**Insights into Global Ageing, Health Promotion, Visual Impairment and Dementia amongst the Older Adults**

1. **Global Ageing**

Historically, old age has been viewed as a revered milestone to almost every individual. The population trend has thus been given much precedence, and it has been discovered that there is an overwhelming increase in the ageing population worldwide. According to United Nations (2012), it is projected that the current life expectancy, which is at 67, will rise to 75 by 2050. This trend shows that, with time, the elderly will outnumber young people.

The burden of care falls to both the generations (young and old), as the old would provide financial and advisory support for their young family members. However, the old outnumber the young people and need care from the young ones most of the time. This trend heralds that there is an increasing caregiver burden to the families who have to look after the older family members. The burden is more evident whilst taking care of elder loved ones who portray physical disability and dementia. Caregivers often undergo stress, depression and physical illness as well as being tasked with the traumatising decree with regard to putting their loved ones under long-term treatment/care facilities (Alzheimer’s Association, 2013).

The better part of our lives is defined by how we exchange help and aid within a family setup, ranging from providing care (emotional and physical), as well as monetary support. For the elderly, family becomes an integral part of their life as the support required increases. A society will ultimately influence the resources and support that are availed to older adults and their immediate families. It is thus the role of each individual to be supportive of the elderly in providing social support in terms of transportation, emotional, informational, and financial and, most importantly, housing (Jump, 2015). This would thus enhance close knitting of the family members.

1. **Health promotion**

In the recent past, health promotion has duly become part of the health care system due to the increasing trends in life expectancy. Health promotions to the older adults will give them healthier and longer lives, enabling them to participate in community development. This will ultimately help in realising their potential by harnessing their skills and know-how (Commonwealth of Australia, 2012).

*Positive aspects of health promotion*

1. Health promotion to the older adults helps to arrest the occurrences of discrimination with regard to age in our societies. This would certainly enable the older populace to freely and actively participate in the workforce setup if they so deem it right for them (Commonwealth of Australia, 2012).
2. On top of the better health for the elderly, health promotions ensure that the older adults are afforded housing facilities. This thus gives them the luxury of living an independent life, further reducing isolation and disconnection from the rest of the population (Ibid).
3. Also, health promotions enhance the older adults’ learning ability as they are encouraged to always engage in activities that help them stay connected and resilient, hence improving the overall well-being (Krolner et al., 2012).

*Negative aspects of health promotion*

1. Health promotions, however, require a huge amount of time and funding from the Government to realise some of these programmes. For example, Australian Government has a five-year package worth $3.7 billion that it argues will provide a “better, fairer and more nationally consistent aged-care system.” This may be a costly project to nations that have inadequate funds to undertake a proper health care for the older adults (Commonwealth of Australia, 2012).
2. **Visual impairment**

Incidence of visual impairment is often seen to increase amongst the ageing group, with more than two-thirds of the populace above 65 years experiencing low-visual ability. Numerous conditions place a person in danger of having visual impairment. These factors relate to not only abnormalities but also regular health problems. The common factors that lead to low vision amongst the elderly population are:

*Age-related macular degeneration*

It occurs when a person loses his/her central field of vision whereby there is a reduced flow of blood to the macular area. The challenge associated with this may emanate from the continual exposure to bright lighting, usually in our working or living places (WHO).

*Cataract*

This is where the lens of the eye becomes obscured from the incoming passage of light. People with this kind of disorder lack access to a quality and affordable eye-care programme. Nevertheless, even those who are privileged to access surgical services have to wait for an elongated period to be operated on, whilst some lack timely information and transport to the facilities (WHO).

*Glaucoma*

This condition is determined by both the structural deviation and the functional limitation of the optic neuropathy. Failure to diagnose glaucoma at an earlier stage may lead to the eventual restriction of the visual ability and permanent blindness (WHO).

*Diabetic retinopathy*

It is caused by vascular changes in the retinal circulation of patients who have had diabetes mellitus for several years. There seem to be differences erupting over the effective diagnosis and medical care of diabetic retinopathy. This provides an impending challenge since, as more individuals of diabetes increase steadily; an improper management of the condition may cause permanent eye damage (WHO).

1. **Dementia**

Dementia is not a disease but rather a group of symptoms occurring at the same time and involves progressive impairment of an individual’s memory, attention, reasoning, and orientation (Gilman, 2010). An affected person will experience acute changes in their social activities, work, relationships or daily activities like personal care.

**Aspects of prevention**

1. *Exercise*

World over, there are millions of cases of dementia that may arise due to lack of physical body exercise (Alzheimer’s Australia, 2015). It is well-known health-wise that exercising more often reduces the risk of heart disease and obesity, and, now, dementia is amongst these.

1. *Eat a healthy diet*

Antioxidants, such as Omega 3 and vitamins C & E, have been emphasised to reduce free radicles that may harm the brain. A balanced diet full of vegetables and fruits decreases the risk of heart diseases. Thus these nutrients are necessary to affect the risk associated with dementia (ADI, 2014).

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