Systems Change Movement for Healthy Aging

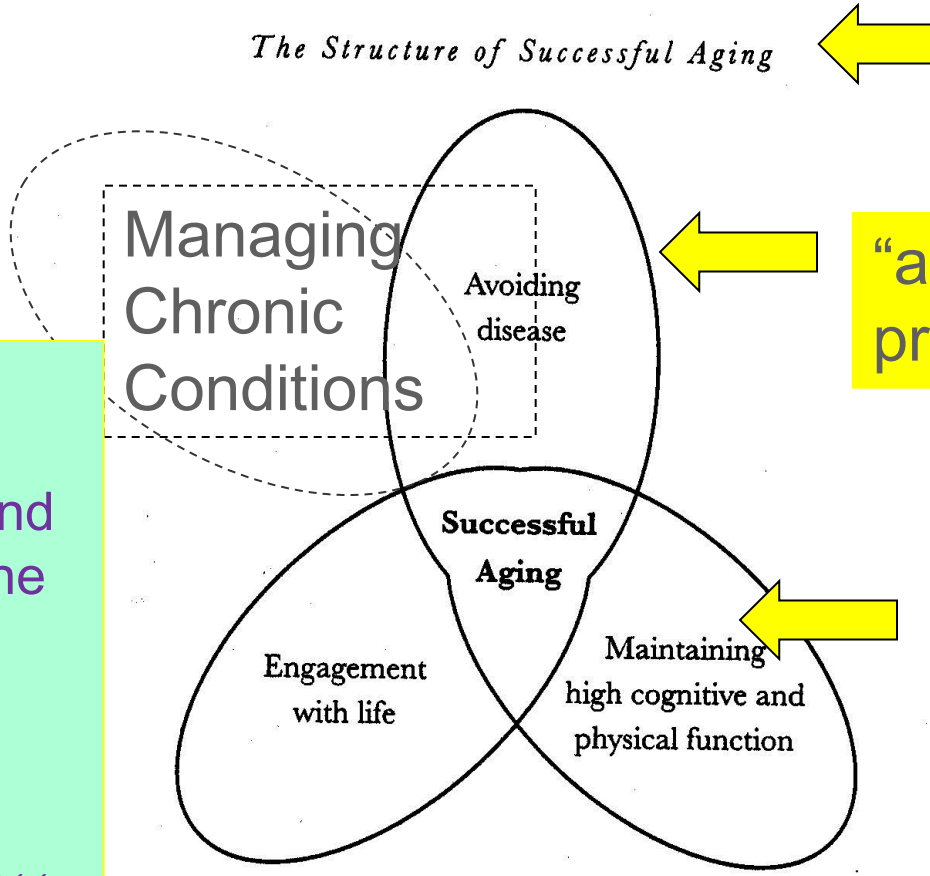


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SGS Conference, April 21, 2012, Nashville

What is Healthy Aging: Building from Rowe and Kahn Model



"Healthy Aging"

"and injury and promoting health"

"optimizing"

"change the emphasis to the ability to adapt and self-manage in the face of social, physical and emotional challenges"
Huber et al, BMJ, 2011

Source: Rowe, John W. and Kahn, Robert L. (1998). Successful aging. New York: Pantheon. 39.

Source: Marshall, V.M. & Altpeter, M. (2005). Cultivating social work leadership in health promotion and aging: Strategies for active aging interventions. Health & Social Work, 30(2), 135-144.

UNC IOA Institute on Aging

CDC Healthy Aging Research Network Approach

- *Healthy Aging* is the development and maintenance of optimal physical, mental and social well-being and function in older adults.*

- Keys to achieving healthy aging:
  - Effective community programs and health services are available and accessible.
  - Communities are safe and support healthy behaviors.
  - Individuals adopt and maintain behaviors known to promote health and well-being.



* Definition from the Healthy Aging Research Network, Prevention Research Centers

Healthy Aging …More than a program

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



Changing Systems for Healthy Aging

- Prevention – focus on the whole person
- Confront ageism, reduce health disparities
- Advocacy
- Evidence and outcomes - results are replicable
- Self-management, self-determination, social support
- Community-based solutions – building organizational networks and capacity
- Multi-sector partnerships

Healthy Aging Systems Change to a Multi-sector Collaboration

- Public, Private, National, Regional, Local
  - Aging
  - Public health
  - Mental health
  - Long-term care
  - Health care
  - Housing
  - Education
  - Employment
  - Academe
  - Philanthropy

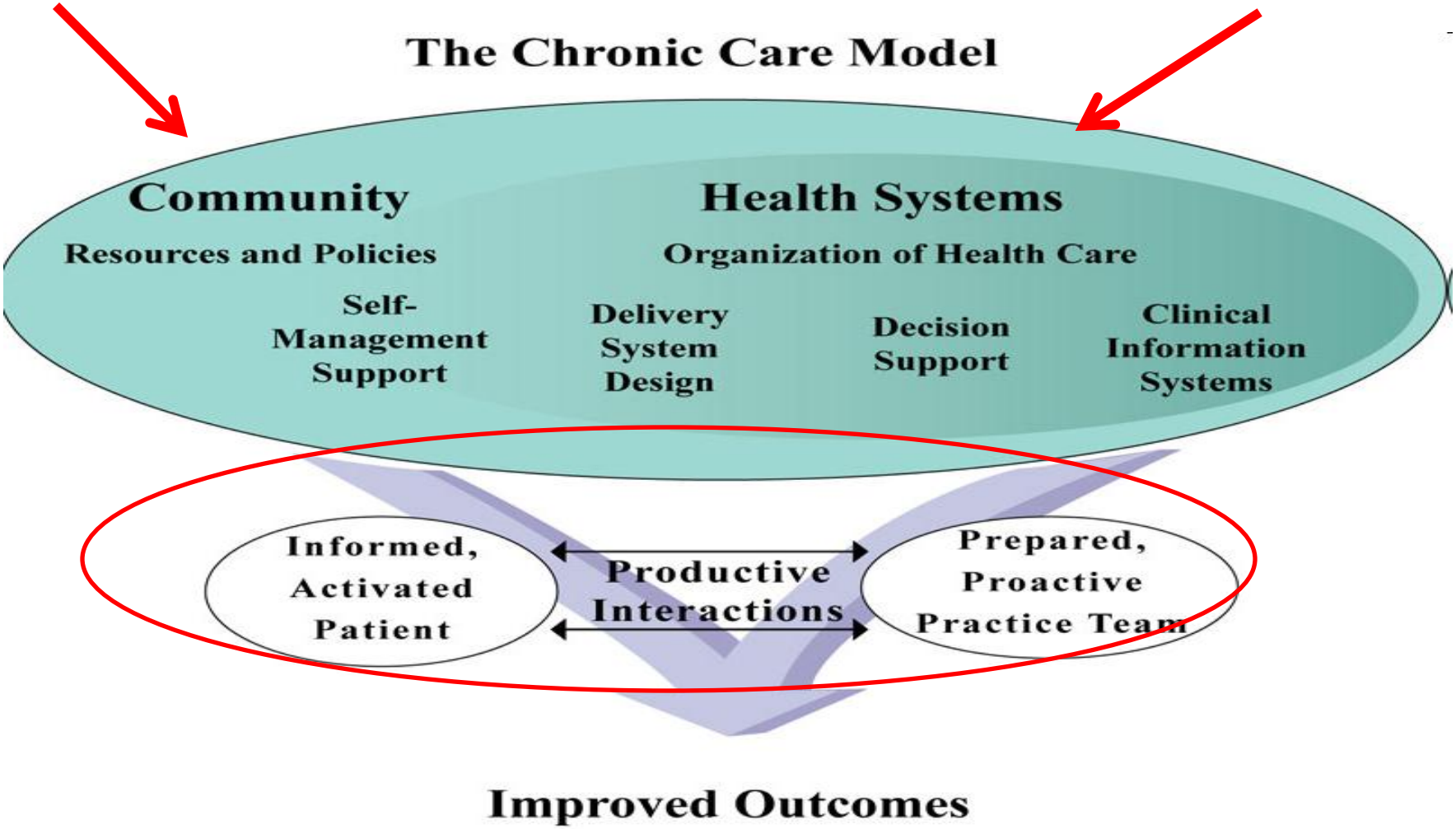


Guiding Frameworks: 1) The Socio-Ecological Perspective

- The health and well-being of older adults will be improved only if we work from a broad perspective.
- Comprehensive planning and partnerships at all levels are required.
- Changes at the individual level will come with improvements at the organizational, community and policy levels.

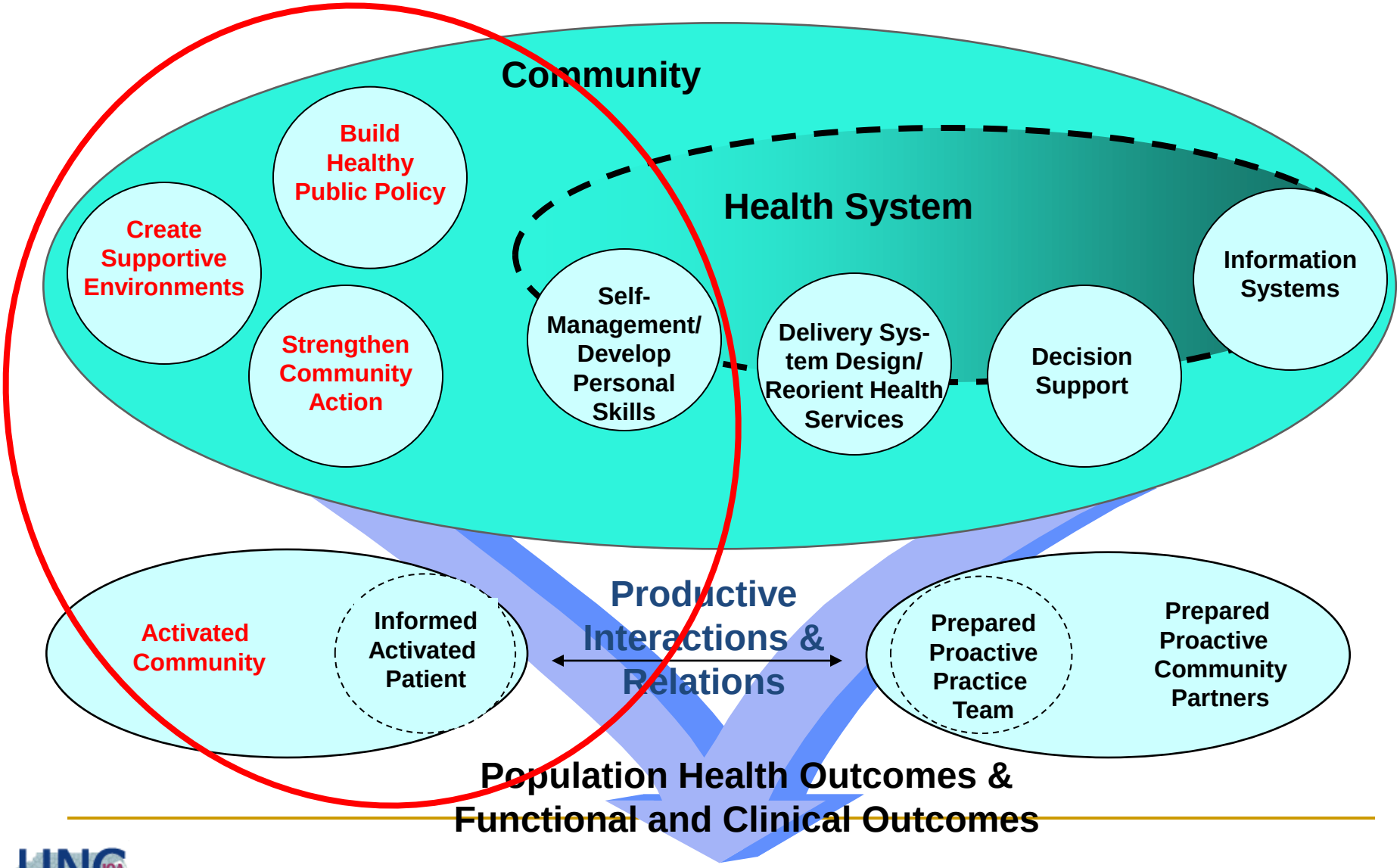
Adapted: Prevention: Why Does It Matter? PowerPoint presentation by Nancy Whitelaw, March 2007, available at: www.healthyagingprograms.org

Guiding Frameworks: 2) Chronic Care Model



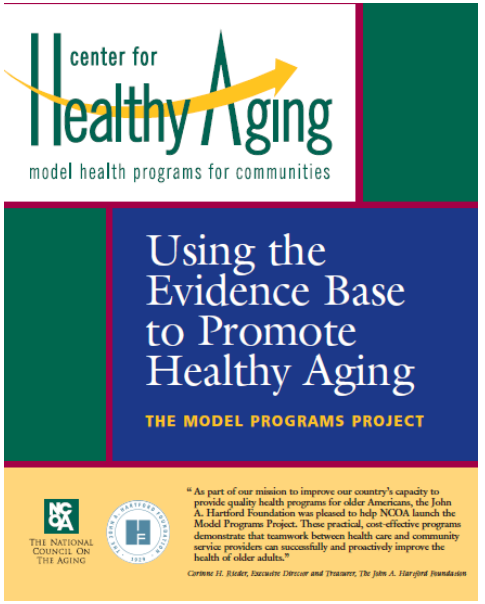
Developed by The MacColl Institute
® ACP-ASIM Journals and Books

The Expanded Chronic Care Model



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

Guiding Frameworks: A 3-tier Evidence-based Approach

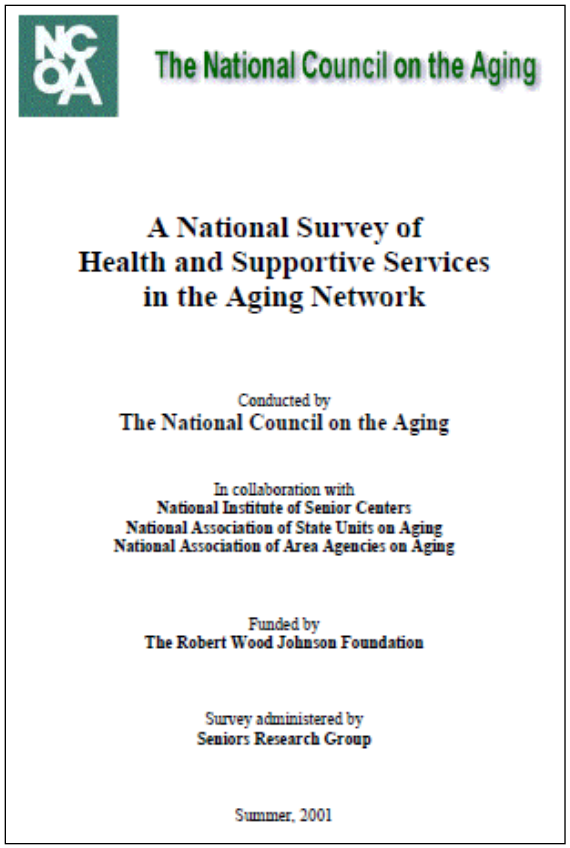


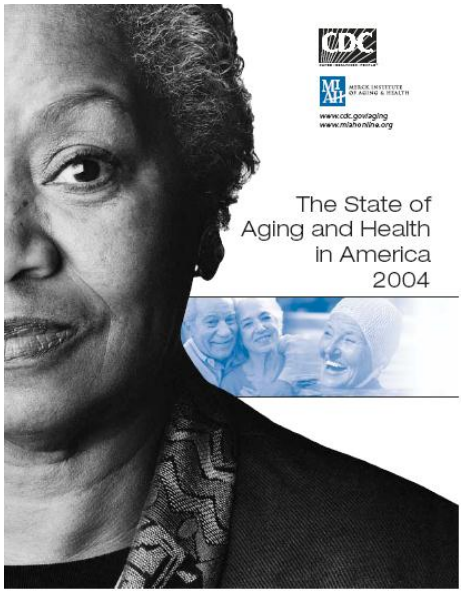
1. Evidence of a Problem for
   - people
   - communities

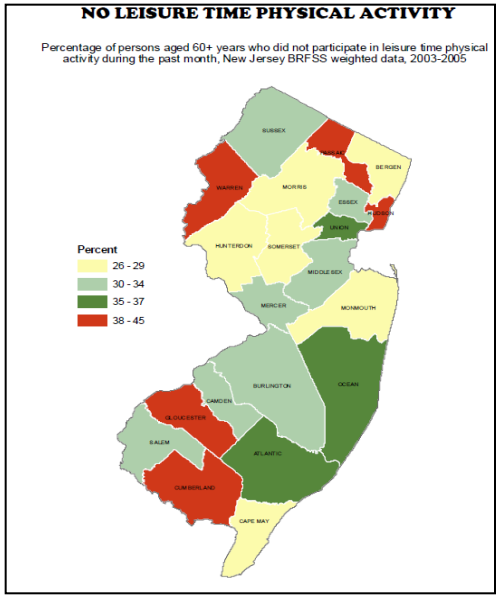
2. Evidence of Programs with Results
   - developing new evidence
   - adopting/adapting proven interventions

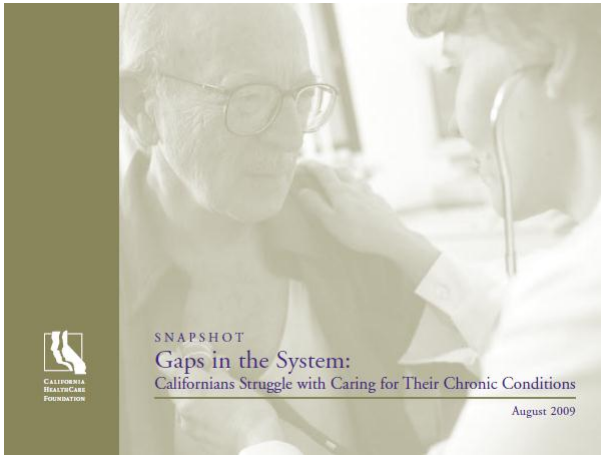
3. Evidence about Embedding and Sustaining – fit with
   - community and local organizations
   - health and service systems
   - policy agenda

Evidence of the Challenge

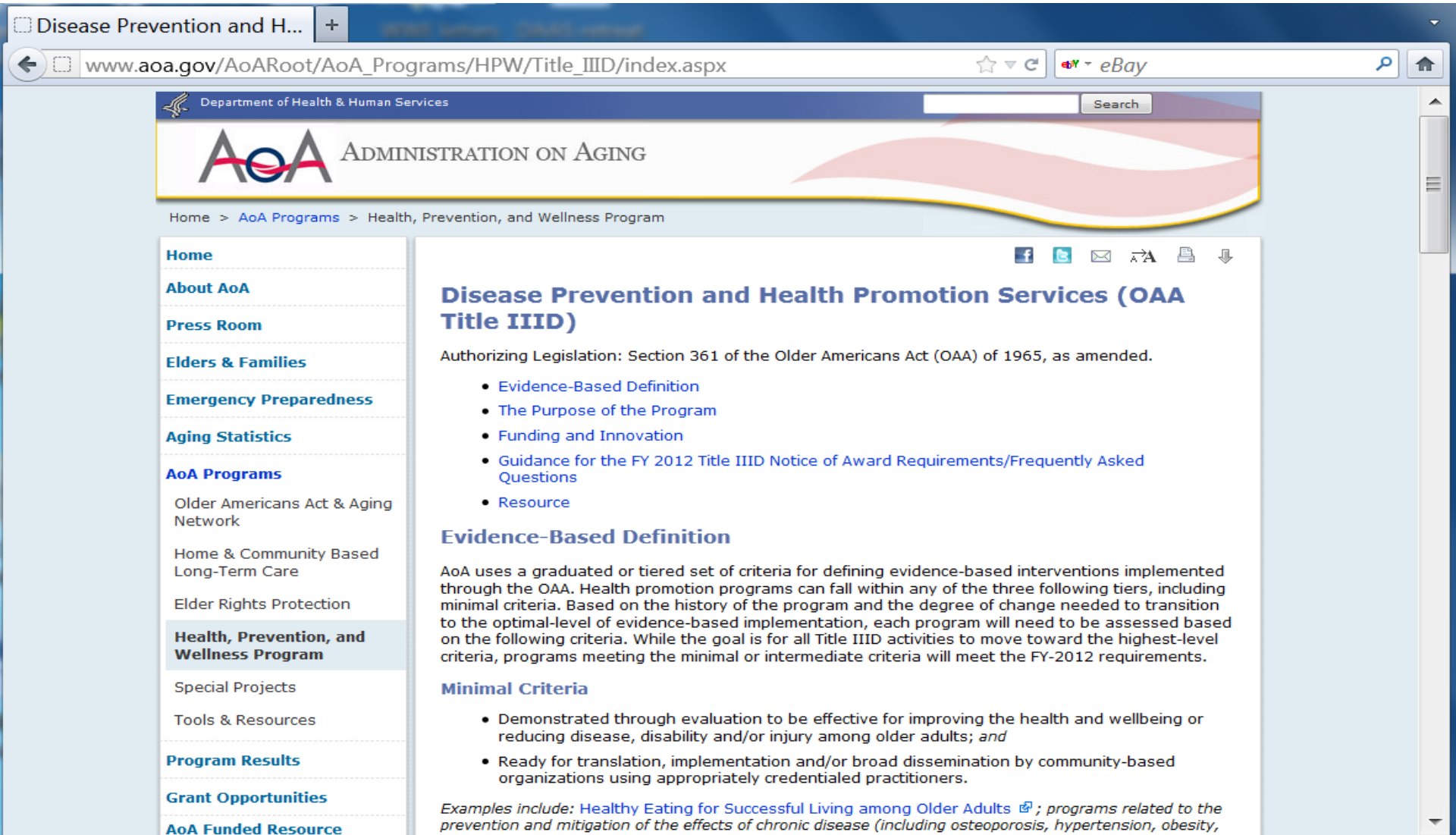




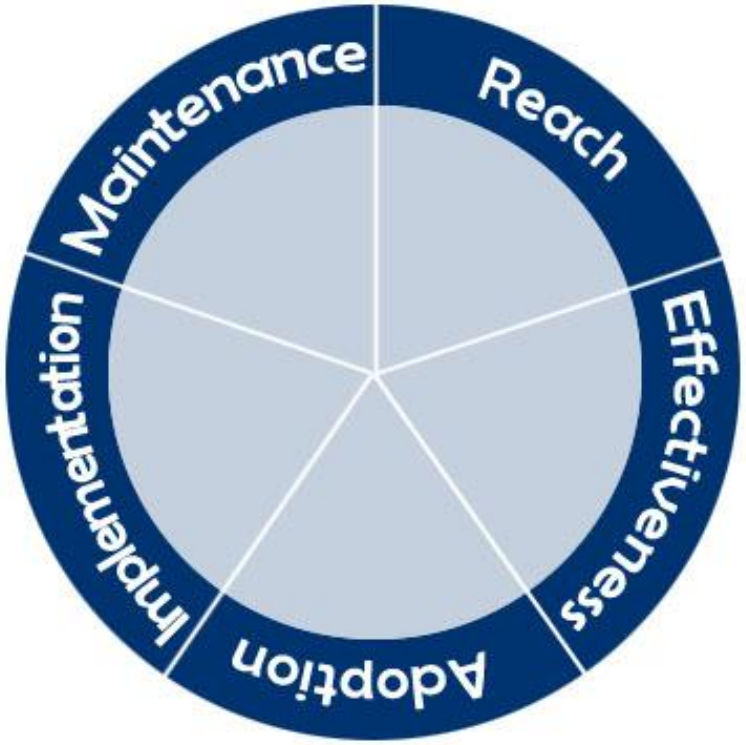




Evidence of Programs With Proven Results



Evidence of Embedding and Sustaining (A 3rd Framework)



- Analyze epidemiological data to target health issues and populations
- Develop common core of practical process and outcome measures
- Build partnerships across multiple sectors
- Implement evidence-based health promotion programs with fidelity
- Maintain individual-level benefits and sustain ongoing programming

Going Forward: What Community Agencies Need to Bring to the Table

- Strong community reputation
- Ability to reach older adults and vulnerable populations
- Effective programming
- Commitment to results and outcomes
- Responsiveness
- Appreciation of the contribution of health care and evaluation to health and well-being of older adults



Going Forward: What Health Care Providers Need to Bring to the Table



- Strong community reputation
- Financial commitment to help sustain the program
- Capacity to assist with evaluation
- Other “resources/expertise” of a large complex organization
- Appreciation of community agency and evaluation contribution to health and well-being of older adults

Going Forward: What Researchers Need to Bring to the Table



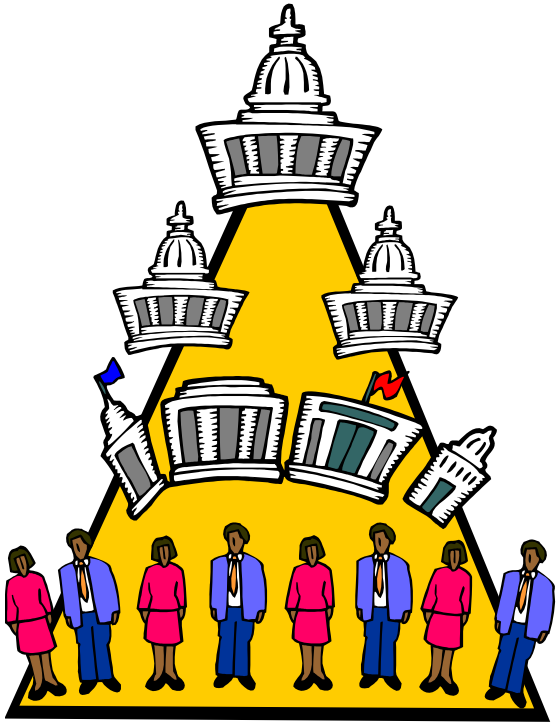
- Strong commitment to community participatory approach and applied research
- Ongoing capacity to assist with:
  - process and outcome evaluation
  - implementation research to address feasibility, adaptation
  - dissemination research to address scalability
- Connections to campus gerontology/geriatric resources
- Appreciation of community agency/health care contribution to health and well-being of older adults

Going Forward: Results and Reputations

- All collaborators need to understand clearly

  "What's in it for me and for you?"

- Focus on specific results, not general goals.
- Program outcomes matter
  - Improving health outcomes and containing costs
  - Achieving results takes time – and too often, time is scarce.
- Program and organizational reputations, and competence, *may matter even more*…



Thank You

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"You always have to be an early adopter."

Caption by Richard Gage
for New Yorker Cartoon



Thanks to Dr. Nancy Whitelaw, NCOA for sharing of slides