From the President

Professor Lynne Gabriel OBE, President of BACP

'Counselling can provide a context in which to navigate the complexities of ageing'

As an older woman, I'm curious about my own process of ageing and associated adjustments to health and wellbeing changes, as well as concerned about how our society engages more generally with people in their advancing years. Being a beneficent crone has its benefits, not least a sense of confidence grown over years, as well as a welcome sense of emotional strength. While family, partners and friends are important sources of companionship and care, many people don't have familial or social support in their later years, and successive governments have failed to tackle the wider issue of social care provision for an ageing population. This leaves many older people vulnerable. As a society we ultimately must address how we support and care for marginalised or disenfranchised older adults. As the actress Bette Davis put it, 'Getting old ain't for cissies.' The mental health and wellbeing of older people cannot be ignored. Like younger adults they face a range of mental health challenges including depression, isolation and loneliness. However, people in later life are much less likely to access counselling.

Age UK highlights the insidious impact of the cost of living for older people in its recent report, which found that nine out of 10 (91%) of over-50s, equivalent to 23.4 million people overall, were worried about cost of living increases to some extent. People aged 50 to 59, those more disadvantaged, from minoritised ethnic groups, living with long-term health conditions or unpaid carers were most likely to report being severely affected. Additionally, three in four (75%) of the over-50s, equivalent to 19.3 million people, turn down their heating or reduce the hours they use their heating.

Of course, these are complex and sometimes seemingly intractable societal issues that cannot be swiftly resolved. A key challenge is the cost of social care. Care is both expensive and in short supply. However, we can be active champions for older people who need mental health support and help. If we are fortunate to live into older age, we will likely face some challenges. Sadly, the challenges and vagaries faced by ageing populations are increasingly 'disappeared' in the context of competing issues. Lack of focus on the needs of our ageing population raises questions and concerns about being an ageist society. Surely, from cradle to grave, a citizen's mental health and wellbeing matters?

BACP advocates counselling in later life, as does the NHS through its Talking Therapies programme. Older people need allies and accessible support, which our profession is well placed to provide. We know that counselling can change lives for the better and could provide valuable help for older

people across a range of contexts in the community, including health and residential care settings. How many practitioners or counselling services regularly see elders in their practice? Counselling can provide a context in which older adults can navigate the complexities and challenges of ageing, including grieving the loss of friends and family and adapting to the erosion of independence and changes in physical or mental health abilities.

Navigating the later years can be one of the richest life phases. More people are continuing to work into later life whether through financial necessity or for social/psychological reasons. They also contribute to family or friendship circles, engage in education and learning, enjoy relationships, have sex and value what, for some, is a welcome, more relaxed pace of life. Within the counselling professions there are many who work and contribute well into late life. Hopefully we know when it's time to pause or to step away.

I recall attending a birthday celebration for Francesca Inskipp to mark her 90th birthday, at a time when she was still contributing to the profession. Colin Murray Parkes, who we pay tribute to in this issue (see page 14), worked into his 90s, continuing to write and influence bereavement work. I guess the key is to do something that inspires and offers ways of meaning making as we navigate later life. Additionally, within the counselling professions, client preferences will mean that some will prefer working with an older practitioner. People need degrees of support and vocational activities across their lifespan within the context of an inclusive society that challenges marginalisation and disenfranchisement.

