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PERSPECTIVE 2

Integrating gerontology into Sri Lanka's health sector: A timely imperative

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Ageing is a universal phenomenon, and the pace of ageing varies across nations. In the South Asian context, Sri Lanka is considered one of the fastest-ageing countries, which is a celebration of our integrated, dedicated health care system and, at the same time, alerts us to the potential challenges we need to address. Currently, 16% of the population is aged 60 years or older, and the estimated figure for 2041 is projected to be 25%. The demographic shift signals an escalation of non-communicable diseases, functional decline, and age-related chronic diseases involving neurological and locomotor systems. Therefore, we need to shift our focus from a curative approach to a more comprehensive integration of older adults' medical care with an understanding of the ageing process and the science of ageing.

While geriatrics has emerged as a critical clinical discipline addressing the complex health needs of older adults, it targets basically one component of effective age care: the curative approach to disease-based issues of ageing. Gerontology, on the other hand, is the scientific study of ageing that encompasses biological, psychological, social, and environmental dimensions across the life course. As a fast-ageing nation, when we focus exclusively on clinical geriatrics, we tend to overlook the broader determinants of health in later life, including social connectedness, economic security, housing, caregiving dynamics, and age-friendly environments. Integrating gerontology alongside geriatrics enables a more holistic, person-centred, and preventive approach to ageing.

The World Health Organisation (WHO) emphasises that healthy ageing is not defined merely by the absence of disease but by the maintenance of functional ability, shaped by the interaction between an individual's intrinsic capacity and their environment. Current evidence suggests that up to 30–40% of functional decline in older age is potentially preventable or modifiable through early interventions, supportive environments, and appropriate policy frameworks. Therefore, the essence of gerontological research is critical for clinicians, planners, and policymakers alike. Without such perspectives, health systems risk responding reactively to illness rather than proactively supporting ageing well. Sri Lanka as a nation is at a critical stage of demographic transition in which we need to make policy changes and long-term care plans to address a wide range of age-related disability via more integration with gerontological research inputs.

We observe that traditional extended family structures that historically supported older persons are increasingly strained by urbanisation, migration, and changing workforce patterns. Older adults now face higher risks of social isolation, unmet care-giving needs, and financial vulnerability. Studies indicate that a significant proportion of older Sri Lankans live with multiple chronic conditions, while a growing number experience limitations in activities of daily living. These challenges cannot be addressed by medical interventions alone. Gerontology provides essential insights into care-giving systems, social policy, community resilience, and the lived experience of ageing, all of which influence health outcomes. As much as we require allied health care support for patient management in the hospital setting, in managing older people's health needs, we need to understand their socioeconomic backgrounds, care needs, access of health care, and the suitability of their living arrangements.

In Sri Lanka, sociology and medical education have historically evolved along parallel but separate paths, and the incorporation of ageing science, particularly gerontology, into undergraduate medical curricula is a constructive step toward strengthening a more holistic understanding of ageing in clinical practice.

Such knowledge is crucial for distinguishing pathology from age-related change, reducing stigma of ageing/ageism in healthcare, and promoting shared decision-making with older patients. For our newer generation of geriatricians, familiarity with ageing science strengthens clinical reasoning and supports more patient-centred, individualised care.

Gerontology is inherently an interdisciplinary bridge that connects medicine with nursing, allied health sciences, public health, social work, psychology, architecture, and economics. This interdisciplinary approach is especially relevant for Sri Lanka, where resource constraints necessitate efficient, community-based, and preventive models of care. It has been shown that integrated health and social care approaches can reduce hospitalisation, improve quality of life, and support ageing in place.

From a policy perspective, integrating gerontology into health planning aligns with global and regional priorities. The WHO Decade of Healthy Ageing (2021–2030) calls for age-friendly health systems, long-term care development, and the creation of supportive environments for older persons. These goals require a strong gerontological foundation. In Sri Lanka, aligning health policy with gerontological evidence can support early identification of frailty, dementia, and disability, while informing broader policies related to housing, transport, social protection, and digital inclusion. Such integration is critical for long-term sustainability as demand for services grows with population ageing.

We do need more robust gerontological research that are country-specific and pragmatic. While Sri Lanka has seen encouraging growth in geriatric medicine research, gerontological studies remain relatively limited. There is a pressing need for locally relevant research on ageing trajectories, care-giving patterns, social determinants of health, and cultural perceptions of ageing. Encouraging research that bridges geriatrics and gerontology will strengthen the national evidence base and inform policy and practice more comprehensively.

The Sri Lankan Association of Geriatric Medicine (SLAGM) has played a pivotal role in advancing geriatric care, professional development, and advocacy for older persons. As the field continues to evolve and expand, there is an opportunity and a requirement to broaden this vision by fostering stronger engagement with gerontology. Creating platforms for dialogue among clinicians, researchers, and professionals from allied disciplines will enhance understanding and foster cost-effective innovation in ageing care. Such collaboration is the essence of global best practice and strengthens Sri Lanka's response to population ageing.

The launch of the *Sri Lanka Journal of Geriatrics and Gerontology (SLJGG)* represents a significant milestone in this journey. Conceived as a scholarly platform for both disciplines, the *Journal* serves as a gateway that bridges clinical geriatrics with the broader science of ageing. For practising geriatricians and physicians interested in aged care, engagement with gerontology enhances their clinical insight, supports preventive strategies, and strengthens ethical, personcentred care. For gerontologists and allied professionals, grounding research in clinical realities strengthens relevance and impact. *SLJGG* aims to foster this integration by publishing research, reviews, perspectives, and case-based discussions that reflect the full spectrum of ageing science and practice.

An equally important objective of the *Journal* is to support the growth of ageing-related research and scholarly work within the country. *SLJGG* encourages the work of early-career researchers and clinicians by providing a platform to showcase their work globally. At a time when population ageing is becoming a pressing issue in many low- and middle-income countries, such platforms play an important role in exchanging locally relevant knowledge and practice.

In conclusion, integrating gerontology into Sri Lanka's health sector is no longer optional but imperative. A comprehensive approach that unites geriatric medicine with the science of ageing will enable more effective, globally relevant, and sustainable care for older persons. Through education, research, policy engagement, and interdisciplinary collaboration, Sri Lanka can move towards a health system that not only treats disease but actively supports healthy ageing across the life course. The *Sri Lanka Journal of Geriatrics and Gerontology* is envisioned as a catalyst in this endeavour, advancing knowledge and practice at the intersection of geriatrics and gerontology.

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