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Editorial

Improving the daily life of people who are ageing with disabilities

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Increased life expectancy brings challenges not only at the individual level but also for healthcare and society more generally, and research on ageing and health is a priority, worldwide. Occupational therapy research has the potential to contribute to the development of knowledge in these areas; therefore, we should take on the challenge within our profession and with others, to develop novel projects in close collaboration not only with other health scientists and gerontologists but also with researchers in preclinical and clinical disciplines, and also those from the social and engineering sciences. But despite the need for such research, it is still in its infancy, internationally.

While we usually refer to ‘older’ people as those over 65 years old, the definition, being based simply on chronological age, accommodates marked individual variation. Alternative definitions that are sometimes used include the ‘third age’ and ‘fourth age’, with third age referring to older people still enjoying a period of good health and functioning and fourth age indicating the beginning of declining health and functional capacity, and characterized by dependence on others in daily life (Phillips et al 2010). The
proportion of the population that is ageing with disabilities is increasing (Jensen & Molton, 2010), and this deserves attention. For those who encounter injury or chronic disease earlier in life than most, the ‘fourth age’ may start earlier than for people in general. Consequently, necessary longitudinal research on the ageing process should include those ageing with chronic diseases and disabilities (Walker, 2011).

For example, within neuroscience, even if many of the diseases under study in preclinical and clinical research projects predominantly affect older adults, the primary focus is often on diagnosis, with relatively little attention paid to aspects of ageing. For example in research on Parkinson’s disease, old age is often used as an exclusion criterion. Overall, the tangible benefits from preclinical work are insufficient, and clinical studies have a limited influence on the daily life experience of people living and ageing with neurodegenerative diseases. Evaluations of clinical therapies and interventions seldom mirror the needs and expectations of the affected individuals and their families, and researchers have not sufficiently involved them in identifying and prioritizing research issues.

Occupational therapy research has the potential to address such issues, but in order to succeed we must develop innovative avenues for fruitful interdisciplinary collaboration. Much occupational therapy research remains mono-disciplinary, and its readership is similarly limited to occupational therapists and related health professionals. However, in bringing both practical and professional experience, and a growing body of theory, to gerontology, occupational therapy is today actively contributing conceptual input and methodological expertise, as well as new empirical knowledge within the field (Wahl & Iwarsson, 2007).

How to tackle the gaps of knowledge outlined in this editorial? Some suggestions include the necessity to invest in new research collaborations, address novel questions, and offer theoretical and methodological expertise hitherto unknown in research on
ageing and relevant fields. Occupational therapists need to publish in journals outside the profession, just as other disciplines are encouraged to publish in occupational therapy journals. Though merging different research traditions and perspectives we gain the potential to break new ground in improving the daily life of people ageing with disabilities.
REFERENCES


