

Latin America is Prepared to Face the Challenges of an Aging Population?

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The occurrence of psychiatric disorders is common in old age, considering that at least 12% of the elderly living in the community has a diagnosable mental disorder, in the case of patients hospitalized for problems of organic type is estimated between 40-50%, and in nursing homes about 70 to 94% (United Nations, 2002).

When asked how older a person with mental illness, the answer is that these patients patient aging has the same characteristics as that of any other person, added to their disease risks, such as visual and hearing impairment, poor dental and oral health, excessive medication, difficulty in detecting associated problems, poor access to medical care and poor research of mental diseases of old age (World Health Organization, 2003).

The accelerated aging phenomenon as population change process is unique, occurring as never before occurred in the history of mankind (Bell, 2007). While the population aged 60 and over has grown significantly over a prolonged time most industrialized countries, in Latin America and the Caribbean demographic indicators show that aging is occurring at an unprecedented speed (Aranibar, 2001). In Latin America, where changes in mortality and fertility have been stable in a few years, the aging rate is much higher than in Western Europe and North America, where the reduction in mortality and fertility occurred gradually over long periods (Ribotta, 2008). The rapid change in the age structure of the population is leading to significant changes in policies, plans and programs of most countries in the developed world. In these countries, the aging of the population has been accompanied by an increase in research on the characteristics and consequences of population aging, particularly with regard to mental health (Peláez, 2005). The budget for the National Institute on Aging in the United States invests in investigating various aspects of aging population is a good indicator of the importance of the issue in the context of public policy in this country. Also, Canada and most Western European countries have been or currently performed numerous surveys that collect information directly or indirectly, on the health of seniors and related issues (Franco, Kirkwood, Powell et al., 2007). It is disturbing that in Latin America and the Caribbean, the rapid growth of the older population is not accompanied by an increase in research on the meaning and implications of this process, especially because the combination of population dynamics and institutional contexts social and fragile political increase the magnitude of the problems and their implications for developing countries (Dabove, 2011). In a recent review of information sources for the study of aging in Latin America and the Caribbean, shows that with the exception of the database produced by the SABE study, no other enabling comparative studies on health in aging (Paredes, Ciarniello, & Brunet, 2010).

In 2005, Latin America lived about 48 million elderly, accounting for 8.8% of the population; it is estimated that in 2030 will be elderly

114.5 million people, representing 16.3% of the population living in the region (Batthyány, 2009). The Latin American population is aging faster than projected, which poses challenges in terms of equity, quality and coverage of social services, pensions, academic, curricular renewal geriatric and gerontological components, strengthening research, cultural work, challenges terms of institutional arrangements, new programs of promotion and prevention for older persons, the economic sustainability of the adult in the last stages of life, prevention of cognitive impairment, etc. (Wong & Díaz, 2007)

In The American System of Human Rights, the only binding instrument that explicitly incorporates the elderly is the Protocol of San Salvador. Moreover, called Soft Laws instruments (such as UN Resolution 46/91, and the Declaration of Brasilia, 2007) have led to a significant improvement in terms of recognition of the rights of the elderly, have built a moral commitment of States to adopt specific measures to benefit the elderly population, but, however, are not binding on those States (Duarte et al., 2005; Kinsella & Phillips, 2005).

While the situation is different for each individual country and even between different regions of the continent, chronic financial problems of Latin America negatively impact this population: 5% of the elderly benefit from a subsidy in money, receiving an average of 37 dollars a month. These resources are insufficient considering that more than half of these elderly are below the poverty line, earning less than monthly \$ 110, and 15% of them are below the poverty line, their income does not allow them to even access a basic food basket (Abdalá, Geldstein, & Michaszula, 2000). The elderly populations living in poverty have received little attention from researchers and policy makers. A limited number of studies have focused on the relationship between aging, gender and poverty, especially if this equation is added mental illness (Bartoll et al., 2013; Nandi et al., 2013).

Presented the current status of the aged population in Latin America does next big question arise: is the region prepared for the challenges posed by an aging population, and particularly mental health of the elderly?

The answer is seen in poverty social programs and dispersion due to the lack of clear policies. To develop policies, programs and plans that improve health during aging, a better use national surveys and surveillance systems. It is also necessary to make international efforts to gradually create sources of information that provide benchmarks to compare the situation of older people in different countries of the region and to accumulate evidence to design interventions and subsequently evaluate the impact of policies, plans and programs (Uribe-Rodríguez et al., 2006; Wilkinson, 1996).

The conclusion is that Latin America in general, is not ready to take on the upcoming changes related to the aging population. While this is a concern, there is still time to start a job that will address demographic change in the best way possible, considering that this is a different process experienced by developed countries.

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