



## Iran's Health System and Readiness to Meet the Aging Challenges

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### Dear Editor in Chief

One of the most significant changes in the twentieth century is increasing aging population and many countries have already faced t or will experience it in the near future (1). The improvement of health situations leading to reduction of death and child mortality rate, increase of life expectancy and execution of birth control policies have led to an increase in aging population (1-4). Statistics show that two hundred million elderly were living worldwide in 1950; but the elderly above sixty years old is now more than six hundred million and this population is predicted to reach to one billion in 2020 and one billion, nine hundred seventy million in 2050. Therefore, based on these predictions, the number of people over sixty years old will be equal to the number of children in 2050 for the first time in human history, among which 70% will live in developing countries (4, 5). Iran will face these demographic changes as well and after experiencing the epidemiological transition of diseases, it should be prepared to confront aging management issues in the next decades. Based on the census done by the Statistical Center of Iran, the number of elderly was six million, three hundred thousand in 2011 and from 6.6% of the whole Iranian population in 1996 reached to 8.2% in 2011. Based on the previous studies, the Iranian over 60 year-old population will be 10% and 20% in the years 2021 and 2050 respectively

(6). The increase of elderly will bring about new problems; thus, it is predicted that the global economy will face many tensions and crises regarding the provision of social security as well as health issues. However, given the current situation, the elderly are faced with three major issues: how to make a living, diseases and loneliness. To reduce the consequences of these issues, countries such as Iran, have created rules and special supports to use the elderly capabilities in order to have their needs and costs, especially their medical costs, met (7).

The aging growth in the world and in Iran is not considered as an important issue on its own merits; but its social and economic consequences such as its impacts on the health sector resources will be the important problems. One of the most basic aspects that must be considered in the health sector is the cost of services for the elderly, which may include the costs of outpatient treatment, hospitalization, medications, test, etc. (6). Health promotion of the hospitalized elderly patients is considered as one of the most important goals and challenging aspects of health system activities (8). Financial, physical and human resources planning is one of the basic principles in health sector managment that must be considered in advance based on demographic, epidemiologic and technological changes. Otherwise, the health sector will

face many challenges in the future (6). Therefore, the health system must be prepared to respond efficiently to the problems arising from the aging growth. Thus, the first step should be conduction of systematic studies to estimate financial burden of aging in the country and the next step, the development of a policy document for the elderly' as a basis for all institutions and organizations activities. Moreover, supporting the development of health centers for the elderly can be a very serious step in dealing with the issue of aging population. It is worth mentioning that the Ministry of Health cannot tackle the aging problem alone and insurance organizations play a key role in this area. Thus, the insurance organizations are required to be more health-centered instead of being patient-centered. Moreover, the consideration of futures studies by these organizations is very important. Financial protection to preventive programs is among the basic principles in the health-centered approach, which unfortunately, has been neglected by the insurance organizations. It must be noted that having a health-centered approach will lead to reduction of additional financial burden on the health system as well.

Finally, it should be noted that without promotion of social vitality and elderly mental health, success of programs related to this population would be unlikely. In other words, all programs related to the alleviation of elderly problems must be done by consideration of social vitality among the elderly and promotion of their mental health.

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## References

1. Sadeghiyan F, Raei M, Hashemi M, Amiri M, Chaman R (2011). Elderly and Health Problems: a cross Sectional Study in the Shahrroud township. *Salmand Iran J Ageing*, 6 (2): 26-30.
2. Asefzadeh S, Ghodoosian A (2010). Recognition of the Health Related Factors of Aged Population of Minoodar in order to design Research Interventions in 2008. *Salmand Iran J Ageing*, 5 (1): 53-60.
3. Sadeghi F, Kaldi AR, Sahaf R (2012). Elderly people and their family care explanation of their experience from age –friendly city of Tabriz. *Salmand Iran J Ageing*, 6 (23): 41-51.
4. Shoae F, Azkhosh M, Alizad V (2013). Health status of Iranian older people: A demographical Analysis. *Salmand Iran J Ageing*, 8 (2): 60-9.
5. Shirazi Khah M, Mousavi MT, Sahaf R, Sarmadi M (2012). Study of Health and social indicators of elderly women in Iran. *Salmand Iran J Ageing*, 6 (Special Issue): 66-78.
6. Russel M, Ardalan A (2007). The future of aging and health care costs: a reminder to the national health system. *Salmand Iran J Ageing*, 2 (4): 300-5.
7. Shojaei A, Akbari Kamrani AA, Fadayee vatan R, Azimian M, Ghafari S, Jamali M (2012). The health costs and diseases in Medical Services Insurance Organization, Tehran province, 1386 (2008). *Salmand Iran J Ageing*, 6 (4): 65-74.
8. Rejeh N, Heravi-Karimooi M, Foroughan M (2010). The needs of hospitalized elderly patients: A qualitative study. *Salmand Iran J Ageing*, 5 (1): 42-52.