

Volume 13, 23 October 2013

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2013; Annual Conf Suppl; [URN:NBN:NL:UI:10-1-114692](https://nbn-resolving.org/urn:nbn:nl:ui-10-1-114692)

Copyright: 

Conference Abstract

A building blocks strategy for developing bridging and knowledge transfer between ageing and disability care and policy

Luis Salvador-Carulla, Professor of Disability and Mental Health, University of Sydney, Australia

Michelle Putnam, PhD, School of Social Work, Simmons College, Boston, USA

Andria Spindel, PhD, March of Dimes Canada, Canada

Margaret Campbell, PhD, Institute for Independent Living Washington, USA

Tamar Heller, Rehabilitation Research and Training Center on Aging with Developmental Disabilities, University of Illinois at Chicago, Chicago, IL, USA

Jennifer Mendez, Associate professor, School of Medicine, Wayne State University, Detroit, Michigan, USA

Christine Bigby, PhD, Department of Social Work and Social Policy, La Trobe University, Australia

Jerome Bickenbach, PhD, Department of Health Sciences and Health Policy, University of Lucerne and Schweizer Paraplegiker-Forschung, Nottwil, Switzerland

Matilde Leonardi, Head Neurology, Public Health, Disability Unit Foundation IRCCS Istituto Neurologico Carlo Besta, Milan, Italy

Barbara LeRoy, PhD, Developmental Disabilities Institute, Wayne State University, Detroit, Michigan, USA

Correspondence to: **Luis Salvador-Carulla**, University of Sydney, Australia, E-mail: luis.salvador-carulla@sydney.edu.au

Abstract:

Purpose: The need for bridging between disability and ageing is significant for two primary reasons: 1) the growing population of persons aging with long-term chronic conditions and disabilities who have not been part of most traditional long-term care supports and service programs for older adults, and 2) the increasing trends towards both integrated health and social care systems and merged care systems for older and younger adults with disabilities.

Aim: To raise social awareness and policy action to promote bridging and knowledge transfer between ageing and disability (A&D) care and policy

Methods: An expert-based building blocks approach has been followed to develop a long-term multi-step policy strategy. These blocks were developed by iterative discussion and they include the following deliverables: 1) Series of international conferences on the topic, 2) Series of policy

13th international Conference on Integrated Care, Berlin, Germany, April 11-12, 2013

documents including two declarations: a) A position statement (Barcelona, 2009) and b) A policy action plan (Toronto, 2012), 3) Development of a consensus-based formal definition and generic description of the field of bridging and knowledge transfer in A&D, 4) Development of a preliminary knowledge-base in cooperation with IJIC (Supplements in 2009 and 2012 including editorials, reviews and conference abstracts and slideshows), 5) Development of the Bridging Ageing and Disabilities International Network (BADIN), 6) Development of stable links with key scientific organizations, research centres, public agencies, stakeholders' and international organizations.

Results: Deliverables up to block 5 have been accomplished. The iterative discussion grounded in the summary of findings produced an expert-based consensus statement with global scope and specific plans for action. A definition of bridging was developed identifying its purpose as improving efficiency, equity or care, inclusion and support at all levels from person to society. The expert group found bridging to encompass a range of concepts, tasks, technologies and practices aimed at improving knowledge sharing and collaboration across stakeholders, organizations, and fields of care and support for persons with disabilities, their families, and the aging population. Tasks involved in bridging were determined to be activities dissemination, coordination, assessment, empowerment, service delivery, management, financing and policy. Specific priority areas for bridging related to long-term care were proposed to be support of families and caregivers, training and education of direct support professionals, self-determination, access, availability, and affordability of supports and services, ethnical issues related to non-discrimination in areas such as palliative care and end of life.

Recommendations for action include: development of a formal agenda for bridging aging and disability, provision of public and private financial support for research and scholarship that advances the science of bridging, and the incorporation of bridging and knowledge transfers as key strategies in policy planning where all citizens can fully participate.

Policy implications: This conceptual framework and building-block approach has created a scaffolding to aid the development of the science of bridging ageing and disability knowledge, practice, and policy in long-term care supports and services. It translates existing knowledge and policy directives that support the concept of bridging into a working model that facilitates international dialogue about bridging. It should also articulate closer links with similar developments in other innovative areas such as integrated care and person-centered health.

Keywords

bridging, knowledge transfer, disabilities, ageing

Presentation available at <http://www.integratedcarefoundation.org/content/24-international-lessons-implementing-integrated-care-1>