

GUEST EDITORIAL

IPA on the move

Challenges to medical organizations

Medical associations globally have had to come to grips with new realities in the 21st century. Knowledge transmission has undergone a revolution. Universities, learned colleges, and professional organizations are no longer the custodians of information. New journals spring up weekly and the challenges for most professionals is deciding what *not* to read. Professional meetings used to be how we meet like-minded associates; now face-to-face conferences are just one of many options to interact with colleagues. Tighter rules regarding relations between industry and healthcare practitioners have resulted in decreased sponsorships, less profitable conferences, and reduced funding generally.

Challenges to our specialty

Psychogeriatrics has faced additional challenges in countries that have a tradition of specialist old age psychiatry services and in those without such a history. In the UK, the birthplace of our specialty, the Section of Old Age Psychiatry of the Royal College of Psychiatrists, wrote a letter to *The Times*, with support from many others including the International Psychogeriatric Association (IPA), explaining the folly of ageless mental health services i.e. dismantling old age psychiatry as a specialty. In the USA, declining recruitment of trainees entering psychogeriatrics (or geropsychiatry) is a cause for concern for the American Association of Geriatric Psychiatry. Even though psychologists have made an enormous contribution to the development of our field, the proportion of psychologists entering geriatric subspecialization is disproportionately low. Similar claims can be made for other disciplines such as social work and occupational therapy. Nursing represents the largest group of health professionals dedicated to the mental health of older people and their numbers are increasing parallel with the aging population. However, in many countries their status and pay are lower than their counterparts working in acute care and opportunities for academic careers are more limited than for the doctors alongside whom they work.

Most countries in the world have no or only rudimentary mental health services in general let

alone specialist mental health services for older people. Almost half the world has less than one psychiatrist per 100,000 population. The median rate of psychiatrists per 100,000 ranges from 0.05 in low income countries, to 0.54 in low-middle, to 2.03 in upper-middle, and 8.509 in high income countries (World Health Organisation, *Mental Health Atlas: 2011*). Similar disparities exist for numbers of mental health workers or nurses per 100,000 population. Mostly there are no specialist services for older people. Even in many developed countries psychogeriatrics is barely recognized despite the well-documented rapid aging of their populations.

Challenges to our association

It is against this backdrop that we should consider IPA's strengths and future development. Two of our greatest strengths are global need and our membership. The world needs IPA! Given that the world's population of persons older than 65 will double from 8.2% to 15.5% by 2050 (World Bank, 2015) it needs an organization dedicated to the mental health of older people globally and a voice for professionals working with older people. There is evidence that specialist services provide better care and are cost-effective (e.g. Draper and Low, 2005; Suh and Han, 2008). Our membership are the experts in mental health of older people, in understanding causes, in developing treatments, in providing services, in policy, in academia, and in research.

In planning our future development, IPA engaged an external consultant who in 2013 provided us with a blueprint for change. Two major underpinnings of the IPA plan were to make our organization more efficient and to maximize return on our intellectual capital by providing more education, more meetings, more conferences, and more advice to industry and to policy makers. For example, the IPA Congress which occurred biennially is now annual with the next Congress planned for San Francisco, September 6–9, 2016. In addition, we aim to conduct at least one regional meeting each year (e.g. Taipei, December 9–11, 2016), as well as an expert annual summit (e.g. on agitation in dementia in 2014 (Cummings

et al., 2015), and on behavioral and psychological symptoms of dementia (BPSD) in 2015) and webinars (e.g. on neuroimaging in 2011 and BPSD in 2014).

The last two years have been a period of transition. IPA developed a new website; reduced the size of our Board of Directors and Executive from a total of 31 to 11; established an Expert Advisory Council which will provide advice on specific aspects such as themes for meetings and collaborations on individual topics; and engaged an external development consultant to assist with garnering more funds. Selflessly, our Executive Director, Susan M Oster advised us that we may have more economies of scale if we moved to an association management company. After an exhaustive process, a subcommittee (William Reichman, chair, Mary Sano, Jay Luxenberg, Susan Oster and ourselves) narrowed the search following which they and the Executive Committee interviewed the top three applicants in July 2015, contacted numerous referees and finally selected Executive Director, Incorporated (EDI). Based in Milwaukee, USA, EDI is now taking over as managers of IPA. They have a strong track record of success with international medical associations such as the World Allergy Organization and International Parkinson and Movement Disorders Society. We particularly welcome EDI's President Kay Whalen who will serve as the Consulting Partner to IPA and Kate Filipiak who will be our Executive Director. Most recently, Ms. Filipiak has served the Collegium Internationale Allergologicum, International Eosinophil Society, and the American Academy of Allergy, Asthma and Immunology.

In looking forward to our collaboration with EDI, we also reflect on and acknowledge the enormous contributions made by our previous Executive Directors, Fern Finkel and Susan Oster, who were both recognized with *Distinguished Service to IPA Awards*. The award to Susan Oster was a special award made unanimously by the IPA Board in recognition of a decade of dedication,

diligence, professionalism, and industry far beyond what would be expected. Susan will continue during a transition period ending on December 31, 2015. IPA wishes her well.

IPA will continue to contribute to the world, grow in membership that is truly multi-disciplinary and multinational, and prosper. The Association is only as strong as its members and their contributions are crucial for IPA to make a global impact.

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