general public believes that technology will improve health care efficiency, quality, safety, and cost. However, few people consider that these same technologies may also introduce errors and adverse events. Given that nearly 5,000 types of medical devices are used by millions of health care providers around the world, device-related problems are inevitable. While technology holds much promise, the benefits of a specific technology may not be realized due to four common pitfalls: (1) poor technology design that does not adhere to human factors and ergonomic principles, (2) poor technology interface with the patient or environment, (3) inadequate plan for implementing a new technology into practice, and (4) inadequate maintenance plan” (Powell et al (2008)

Elders deserve personal attention and care to address their physical, emotional, mental, and spiritual needs and desires. Gerontological Wellness programs emphasizing the holistic nature of aging help people to, not only age in place, but also unfold their full potential at any stage of the process. The aging process is a challenging yet rewarding period in the life. Besides offering physical care, this model encourages the design of different wellness activities and interventions to support the emotional and spiritual well-being of people living at home through one-on-one contact, group activities and outings. This furnishes people with well-rounded nurturing that goes above and beyond the standard aspects of the currently offered care.

In short, a comprehensive model that assures safety, provides choice to the elders to age in place with dignity, and delivers peace of mind for family members, friends, and professional caregivers must include personalized, homecare, gerontological wellness AND technology to meet the multilayered needs of the seniors in the 21st Century.

About the author:



Doris Bersing PhD

Doris received her doctorate from L’Universite de Toulouse in France. As a clinical psychologist, she has dedicated 30 years to teaching and providing clinical care for women, LGBT population, geriatric population, and the terminally or chronic mentally ill. She has taught and led therapeutic groups and academic circles on several continents. Doris is responsible for formulating Living Well’s business and marketing strategy, creating the company culture, leading public relations efforts, representing management and the board to the general public and shareholders, and maintaining corporate integrity.

Prior to co–founding Living Well Assisted Living at Home, Dr. Bersing was CEO for Pacific Institute a leading provider of psychological programming, senior services, education and research promoting individual and community wellness while teaching new perspectives on mental health, and specially on aging. At Pacific Institute she unfolded all her expertise in training and education to lead and design a cutting-edge training program in Gero-psychology that received regional accreditation and was on its way for nation-wide recognition. Doris is also a faculty member at

the California Institute of Integral Studies and Saybrook Graduate School A pioneer for the practice of existential and humanistic gero-psychology, Dr. Bersing takes at heart all initiatives to build the critical mass that will change the face of the field for new generations of clinicians. A mentor in spirit and action, she devotes her life to better that one of her clients, associates and students. Author of several books and articles, Doris is now preparing a book about feminism and ageism titled: *Still a chance: from Crone to Mentor*.

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