Editorial

President Bush's 2002 budget proposal would hamper geriatric education

Although President George W. Bush's 2002 budget proposal calls for a \$2.75 billion increase in National Institutes of Health funding, it asks for a 61% reduction in funding for health profession programs, including the elimination of geriatric education centers (GECs). The GECs represent a national network of health professional schools that are funded by the Bureau of Health Professions to provide training and education in geriatrics and gerontology to health professions' faculty and practitioners.

Since their inception more than 15 years ago, the nation's 45 GECs have responded to the extreme shortage of physicians and other practitioners that are necessary to meet the escalating healthcare needs of the nation's elderly population by providing specialized training in geriatrics. Currently, \$12 million are allocated in this federal budget to support the GEC network. Over the years, thousands of faculty and practitioners in the disciplines of medicine, nursing, dentistry, social work, pharmacy, and others have enhanced their skills to be more effective clinicians and teachers in geriatrics and gerontology. There has been mounting evidence that the GECs have been quite successful in enhancing the quality of life of the nation's senior citizens through multidisciplinary health professional education.^{1,2}

Projections of the need for physicians with the requisite skills to care for the elderly of the United States consistently indicate a significant shortfall in the foreseeable future. Likewise, projections of the need for academic geriatricians to teach geriatrics to medical students, residents, and fellows reveal a similar deficit. The need is particularly critical in osteopathic medicine because of the rapid growth of the profession, the high penetration of osteopathic physicians in primary care, and the need for academic geriatricians to serve as faculty in the nation's 19 osteopathic medical colleges.³

Colleges of osteopathic medicine have been in leadership positions in providing geriatric education within their regions through GEC funding. For more than a decade, the University of Medicine and Dentistry of New Jersey–School of Osteopathic Medicine has sponsored the New Jersey Geriatric Education Center training physicians, dentists, nurses, social workers and other healthcare professionals in geriatrics and gerontology. Michigan State University College of Osteopathic Medicine has provided similar leadership in Michigan. Several other colleges of osteopathic medicine at the University of North Texas Health Science Center at Fort Worth, University of New England, Ohio University, and Kirksville have

played pivotal collaborative roles in providing training to multiple health professionals.

The Bureau of Health Professions (BHP)'s appropriations for the GECs have represented a stable and consistent funding source for much-needed geriatric training during the past 15 years. In addition, the BHP has encouraged GEC inter-collaboration, which has facilitated the dissemination of educational products that have rapidly enabled a national impact.⁴ At a time when the effectiveness of the GECs has been demonstrated, coupled with the documented need for more training of practitioners to meet the healthcare needs of the nation's skyrocketing geriatric population, the wisdom of the plan to eliminate the GEC funding hardly seems rational.

Osteopathic physicians nationwide need to speak to their representatives and ask that funding for the GECs be restored. The elderly of this nation deserve nothing less. President Bush has presented his laudable goal of uniting this nation. The plan to eliminate the small amount of funding that serves to benefit the elderly of this country seems contradictory to this goal.

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