We gratefully acknowledge a generous grant from Pfizer Pharmaceuticals, Pfizer, Inc. for the printing and distribution of this document.
EDUCATION

IN PSYCHIATRY OF THE ELDERLY

A TECHNICAL CONSENSUS STATEMENT

This document is a technical consensus statement jointly produced by the Geriatric Section of the World Psychiatric Association and WHO, with the collaboration of several NGOs and the participation of experts from different Regions.

It is intended to provide a basic guide for all those involved in the development and implementation of education in the fields of mental health and mental health promotion for older persons.

KEY WORDS: psychogeriatrics / elderly people / training / health education / mental health care.
CONSENSUS STATEMENTS ON PSYCHIATRY OF THE ELDERLY

The publication of this document represents the culmination of three years of work jointly developed by WHO and WPA, particularly through its Geriatric Psychiatry Section. Of course we are very proud of it and hope it will receive the same attention and have the same impact as those of the first consensus statements.

The innovative operational model through which this document was arrived at is indeed already interesting on its own. Although an initiative primarily from WPA, several other NGOs, some of the most relevant ones to the area of Psychiatry of the Elderly were also involved, thus setting a standard which cannot be ignored in future similar exercises. In addition, the meetings for deliberations were hosted by the Psychogeriatric Services of the University of Lausanne, which is a WHO Collaborating Centre for Research and Training in Psychogeriatrics. The private sector was also involved, since it was financially supported by a generous grant from Pfizer Pharmaceuticals, Pfizer, Inc.

We would like to express our gratitude to all institutions involved as well as to those who participated in the conference, and who are named in the Annex. Our particular appreciation goes to the two Co-Chair of the meeting, Prof. J. Wertheimer and Prof. T. Arie and to the Co-Rapporteurs, Dr N. Graham and Prof. C. Katona.

Dr J. M. Bertolote
Department of Mental Health
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FOREWORD

Psychiatric troubles are particularly frequent in old age. They are becoming predominant with demographic aging and raise important questions in terms of public health policies. The challenge is already of concern in developed countries since several decades. It is starting to be so also in developing ones, with life expectancy increasing progressively.

Psychiatric problems in the elderly have very complex causes and consequences, implicating among others, brain and physical diseases, personality factors, social situation. They are matter of prevention, treatment and rehabilitation. They are found both in the community and in institutions (general and psychiatric hospitals, long stay facilities, outpatient departments, day care centres, etc.). They consequently concern a wide range of persons including, apart from patients, the public in general, relatives, professionals involved and political and administrative representatives.

Two previous consensus statements produced guidelines on Psychiatry of the Elderly and on the Organization of Care in Psychiatry of the Elderly. This third one focuses on Education. This point is evidently crucial for the dissemination of knowledge, experience and practice in this field. The topic is diverse, going from biology of aging to clinical aspects and to sociological considerations. The public varies from lay people to professionals from different horizons. The aim is to propose wide guidelines favouring an education of good quality, taking into account the complexity of the subject to teach and of the public concerned. This consensus statement reflects the views brought by representatives of the main international associations involved in psychiatry of the elderly.

Professor J. Wertheimer
Chairman - Geriatric Psychiatry Section
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1. INTRODUCTION

The World Health Organization and the World Psychiatric Association have recently published two consensus statements on the scope of psychiatry of the elderly and organization of services in psychiatry of the elderly.

The first consensus statement described the specialty of psychiatry of the elderly and made several recommendations with regard to training and education (1).

- The specialty of psychiatry of the elderly requires a grounding in general psychiatry and in general medicine as well as training in the specific aspects of both psychiatric and medical conditions as they occur in older people. Psychiatry of the elderly should be taught in the variety of settings in which it is practised.

- Training schemes for all health and social care workers should include a component on mental health care of older people. Training in mental health care of older people should be offered at both undergraduate and postgraduate level and also during continuing professional development.

- Education and information about mental health care of older people should be offered to the general public and to carer groups. The development of appropriate training manuals with culturally appropriate material should be achieved for all groups of professionals and carers.

The second statement described the organization of services in psychiatry of the elderly and emphasized the need of all concerned for appropriate education, training and information (2).

Both Statements take account of pronouncements by the United Nations and the World Health Organization bearing on health and access to health care (3-6).

This third statement explores educational issues in greater detail. Its objectives are to:
• promote development and action on these issues at every level (local, regional, national and international) for all those concerned;
• promote an understanding on these issues and encourage positive attitudes;
• describe an approach to, and a core content for educational programmes;
• indicate the variety of groups to whom education should be offered;
• encourage the evaluation and continuous updating of all these activities.

2. PRINCIPLES

Education in this field should follow modern principles of adult education. It should:

• offer clear learning objectives centred on the learner’s needs;
• ensure that learners are actively involved in their learning;
• address attitudes and skills as well knowledge;
• be appropriate for the context and culture of the learner;
• be systematically evaluated;
• be ready to challenge assumptions and acknowledge controversy where it exists;
• respect the spirit of the relevant recommendations from the UN and the WHO.

3. NEEDS

It is necessary to consider to whom education should be offered, what should be taught and teaching methods.

Education for whom

• health and social care professionals - undergraduate, post-graduate and continuing education;
• health and social service managers;
• other care workers who constitute the bulk of care staff, especially in longer-stay institutions, community and primary health care;
• family carers, neighbours and others;
• voluntary workers;
• people in professions not specifically related to health but on whose work the mental disorders of old people impinge (e.g. lawyers, policemen, journalists, clergy, architects and designers);
• public policy makers;
• the general public.

What to teach?

The people concerned with this field range from professionals (generalists and specialists) to the lay public. It is obvious, therefore that the needs and levels of different groups will vary widely. Nevertheless there is basic information which is common to the needs of all. What follows is a core curriculum primarily derived from the learning needs of health professionals. Attitudes, knowledge and skills are embodied in different degrees in each of the items on the following list.

• The processes of ageing in individuals.
• Demography, economics and politics of ageing societies.
• Epidemiology, pathology, clinical features, assessment, diagnosis, treatment and management of the mental disorders of old age emphasizing the features which differ from similar conditions in younger people.
• The physical disorders and impairments of function which commonly occur in old age.
• The special significance in old age of the interdependence of mental, physical and social factors.
• Prevention and health promotion including recreational and spiritual issues.
• Ethical and legal issues.
• Planning, provision and evaluation of services in different settings.
• Carers: needs and support.
• End of life issues.
• Multidisciplinary team work.
• Interviewing and communication skills.
• Fostering of positive attitudes, insight into the reasons for negative attitudes, and realistic expectations.
Teaching methods

Guiding principles:

- Many who work with the elderly do so under pressure and may feel they have no time to teach. Every activity of a service is a fruitful educational opportunity, ranging from a visit to old persons in their own homes to a meeting of a service planning committee.

- Formal education should fit with different learning styles. The best way of accomplishing this is to make a variety of different teaching formats available for learners. These may include large and small group teaching, tutorials and seminars.

- Carers and users of the service can make a significant contribution to multidisciplinary groups.

- Education for multidisciplinary groups can facilitate team work and dispel inter-professional misperceptions.

- Teaching thrives on association with research and encourages critical thinking in learners. Where appropriate, learners should themselves participate in research.

Media (radio, television, newspapers, etc.) - including materials which range from documentaries to dramas - are excellent ways to educate patients, caregivers, the public and professionals groups. Already available information and educational materials which are culturally appropriate should be used and further developed.

Information technology offers innovations such as distance-based education, video conferencing, internet, CD ROM programmes and computer teaching modules. These are also useful.
Evaluation

Evaluation of teaching is always desirable and depends on prior setting of learning objectives. Accepted methods of evaluation need to be applied. Aspects for evaluation may include:

- Satisfaction of the learners with the teachers and the course content.
- Measurable change in knowledge, skills and attitudes.
- Improvement in patient outcomes.

4. CONCLUSIONS

There has been considerable growth in awareness worldwide of the importance of the mental health of older persons, especially in countries experiencing rapid population ageing. In some countries psychiatry of the elderly is a recognised specialty.

The importance of effective education for all those involved with the care of older persons with mental disorders is now widely acknowledged. While a great deal has already been achieved including the development of excellent teaching resources, there remains a pressing need in many situations for the establishment and implementation of teaching programmes. Improved access to existing resources should be facilitated through international exchange and continuing research.
References


**ANNEX**

Consensus Meeting on Education in Psychiatry of the Elderly  
Organized by the World Psychiatric Association, Section of Geriatric Psychiatry  
Co-sponsored by the World Health Organization  
Hosted by the Lausanne University Psychogeriatrics Service  
Lausanne, 14-16 May 1998

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