

## **EDITORIAL**

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The world population is aging and although it is often referred to as a calamity, because of the costs associated with the different social, individual and institutional actors, aging itself is not a negative fact.

In fact, the political orientations of the UN and WHO, among other regional and national institutions, have been based on the bet on life paths, marked by trajectories of success.

This situation is based on the Guidelines for Active Aging and its principles are identified while proposing a theoretical model that explains Active Aging. All pillars, safety, health and participation, are placed at the same level as leaving an analysis of aging only from the health point of view. The advance of this model added another pillar, of fundamental importance, lifelong learning. The perspective is on the centralization of the aging person, author of its own path in life. Of course, the resources available to facilitate it are of enormous relevance, since their access and adequacy can radically change the quality of life.

The emphasis on lifelong learning presumes that people's attitude is open to the new, to the different, in a constant movement of adaptation and search for a balance between gains and losses.

The determinants of active ageing have different nature, such as personal, economic, social, behavioral, social and health services, not forgetting those of the physical environment, in addition to the transversal ones such as gender and culture. It is then comprehensive that the material and human resources can influence the determining factors and modify the experience of the elderly.

Breaking preconceptions and motivating to adherence behaviours that are more in accordance with well - being and health are the focus of professional actions. This way, in order to share this positive perspective of aging in society, the training of human resources must be established.

The active role of the academy is highlighting, as it can develop research projects that reveal unknown areas and important methodologies that facilitate professional intervention, while influencing the training of future and current professional's.

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In addition to the active aging movement, there are personal, social changes, and age increasing changes, which often leads to co-morbidity and polymedication. On the horizon, processes of fragility and dependence can be drawn. The prevalence of fragility is growing, with the geriatric syndrome common in people over 80 years, which accumulate other

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morbid situations, so that a small event of stress can lead to institutionalization or death. Care settings are complex and therefore must be monitored to fulfill their therapeutic role.

Examples are the effect of alarms on the safety of patients admitted to intensive care units; and the development of nurses' emotional competencies to deal with complexity. The management of these situations can happen in a community or hospital context, and the responses must be articulated in an interdisciplinary and intersectional way, including innovators and industry. The answers must be different, but adequate and visible by innovation.

Therefore it is necessary to reformulate programs and intervention strategies so that caregiving is integrated and the objectives are not only thought at one level, but global, for that the results contribute for those involved. It is important, therefore, to think of policies and programs in a systemic and coordinated perspective where different sectors intervene in a partnership environment.

Along with other Regions of the World, the European Region's current concerns are to guarantee the right of quality of life for all senior citizens, moving towards harmony with those involved: public and private; Citizens and care providers, Politicians, entrepreneurs, innovators and industry, recognizing that there is a need for model policies and programs that can be tested, monitored at the local level, and transferable to other realities.

Thereby strengthened the idea that lifelong education is a key strategy for citizens and professionals, because when dealing with technological responses, digital literacy is necessary. The differences in available resources are effective among the different States, generating inequities in care access. Therefore, efforts to achieve policy convergence that improve quality of life are relevant. Quality of life is a person's right that must be fulfilled through the intervention of various agents.