



Aging population places focus on health care jobs

By Dave Cranshaw, Staff Writer

The rapidly growing elderly population and the aging baby boomer generation will increase job demand in the gerontology field in the coming years, according to a U.S. Department of Labor report in May of 2004.

Locally, the R.I. Department of Labor and Training predicts the nursing and residential care facilities industry is expected to add more than 5,000 jobs between 2002 and 2012, placing it as the fifth-largest sector in terms of expected growth over the 10-year period.

The jobs are increasing, but the number of elderly people is growing at a quicker pace.

The R.I. Department of Elderly Affairs reported more than 190,000 of the more than 1 million people in the state are 60 years or older; of these, 152,000 are 65 years or older. Rhode Island ranks eighth in the country for the most residents aged 60 and older, and ranks fifth in the largest number of people age 85 and older.

Furthermore, projections for the year 2030 indicate that 20 percent of the U.S. population will be age 65 and over – and they are living longer.

The Centers for Disease Control and Prevention reported in 2002 that the average life expectancy was 77.3 years, compared to 47.3 years in 1900.

What does all this mean?

In June, a White House conference on aging reported that there are currently about 6,600 certified geriatricians. About 36,000 geriatricians are needed by 2030, according to the report.

Betsy Sprouse, senior academic advisor at the AARP and president of the Washington, D.C.-based Association for Gerontology in Higher Education, said the combination of the aging of the population and the decline in the service industry is a driving need for more workers in the gerontology field.

Older people “need help to live active, healthy lives in their own homes,” there is a need for people to fill

jobs in direct service: personal care aides, home health workers and companion housekeeping helpers, said Sprouse.

There is also a need for professionals in gerontology to develop a “new vision” for aging that addresses how to age successfully and trained people to address the needs of the aging population, she said.

Phillip Clark, professor and director of the University of Rhode Island program in gerontology – one of the oldest programs in the nation – and the Rhode Island Geriatric Education Center said people in the nursing, pharmacy and allied health field are beginning to recognize that the people they will be working with will be older people.

However, not all college students are looking toward a career in gerontology.

Vincent Mor, chair of the department of community health at Brown University, said nurses and physicians are less likely to want to work with “sick old people.”

There is no incentive program for student loan forgiveness for doctors who complete their residency in geriatric medicine like the financial benefits for doctors who work in areas that lack adequate medical care, said Mor.

The number of people 85 years old and older with serious, long-term health care needs will triple by 2050 and the number of nursing home residents and the amount of people that require home care will increase as well, he said.

Mor has not seen a dramatic increase in the number of people interested in gerontology. Financial incentives may be a start, he said, noting that the average health care worker in a nursing home versus a hospital will make 10 to 30 percent less.

Alfred Santos, president and COO of the Rhode Island Health Care Association, notes the industry has known for years that there were potential work force issues but the solution is not a simple one with the baby boomers coming.

There are not enough trained instructors to teach nurses, he said, noting that more training dollars are a must. In addition, wages must be increased to attract more nursing aides to the field, he said.

Rachel Filinson, professor of sociology and coordinator of the gerontology program at Rhode Island College, said even with the increase in the number of certified nursing assistants and long-term health care professionals, it is difficult to keep up with the demand.

Traditionally, these positions experience a high turnover rate because they are historically not unionized, low-paying, stressful, and offer no benefits, she said.

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