

42

Encouraging development and ensuring implementation of advance directives, such as living wills

- 1 WHEREAS population trends indicate that people in the United States are living longer;
- 2 WHEREAS the fastest growing segment of the older population includes those age 85 and older;
- 3 WHEREAS increased disease and disability are associated with advancing age, despite reassuring evidence that greater numbers of older persons experience healthy, productive aging;
- 4 WHEREAS individuals have a legal, ethical, and moral right to maintain control over decisions that affect their well-being and end-of-life care;
- 5 WHEREAS individual values and preferences regarding medical treatment are often not ascertained;
- 6 WHEREAS many social influences erode autonomy and decision-making authority as one ages;
- 7 WHEREAS sound health care decision-making requires a process that supports communication, collaboration, and respect among patient, health care provider, family, and other key participants in the patient's care;
- 8 WHEREAS The Uniform Health Care Decisions Act has been approved by the National Conference of Commissioners on Uniform State Laws; and
- 9 WHEREAS we the delegates commend the White House Conference on Aging for addressing spiritual well-being, ethics, values and roles;

THEREFORE, BE IT RESOLVED by the 1995 White House Conference on Aging to support policies that:

- 10 Encourage States to adopt The Uniform Health Care Decisions Act;
- 11 Support and encourage the training and education of professionals and caregivers, including seminarians and pastoral care personnel, on the spiritual needs of older persons and methods of meeting these needs;
- 12 Encourage public and private institutions to develop clinical practice guidelines which ensure that health care providers are able to describe, define, and facilitate end-of-life decisions;

Appendix D: Text of the Resolutions

- 13 Provide physicians and other health care providers the education, training, and legal protection necessary to encourage patient-centered, collaborative, medical decision-making;
- 14 Ensure public education on the purpose, role, and functions of advance directives which is culturally sensitive and reaches persons who are illiterate and non-English-speaking;
- 15 Encourage research on the use of advance directives and effective methods of disseminating this information and its use to the older population.



Franklin Olliviere, Director of Aging, Department of Elder Affairs, and Paul Culucci, Lt. Governor, MA; Robert Blancato, Executive Director, 1995 WHCoA.