

# **PROMOTING HEALTHY AGING THROUGH A POPULATION HEALTH AND SOCIAL DETERMINANTS FRAMEWORK**

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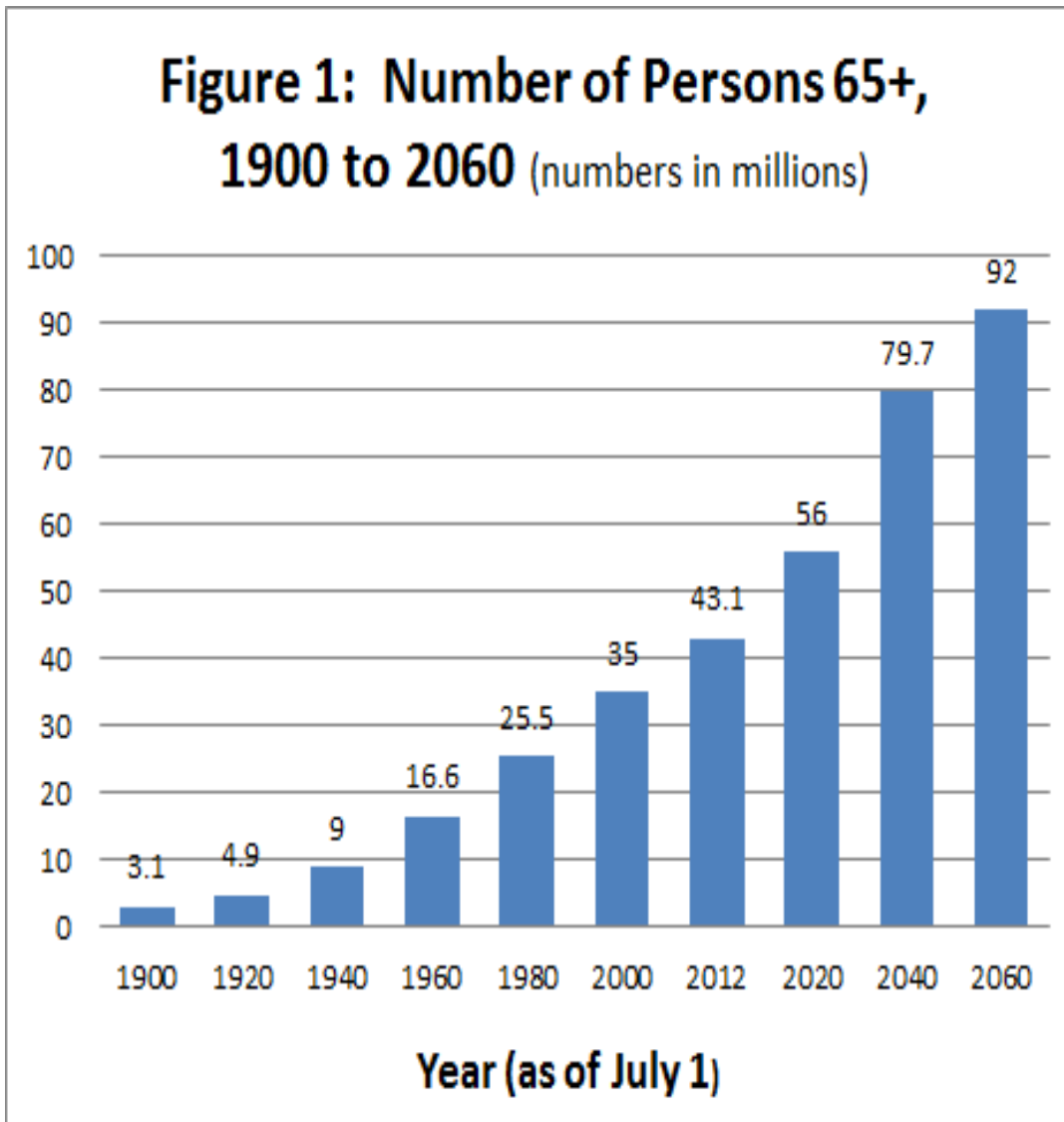
# Association of State & Territorial Health Officials (ASTHO)

- ASTHO is the national nonprofit organization representing public health agencies in the United States, the U.S. Territories, and the District of Columbia, and over 100,000 public health professionals these agencies employ.
- *Vision: Healthy people thriving in a nation free of preventable illness and injury.*
- *Mission: To transform public health within states and territories to help members dramatically improve health and wellness.*
- ASTHO projects facilitate collection of relevant information and sharing of ideas and experiences, create dialogue with outside organizations, represent the states at national forums on health, and identify best practices in public health.

# ASTHO Membership



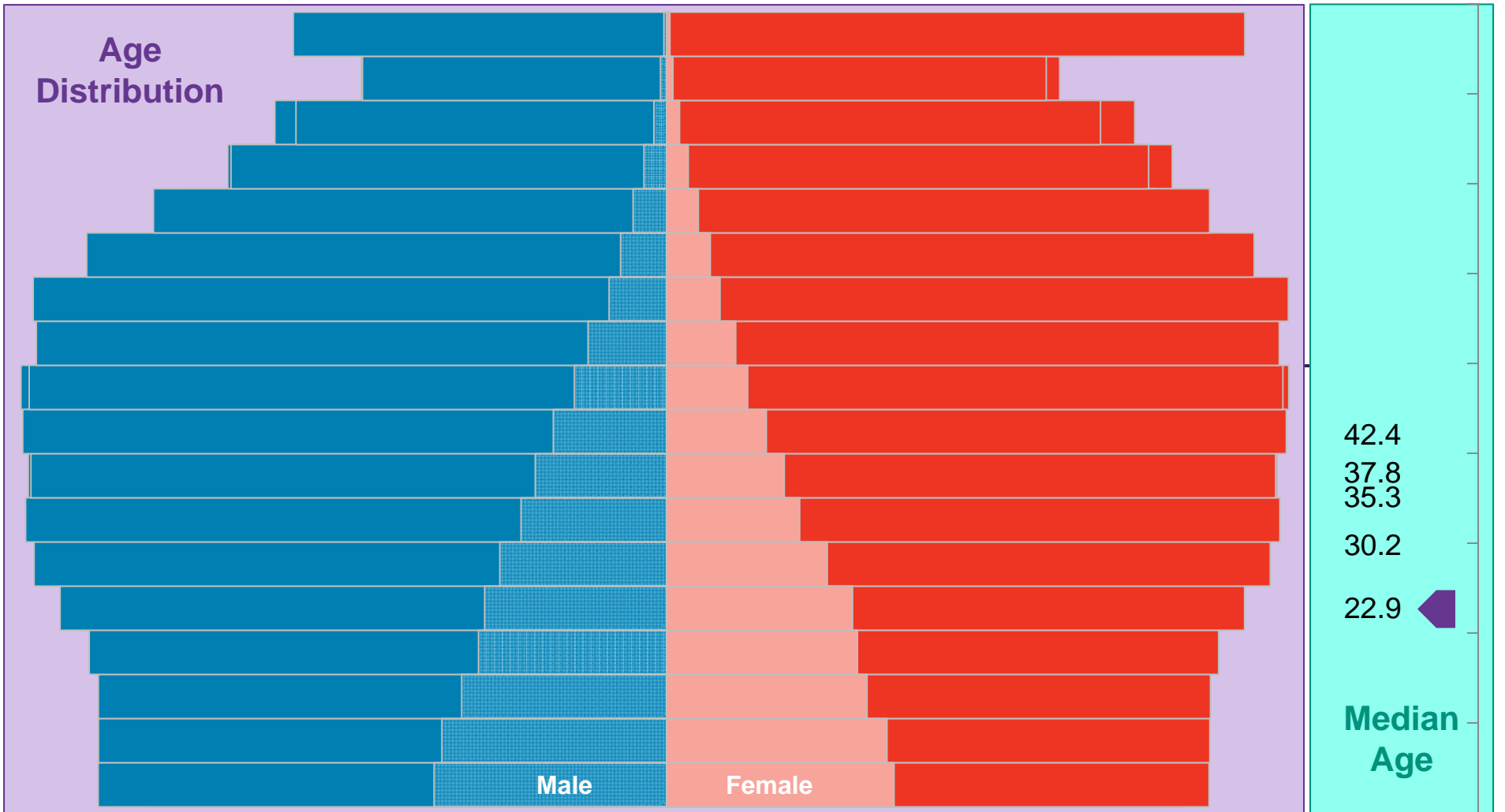
# Demographic Trend & Projections or 65+ Years



Source: AoA 2013  
Profile

# U.S. POPULATION

1900 1910 1920 1930 1940 1950 1960 1970 1980 1990 2000 2010 2020 2030 2040 2050



# Aging in Place

- 93% of Medicare enrollees aged 65 years or older live in the community rather than in nursing homes or other congregate settings.<sup>1</sup>
- Five key components of aging in place:<sup>2</sup>
  - Choice
  - Flexibility
  - Entrepreneurship
  - Mixed generations
  - Smart growth







# Aging in Place

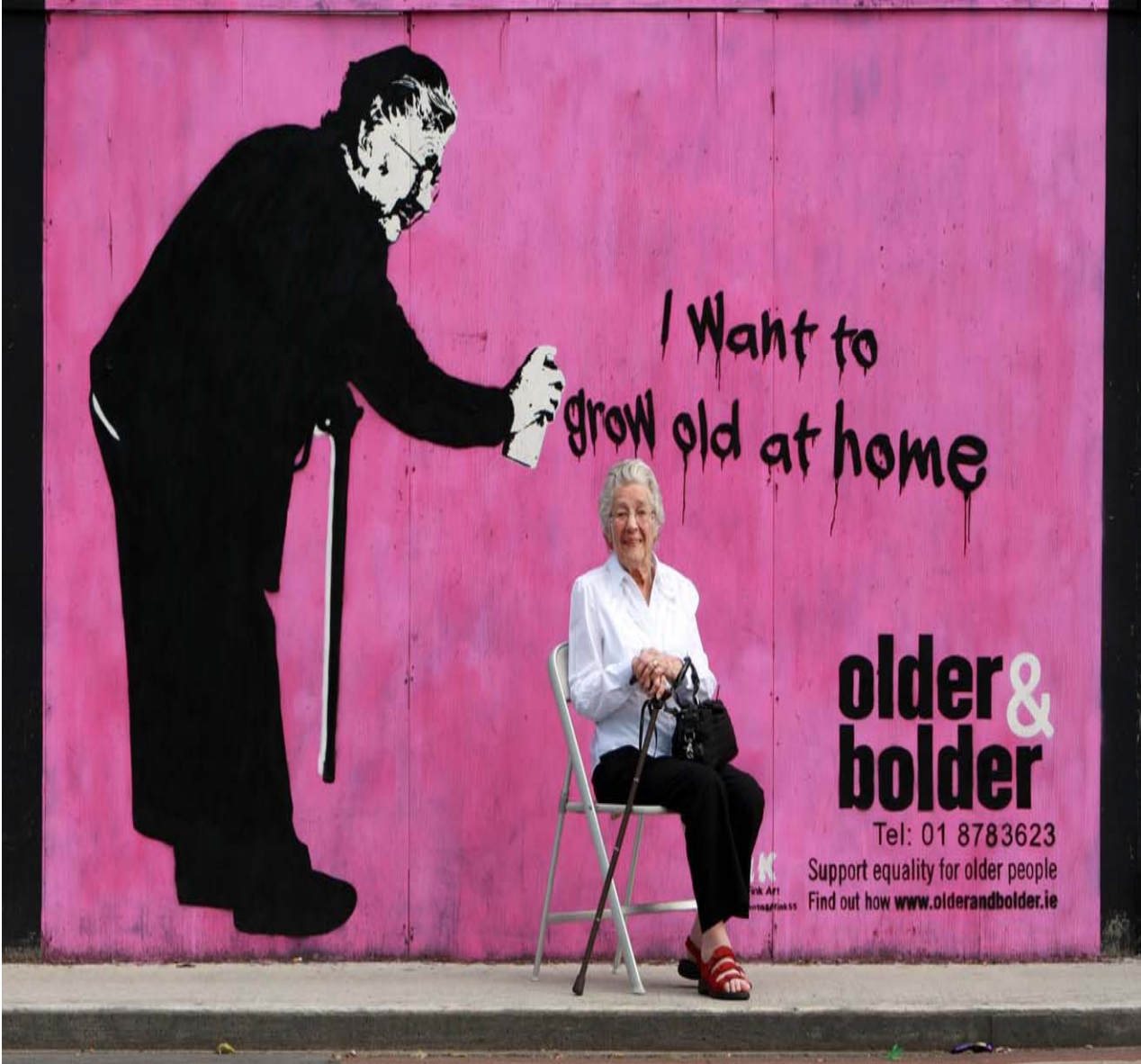
**More than 90% of adults over the age of 65 want to stay at home as long as possible.**

Teresa A. Keenan, Ph.D., *Home and Community Preferences of the 45+ Population* (Washington, D.C.: AARP, 2010), 4.

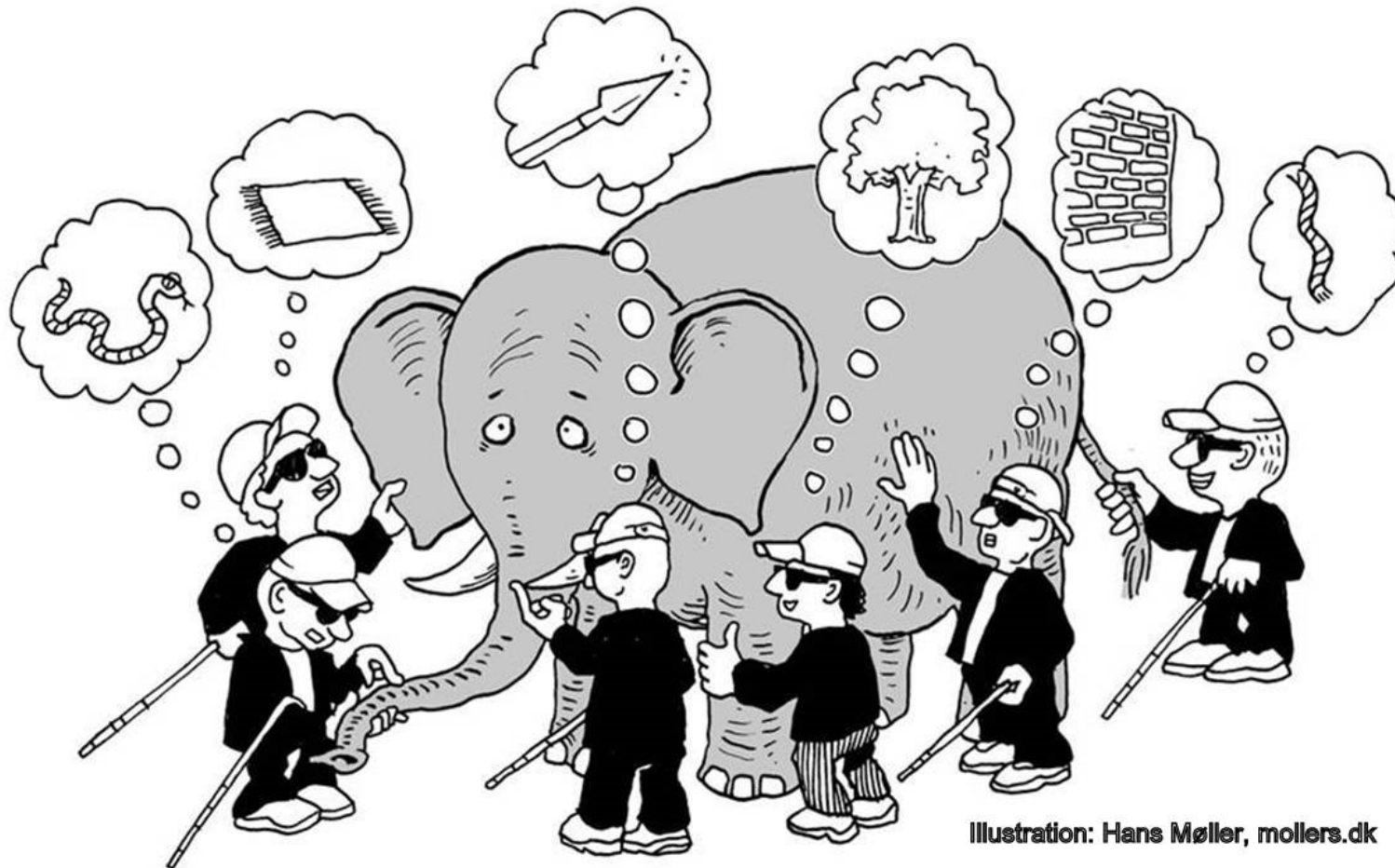
# Aging in Place: Key Components

1. **Choice:** Providing both healthcare and housing to meet evolving needs. Affordability and diversity are key
2. **Flexibility:** Levels of health services and housing support diverse needs that can be tailored
3. **Entrepreneurship:** Capitalizing on purchasing power of older adult communities. Focus on affordable service delivery
4. **Mixed generations:** Maintain diverse population to maximize capacity for self-help and community contribution
5. **Smart growth:** Accessible, livable communities, that encourages mobility <sup>2</sup>





# Healthy Aging Definition



# Deficits Framework of Healthy Aging

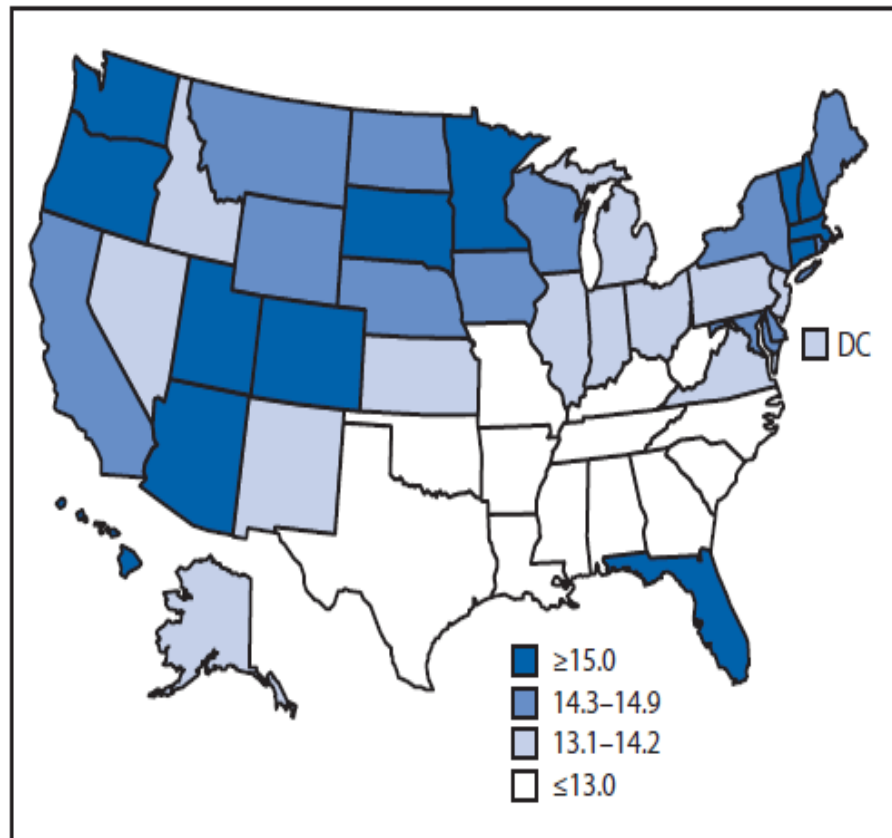
- **Disease**
- **Dementia**
- **Disability**
- **Dependency**
- **Death**
- **Falls**

# Healthy Aging

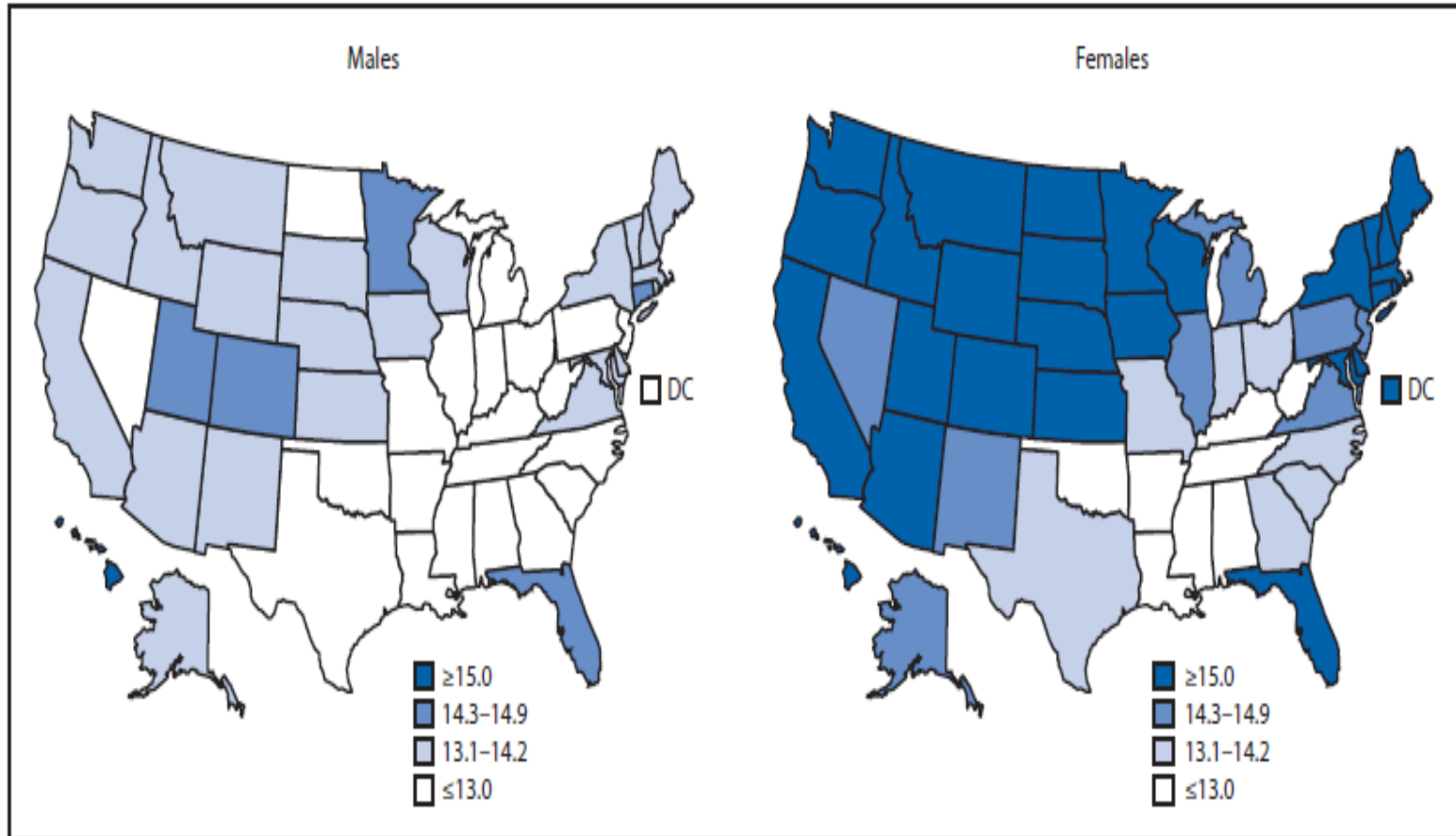
The development and maintenance of **optimal** physical, mental, and social well-being and function in **older adults** <sup>1</sup>



# State-specific Healthy Life Expectancy in Years at Age 65 Years —United States, 2007–2009



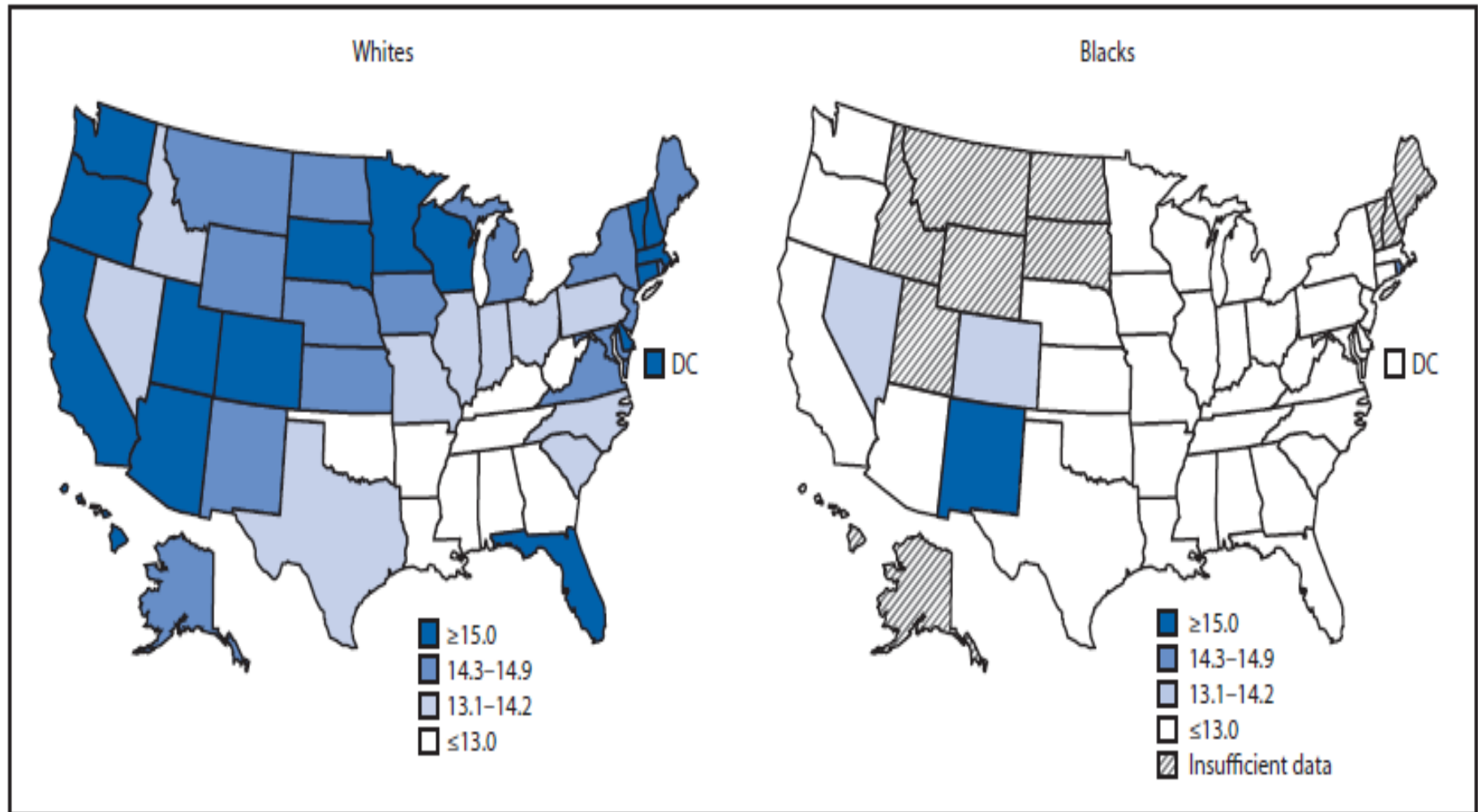
# State-specific Healthy Life Expectancy in Years at Age 65 (2007-2009) by Sex



➤ Females have a greater HLE than males



# State-specific Healthy Life Expectancy in Years at Age 65 years —United States, 2007–2009 by Race





# Healthy Aging Can Be Achieved

When **physical environments** and **communities** are safe, and support the adoption and maintenance by individuals of attitudes and behaviors known to promote health and well-being, and by the **effective use** of health services and community programs to **prevent** or minimize the **impact of** acute and chronic **disease** or function <sup>1</sup>



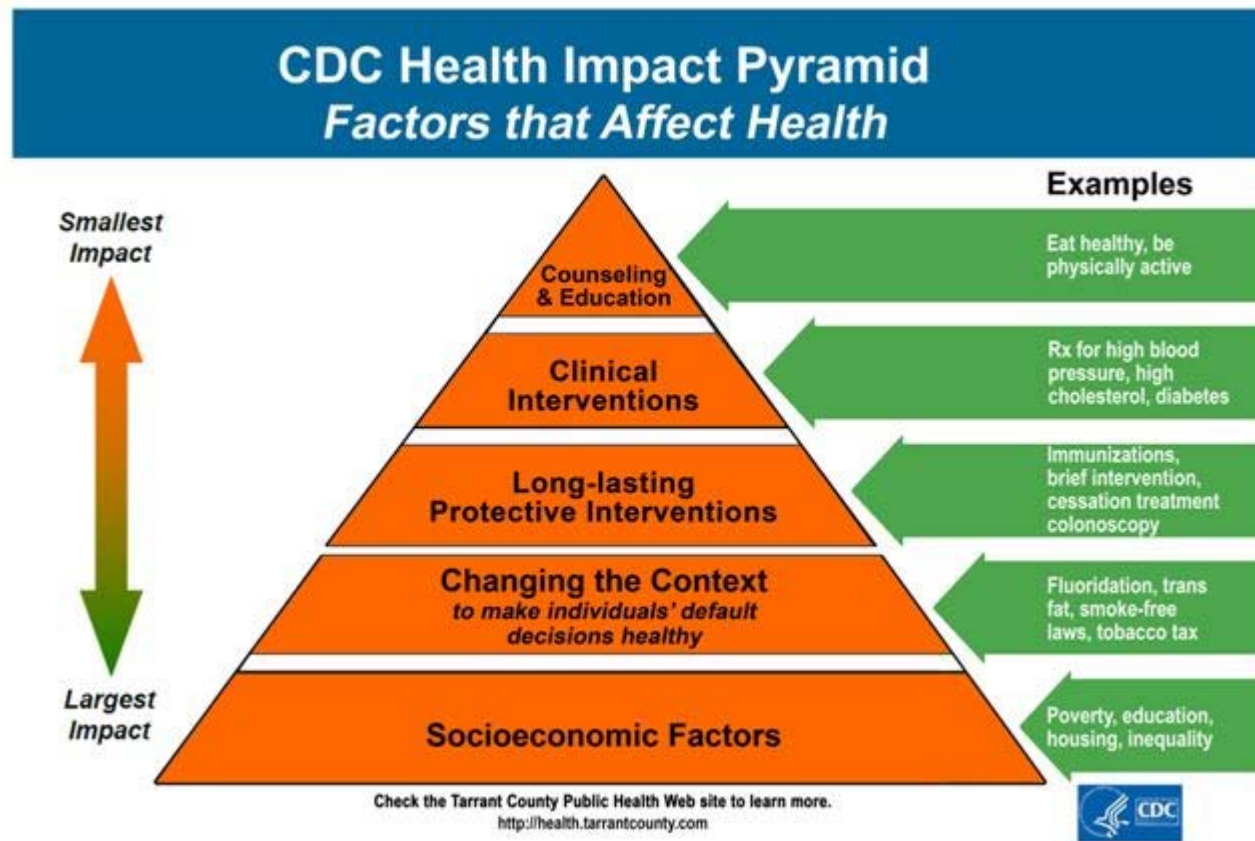
# Public Health Mission

Fulfilling society's interest in assuring the conditions in which people can be healthy

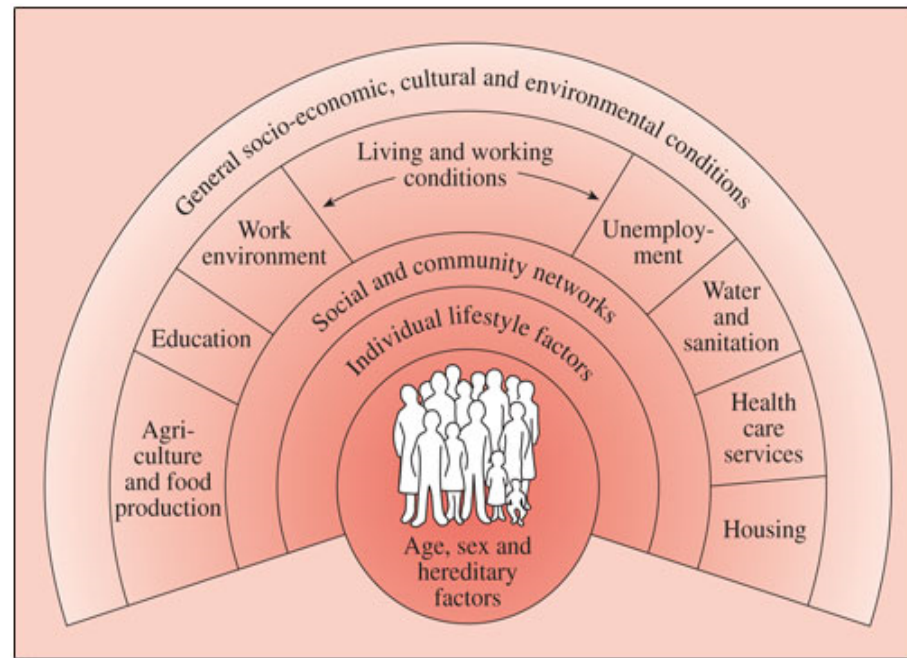
(for population health)

IOM, 2002

# Health Impact Pyramid



# Social Determinants of Health



# State Public Health and Aging Services

- Only 8 state health agencies provide elder care services
- 7 state health agencies provide home health services
- 19 state health agencies that identify as superagencies are responsible for long-term care\*

\* This is 95% of the SHAs that identify as superagencies.



**ASTHO's President's Challenge 2014-2015  
"Healthy Aging: Living Longer Better"**

**A Call to Action to Help  
Older Adults Live and  
Age Well in Their  
Communities**

# ASTHO's President's Challenge 2014-2015

- Aims to galvanize support for state health officials, their public health teams, state and local experts in aging and a broad network of partners
- Hopes to increase the number of older adults living well in their communities through the implementation of evidence-based strategies and new or enhanced partnerships
- National Prevention Strategy Framework
  - Four strategic action directions: *Healthy and Safe Community Environments, Clinical and Community Preventive Services, Empowered People, and the Elimination of Health Disparities*
  - Seven priority areas: *Tobacco Free Living, Prevention Drug Abuse and Excessive Alcohol Use, Healthy Eating, Active Living, Injury and Violence Free Living, Reproductive and Sexual Health, and Mental and Emotional Well-Being*



# National Prevention Strategy



# ***Living Longer Better* National Partnerships and Leadership**

- American Public Health Association Panel Presentation
- National Prevention Strategy Partner Meeting
- Caregiver Twitter Chat with WebMD
- American Society on Aging, Aging in America Presentation
- Safe States Alliance Annual Meeting Presentation
- Oral Health among Older Adults Webinar
- Alzheimer's Disease and Public Health Policy Institute
- Medication Adherence Expert Meeting
- Go4Life and Walk with the Surgeon General



## ***Living Longer Better* National Partnerships and Leadership**

- Congressional Briefing
- U.S. Department of Health and Human Services and the American College of
- Preventive Medicine Healthy Aging Summit and State Workshop
- White House Conference on Aging Regional Meetings
- White House Conference on Aging

# Healthy Aging Summit July 2015

## State Identified Priorities

- Physical Activity
- Mental Health
- Occupational Safety & Health
- Injury & Violence Prevention
- Social Determinants of Health
- Elimination of Health Disparities
- Nutrition & Weight Status
- Preparedness & Environmental Health

U.S. Department of Health and Human Services, American College of Preventive Medicine,  
Association of State and Territorial Health Officials

# Emergency Preparedness

- Characterize population by using community and state data about demographics, health status, medical conditions, service requirements, and other needs
- Build, maintain, and use medical registries
- Foster and sustain partnerships with agencies that aid the elderly during an emergency the most effectively
- Use shelter intake procedures to identify vulnerable older adults in the community



# Aging in Place Frameworks

- Age-friendly Communities (WHO)
- Livable Communities (AARP)

# Age Friendly Domains

Outdoor Spaces & Buildings	Accessible, population complementary, sufficient seating, clear signs
Transportation	Well marked routes, specialized transportation available, taxis are accessible and affordable
Housing	Affordable, close to services, and rest of community
Social Participation	Public venues are well lit, close, accessible
Respect & Social Inclusion	Included in family events, regular consultation on serving needs better



# Age-friendly Domains

Civic Participation & Employment	Flexible options for volunteering with training, recognition, guidance, and compensation
Communication & Information	Printed information, all communication in eligible
Community & Health Services	Home care services include health, personal care, and housekeeping

# AARP Livability Index

## Dimensions

- Housing
- Neighborhood characteristics
- Transportation
- Environment
- Health
- Opportunity
- Civic and social engagement

# Health Impact Assessments

- HIA is a process that helps evaluate the potential health effects of a plan, project or policy before it is built or implemented. An HIA can provide recommendations to increase positive health outcomes and minimize adverse health outcomes. HIA brings potential public health impacts and considerations to the decision-making process for plans, projects, and policies that fall outside the traditional public health arenas, such as transportation and land use.

# States Can Leverage Existing Opportunities

*(Life Course and Health in All Policies Approach)*

- Expand surveillance
- Community Health Assessments and Improvement Plans
- State Health Assessments and Improvement Plans
- State Healthy Aging Plans
- State Innovation Model Initiatives
- Partnerships to build community resilience
- Regularize a social determinants of health framework
- Community Health Improvement Navigator



# Other Considerations

- Caregiving
- Elder Justice
- Environmental justice
- Universal Design
- Dementia Friendly Communities
- Volunteerism
- Workplace and Leave Policies
- Sexuality in Long Term Care
- Financial Security
- Life course perspective on social inequality



# Always Remember

- Social Determinants
- Equity
- Policy and systems change
- Cross-sectoral collaboration
- Life course
- Foster inter-agency collaboration



















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## Huffington Post 7/20/2015


A comment from an elderly woman during an AARP regional forum leading up to the 2015 WHCOA speaks volumes about the urgency to not only discuss such issues, but develop and implement action plans that improve the current landscape:

"...the thing that strikes me is that the issues are the same issues year after year, decade after decade."



“...it's important that we pay attention to this; it's not merely a matter of hashing and rehashing the same issues and rotating the faces on the stage that speak about them. It's about taking steps to foster practical change through policies and solutions.

Jewel Mullen, a commissioner in the Connecticut Department of Public Health also noted, "I want to believe that 2015 is that year that, maybe in another decade, people will look back at and say that's when the tide turned."  
Here's to turning that tide.



"A society grows great when old men and old women plant trees under whose shade they know they'll never sit."

*Greek Proverb*