



Improving the lives of older Americans

Healthy Aging – A National Perspective

Nancy Whitelaw, PhD
National Council on Aging
December 2009



National Council on Aging

Mission & Values

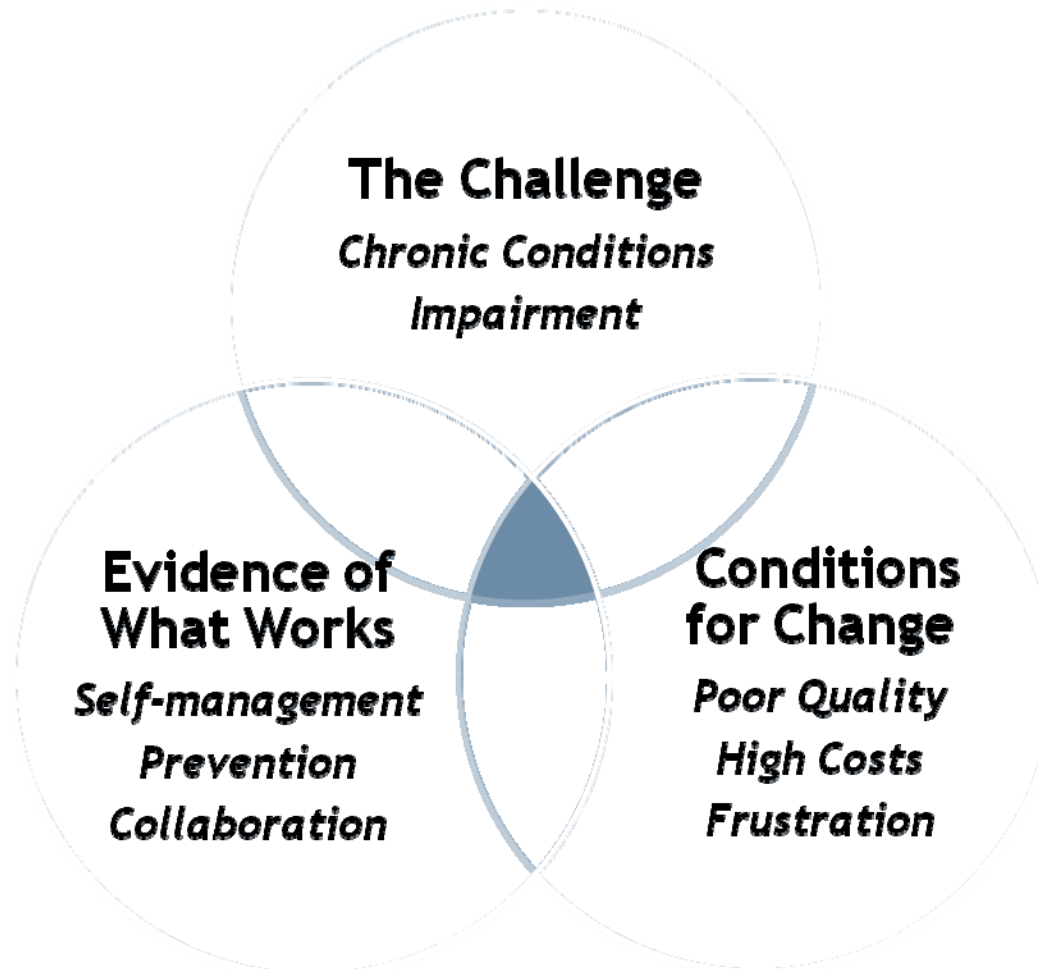
To improve the lives of older Americans.

- Social and economic justice
- Respect and caring
- Innovation
- Integrity and excellence

NCOA's Work

- Provide a strong voice on behalf of older adults - especially those who are vulnerable and disadvantaged.
- Engage non-profit organizations, businesses and government in developing creative solutions to the challenges of aging.
- Collaborate with thousands of organizations across the country to help seniors live healthy, independent and secure lives.

Healthy Aging: Is this the time?



Chronic Disease – An Epidemic of Unparalleled Proportions

- More than 1.7 million Americans die of a chronic disease each year.
- 80% of older adults have at least one chronic condition; 50% at least two.
- Among older adults with 2+ chronic conditions:
 - 76% report being limited in function
 - 17% report being frequently depressed
- There are disparities in the prevalence of chronic conditions and functional loss associated with income, race and ethnicity, and other factors.

Mensah: www.nga.org/Files/ppt/0412academyMensah.ppt#18

State of Aging and Health in America 2007: www.cdc.gov/aging

Chronic Conditions as Medical Diagnoses

- Heart Disease
- Stroke
- Arthritis
- Respiratory diseases
- Diabetes
- Cancer
- Depression
- Alzheimer's

State of Aging and Health 2007 www.cdc.gov/aging;
CDC/NCHS Health US, 2002

Chronic Conditions as Risk Factors

- Smoking
- Poor diet & nutrition
- Physical inactivity
- Falls
- Alcohol & substance abuse
- Stress
- Social isolation

McGinnis & Foege, *JAMA*, 1993; Mokdad et al, *JAMA*, 2004
State of Aging and Health 2007 www.cdc.gov/aging;

Chronic Conditions as Pain and Suffering

- Physical pain
- Fatigued or lacking energy
- Stressed
- Depressed or unhappy
- Angry

Lake Research Partners conducted this nationwide telephone survey in January 2009 using RDD sample of 1,109 Americans age 44 and older who have at least one chronic condition. Oversamples of Latinos and persons 65 and older; interviews conducted in English and Spanish.
www.ncoa.org/healthierlives

Chronic Conditions as Life Changing

- Reduced family activities
- Reduced involvement in the community
- Missed work
- Cannot afford care
- Cannot afford healthier life

www.ncoa.org/healthierlives

Tired of Feeling on Own

% frequently/occasionally tired of feeling on own when it comes to taking care of health problems



www.ncoa.org/healthierlives

Not Getting Help from Health Care

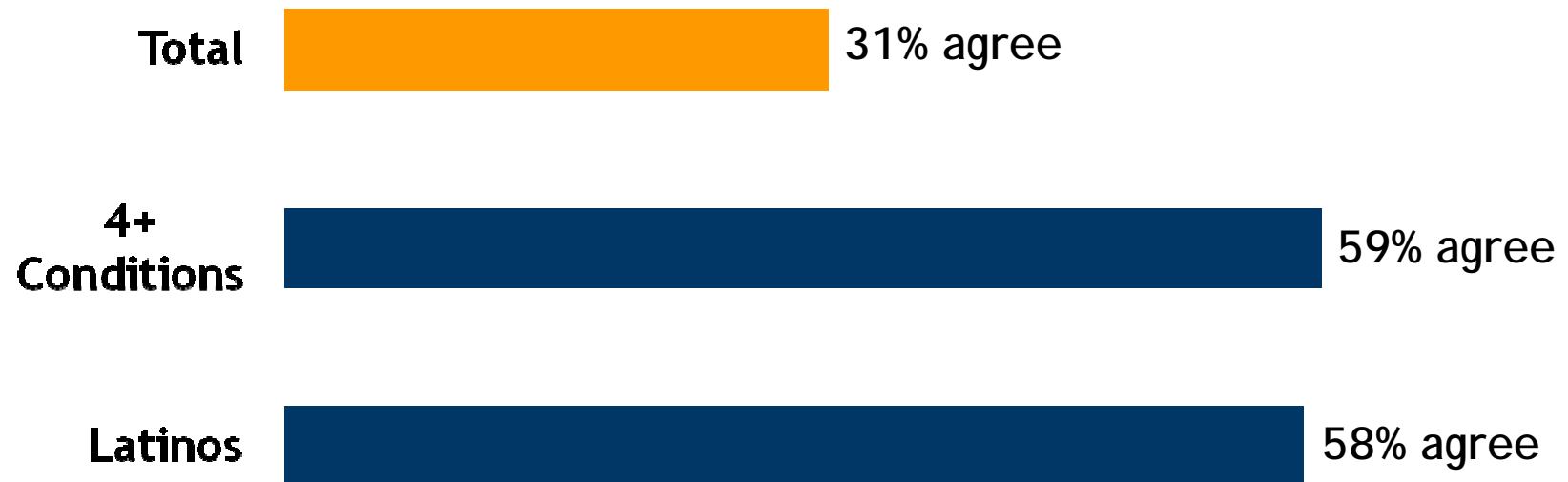
% saying rarely or never



www.ncoa.org/healthierlives

Multiple Problems Make It More Difficult

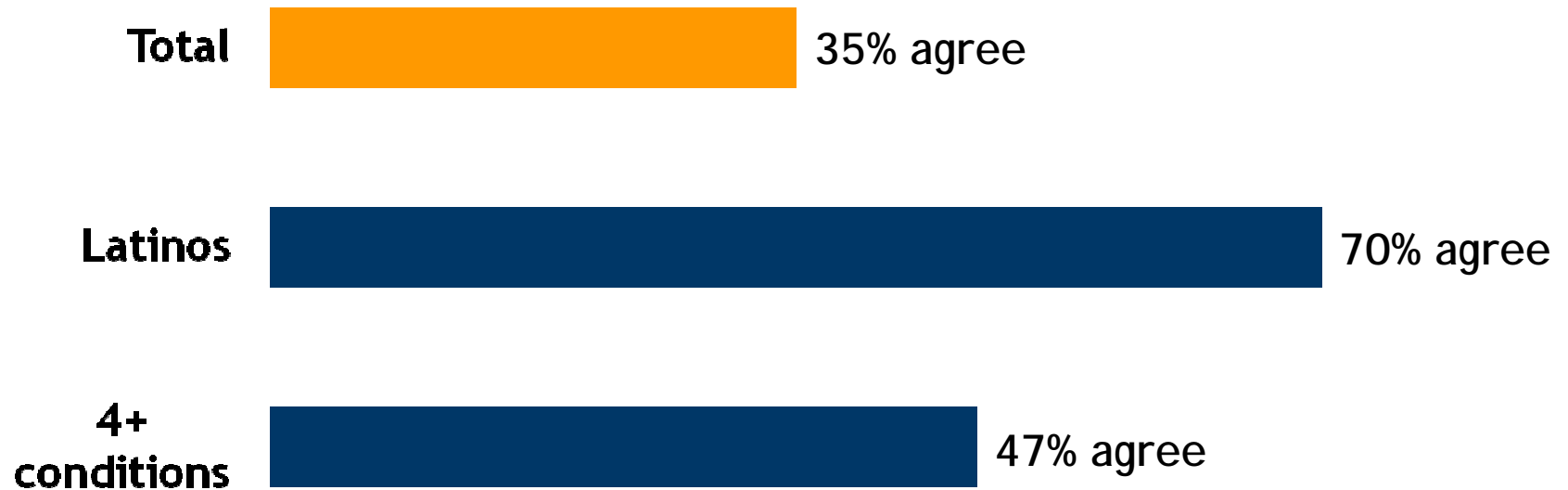
“All of my different health problems and conditions make it difficult for me to take better care of myself.”



www.ncoa.org/healthierlives

People Want to Learn How to Take Better Care

“I need help learning how to take better care of my health in a way that works for me and my life.”



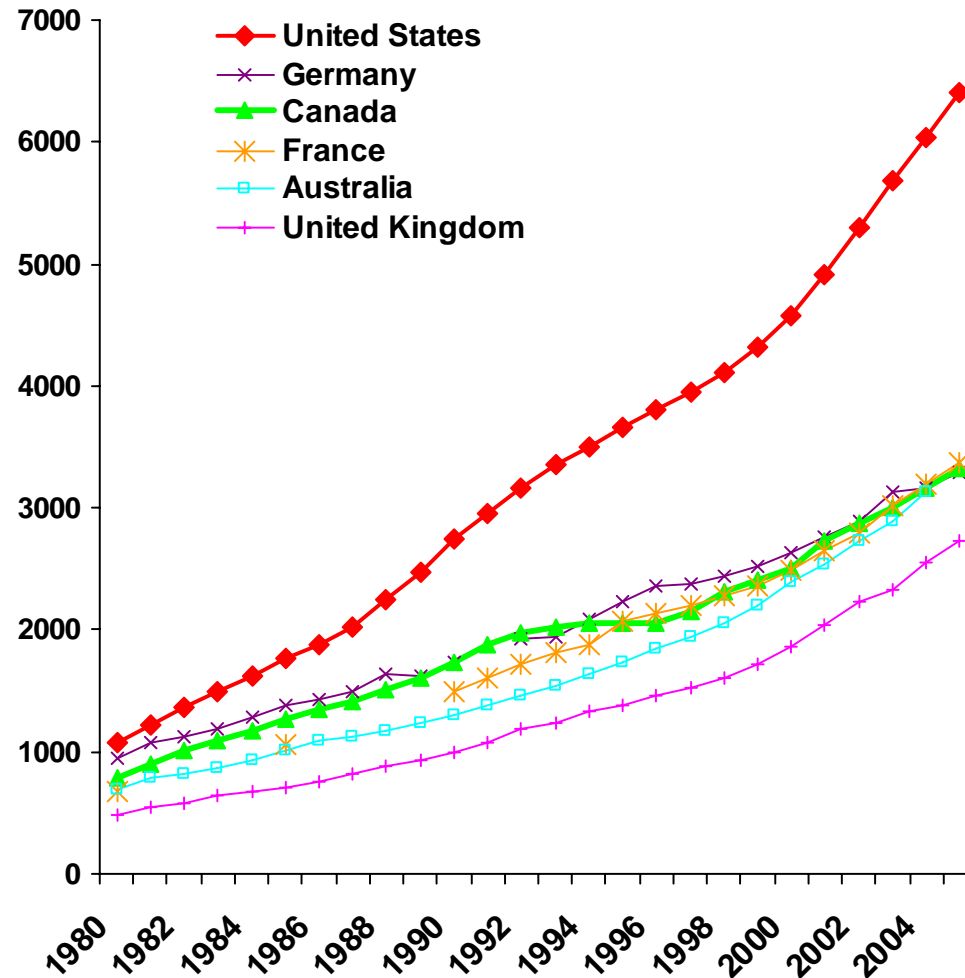
www.ncoa.org/healthierlives

Themes from People with Chronic Conditions

- Diversity in who is affected and how
- Hurting, tired, depressed and stressed
- Reliance on healthcare system that's not working
- Struggles
 - Delaying medical care
 - Barriers to self-care
- Seeking realistic, practical, customized help

www.ncoa.org/healthierlives

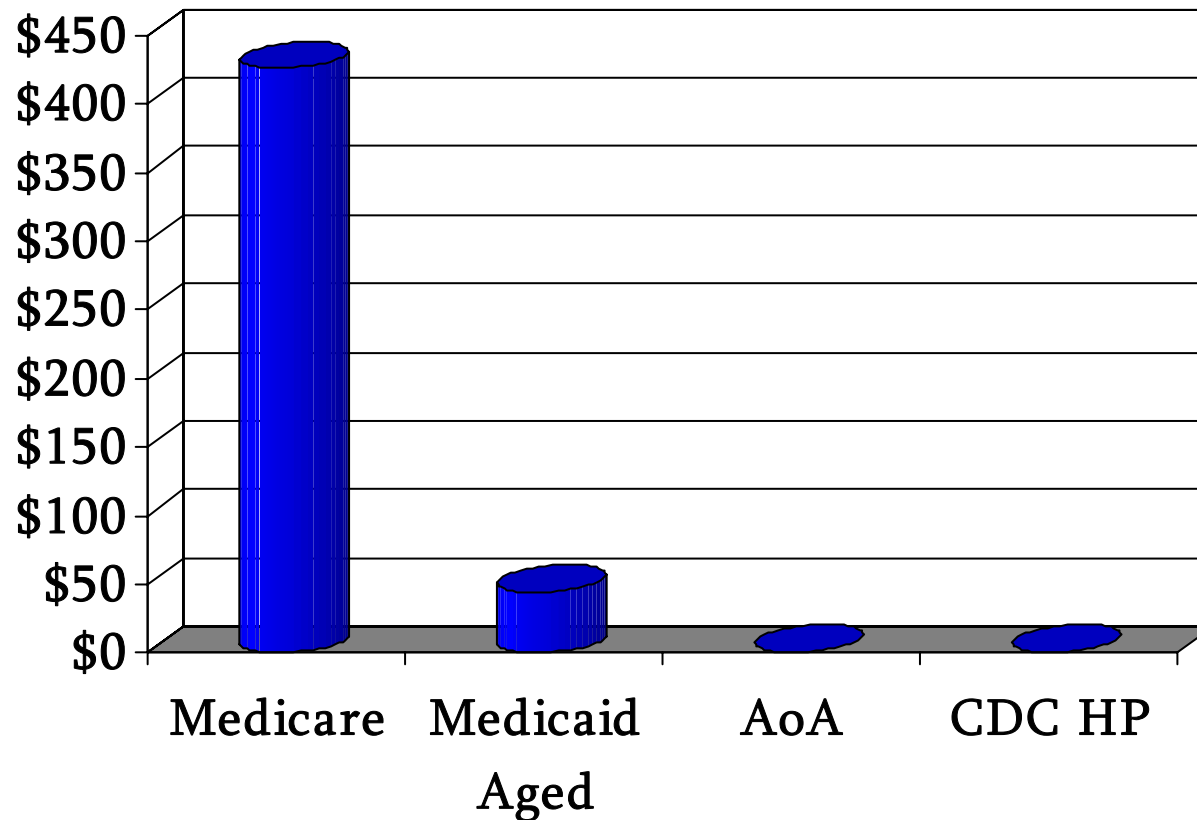
Average Spending on Health (per capita)



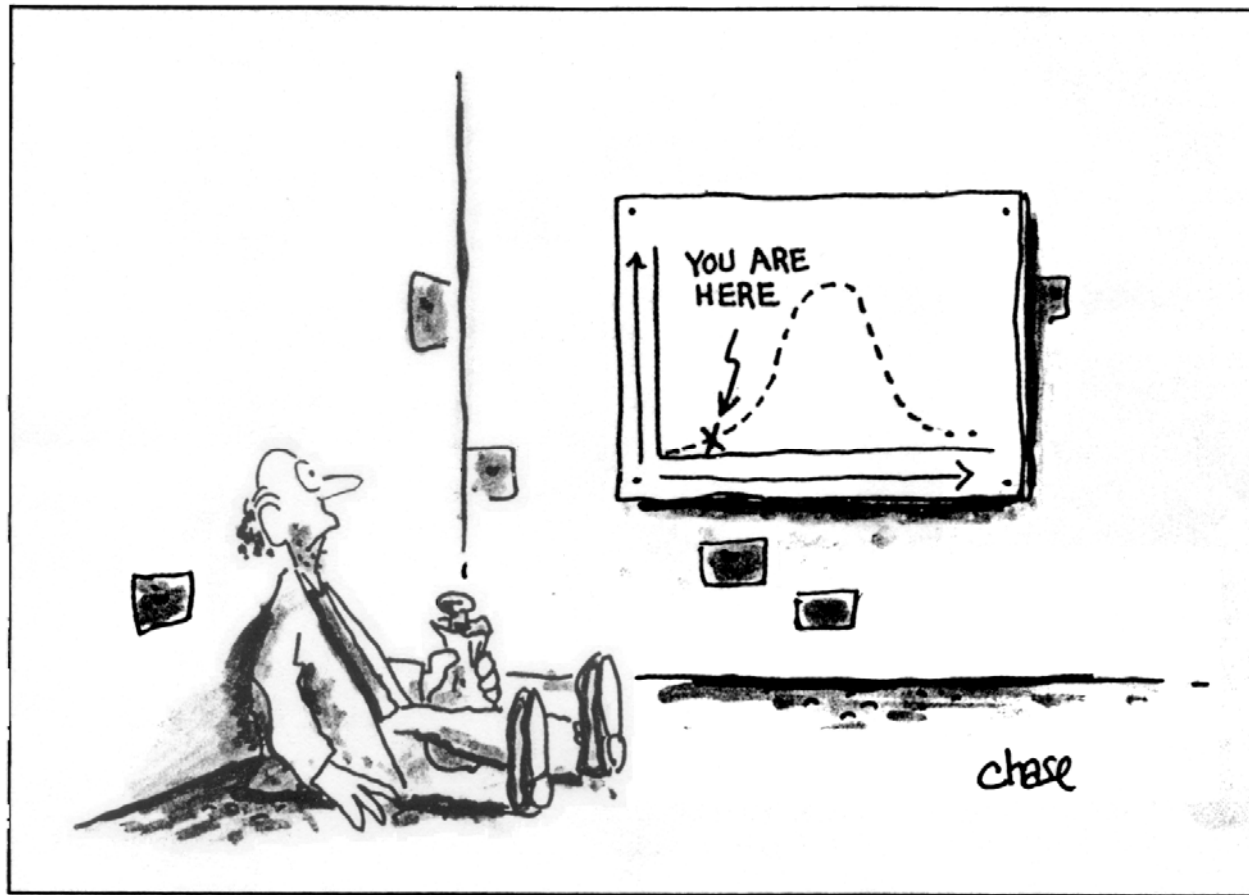
Source: K. Davis, C. Schoen, S. Guterman, T. Shih, S. C. Schoenbaum, and I. Weinbaum, Slowing the Growth of U.S. Health Care Expenditures: What Are the Options?, The Commonwealth Fund, January 2007, updated with 2007 OECD data

US Federal Spending, 2007

In Billions



Good News: Opportunity for Improvement!



Healthy AgingMore than a program

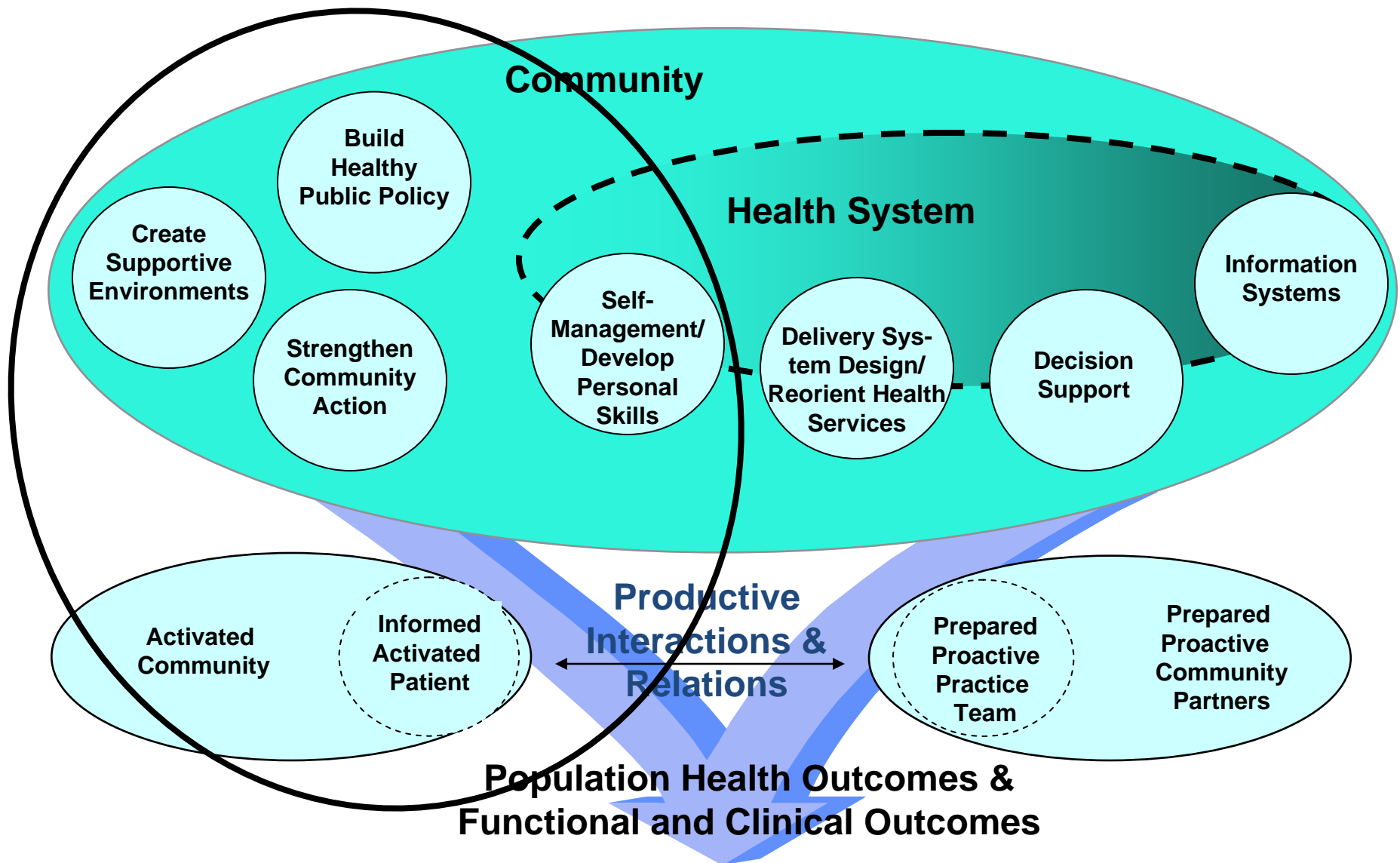
Healthy aging is a systems change strategy, not simply a program or service.



Changing Systems for Healthy Aging

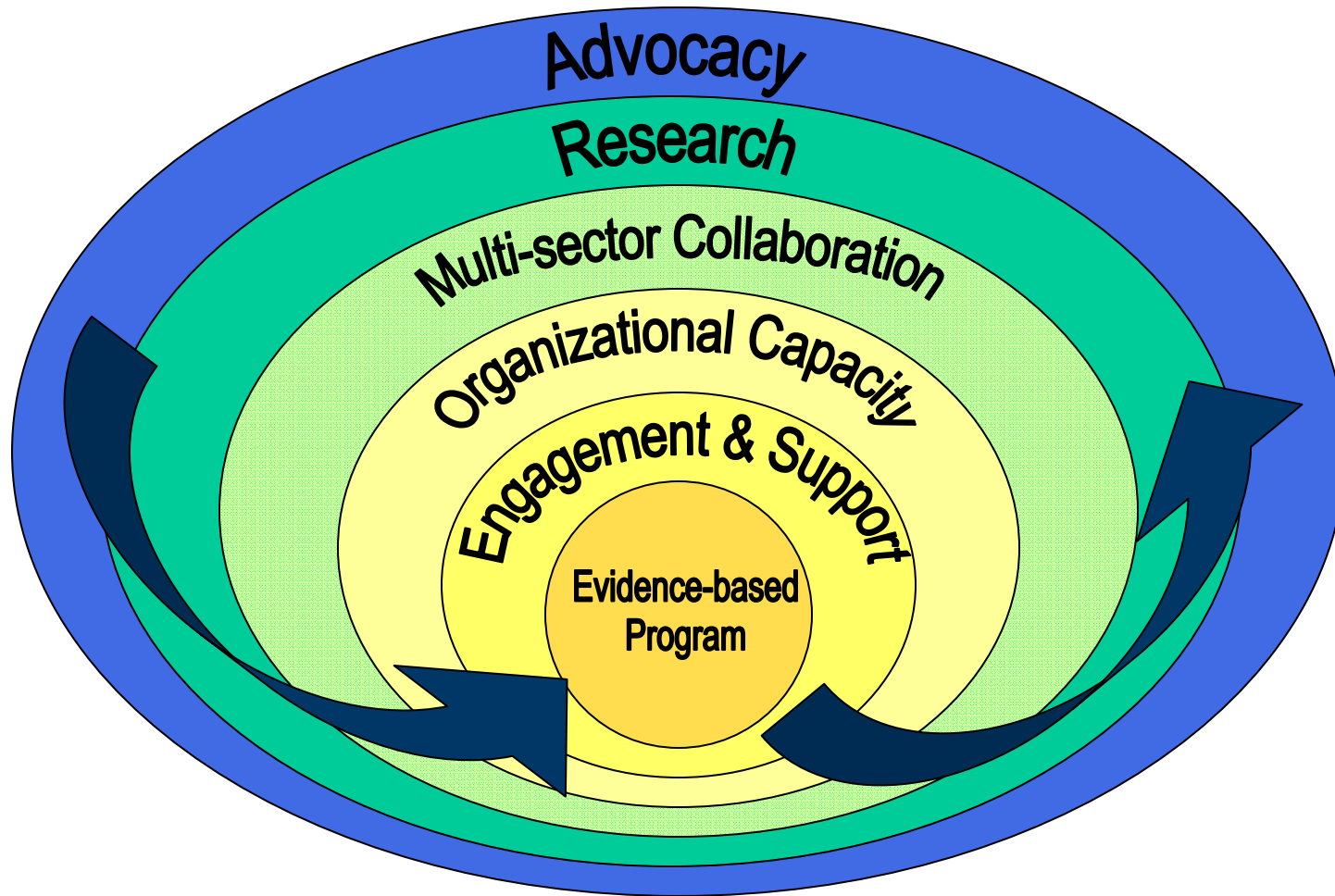
- Self-management, self-determination, self-advocacy
- Prevention & delay of sickness and impairment
- Evidence & outcomes & uncertainty
- Community-based, collaborative solutions
- Challenge ageism, health disparities

The Expanded Chronic Care Model



The Expanded Chronic Care Model, (Barr, Robinson, Marin-Link, Underhill, Dotts, Ravensdale, & Salivaras, 2003).

Healthy Aging System – What Works

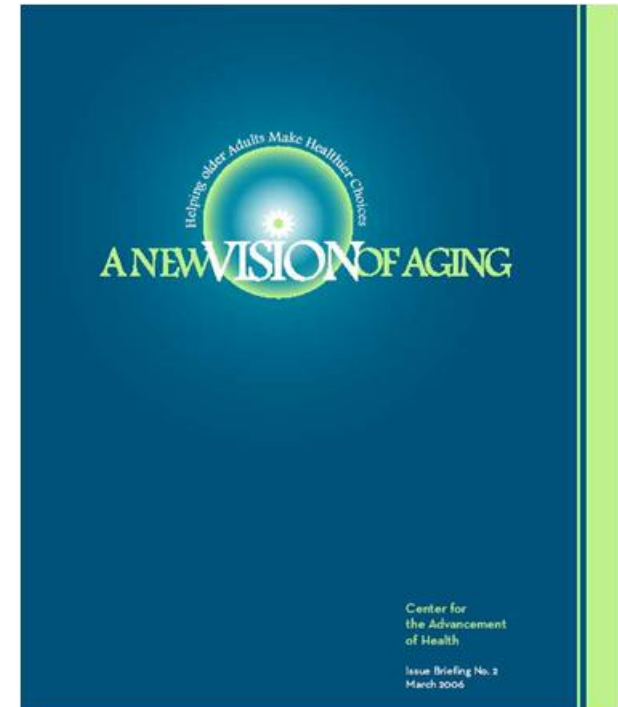


Healthy Aging System – What Works

- Evidence-based Program: Results are Replicable
- Engagement & Support: Personal & Social
- Organizational Capacity: Growth & Impact
- Research: Evidence, Evaluation & Culture of Inquiry
- Multi-sector Collaboration: More is Better!
- Advocacy: Silos of Uncertain Opportunity

Evidence of Interventions and Results

- Person-selected definition of the problem
 - Person-selected targets for improvement
 - Self-management skills are learned.
 - Behavior is self-directed.
-
- Longer life
 - Reduced disability
 - Improved mental health
 - Lower health care costs



Organizational Capacity Building

- State Offices on Aging, Public Health and others
- Regional leadership organizations
- Local program sites



Multi-sector Collaboration

- Public, Private, National, Regional, Local
 - Aging
 - Public health
 - Mental health
 - Long-term care
 - Health care
 - Housing
 - Education
 - Employment
 - Academe
 - Philanthropy
- Investment exceeds \$50,000,000



Policy Opportunities in the Silos

- Federal, State and Regional
 - Prevention and Wellness
 - Medicaid & Medicare Innovations
 - Accountable Care Organizations
 - Medical Homes
 - Care Transitions
 - Care Coordination
 - Project 2020



Keys & Challenges

- Expand engagement and ownership by older adults
- Strengthen messaging, communications and recruitment
- Expand program options, including online
- Improve interface with clinical care
- Organize networks and improve efficiency
- Diversify funding streams
- Measure impact
- Impact policy

Thank you -

Nancy Whitelaw, PhD
Nancy.whitelaw@ncoa.org



www.healthyagingprograms.org