

Until when?

Ageing is a polysemic phenomenon, with individual, family, and collective implications. In 2020, the World Health Organization proposed the definition of the Healthy Ageing Decade (2021-2030)¹, seeking to create opportunities to improve individual ageing and community life, with a primary focus on the elderly and the offer of care centered on the individual, duly coordinated and integrated with other policies.

In the case of Brazil, the country has experienced a rapid and intense demographic, epidemiological and nutritional transition in recent decades, with impacts on different public policies, namely health, education, social assistance and welfare, and urban mobility, among others. In addition, there has been a marked increase in the population aged 80 and over, with a corresponding upsurge in the number of people who will need help to perform the basic activities of daily life².

However, the implementation is lacking specific public policies that combine the promotion of healthy ageing, the creation of age-friendly communities and the offer of long-term care (LTC), as recommended by the WHO. Our policies and services are out of step regarding the skills and competencies necessary for an inclusive society for people of all ages. Furthermore, despite the serious issues related to Brazilian social, ethnic and gender inequalities, this mismatch undoubtedly reveals the structural ageism in our society.

To date, the health care of the elderly population appears to be linked to the control of diseases and noncommunicable diseases and conditions (NCDs). The problem is that primary care professionals are not trained to address the specific needs of the elderly, and services usually identify the elderly when they have complications, or require visits to emergency units, hospital admissions or LTC insufficiently integrated into the health network per se and jointly with other social policies. Thus, this thematic issue of the *Ciência & Saúde Coletiva* journal discusses several of these shortcomings and obliges us to rethink the provision of services in line with our reality.

To deliver adequate care for the needs of the ageing population, it is important to understand our population. In this respect, appraisals such as the National Health Survey (NHS), ELSA-Brasil and ELSI-Brasil are crucial. The NHS served as a data source for several of the articles in this issue and made it possible to evaluate the changes in health behaviors in the elderly population; the association between the living environment and the positive perception of health; the association between television screen time and the risk of obesity; and the prevalence of complications due to Diabetes Mellitus. ELSA-Brasil provided data to investigate muscle and bone health. Another article used information from the health services to analyze the temporal trend of falls among the elderly population in Brazil, and the state of São Paulo, between 2000 and 2020 and estimate the economic impact on the SUS in 2025.

Two other articles address taboo themes: one discusses prejudice rooted in society, including among health and social welfare professionals, which result in the lack of the provision of LTC to people not belonging to the cis-heteronormative model. The other is providing Supported Decision-making such that all people can exercise the right to make decisions inherent to their lives, including those with dementia.

Thus, differences and inequalities throughout the course of life have an impact on the multiple forms of ageing, but it is necessary to build up solidarity to reduce iniquities. This implies no longer categorizing elderly people as “winners” – those who get older and remain active and healthy – and “losers” – those that require care, especially LTC –, but creating communities that reinforce the participation and protagonist approach of the elderly through accessibility, decent housing, inclusive public spaces, cultural and leisure activities, that also ensure LTC at home, in the community and in collective housing for those who need it.

Karla Cristina Giacomini (<https://orcid.org/0000-0002-9510-6953>)¹

¹ *Secretaria Municipal de Saúde, Prefeitura de Belo Horizonte. Belo Horizonte MG Brasil.*

References

1. World Health Organization (WHO). *Decade of healthy ageing 2020-2030* [Internet]. 2020 [cited 2023 set 10]. Available from: <https://www.who.int/docs/default-source/decade-of-healthy-ageing/final-decade-proposal/decade-proposal-final-apr2020-en.pdf>.
2. Camarano AA, Welle A, Romero DE, Silveira FG, Félix J, Giacomini KC, Botega LA, Maia L, Servo LMS, Ribeiro MM, Veras RP, Palomo TR, Noronha JC, Graever L, Gadelha P. *Doenças crônicas e longevidade: desafios para o futuro*. Rio de Janeiro: Editora Fiocruz; 2023.



