

## **Exploration of Aging in the *National Framework for Health and Wellness: The Educator's View***

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### **Introduction: James S. Bates, The Ohio State University**

There is perhaps no greater and far reaching demographic shift currently occurring in America than that of dramatic population aging. What we have seen is growth. Projections by demographers and researchers suggest that the population of aging Americans will continue to increase (Administration on Aging, 2016). Because this trend is a collision of decreases in birth rates in recent years and increased longevity, for the first time in recent history, families with individuals from 65 to 105+ years of age will be more prevalent than those with younger children. Taken together, these demographic trends have implications for health and wellness work in the areas of education, research, policy, and direct service.

Extension professionals at local, state, and national levels have attempted for some time to focus attention on the challenges and opportunities of working in this area both pragmatically in terms of education and thematically in terms of policy. However, because aging is a complex construct, addressing the breadth of issues to the depth necessary to make a meaningful impact is daunting and may keep some health and wellness professionals on the sidelines.

Recently, one university Extension representative from each of the states in the North Central Region formed a network of professionals interested in the topic of aging called the North Central Region Aging Network (NCRAN). Our mission is to: Increase knowledge and visibility of aging as a critical issue for individuals and families.

It is possible that the National Framework for Health and Wellness is a tool for thinking differently about aging. In this Panel presentation, we present a discussion of the role of aging in the National Framework, the needs and interests of Extension professionals related to aging programming, and future directions and opportunities for encouraging the expansion of aging programs. A revised framework for health and wellness in aging is proposed.

### **Panelist 1: Marlene Stum, University of Minnesota**

Gerontology is the comprehensive, multi-disciplinary study of aging processes across the life course, middle-aged and older adults, and aging populations. It is a holistic focus on the complex intersection of biological, social, psychological, and economic issues. The multidisciplinary nature of gerontology means that there are a number of sub-fields and associated fields. The field of gerontology is actually quite broad, containing many professionals who focus on various aspects of aging and development. Gerontology is not the same as geriatrics, which is a medical specialty focused on the health care and treatment of older persons. Gerontology is consistent with defining health as holistic physical, mental, and social well-being; not merely the absence of disease.

The **primary outcome** of a revised framework for health and wellness in aging is to: Increase the number of adults who are healthy in later life (65+). This includes a focus on providing education to older adults and prevention education for mid-life and earlier life stage individuals.

Life course perspective reflects the intersection of social and historical factors with personal biography and development. A life course perspective recognizes that health and well-being a function of cumulative advantages and disadvantages; early life course decisions, opportunities, and conditions affect later outcomes. Individual choices, opportunities, and social context influence an individual's health and wellness and life course transitions and trajectories with rippling and/or domino effects.

**Healthy and safe environments** suggests a social-ecological perspective with various interacting systems that influence aging in a social context. These include family systems, community and social systems, and cultural and societal systems. It is proposed that these be added to a revised framework for health and wellness in aging.

**Panelist 2: Chelsey Byers Gerstenecker, University of Illinois**

In 2016, led by Erin Yelland of Kansas State University the NCRAN team administered a region-wide needs assessment survey to Cooperative Extension professionals to better understand local and state needs related to aging programming. Over 1000 respondents from the 12-state region participated. One question asked respondents to rank aging-related concerns in order from most important to least important. Results indicate the following:

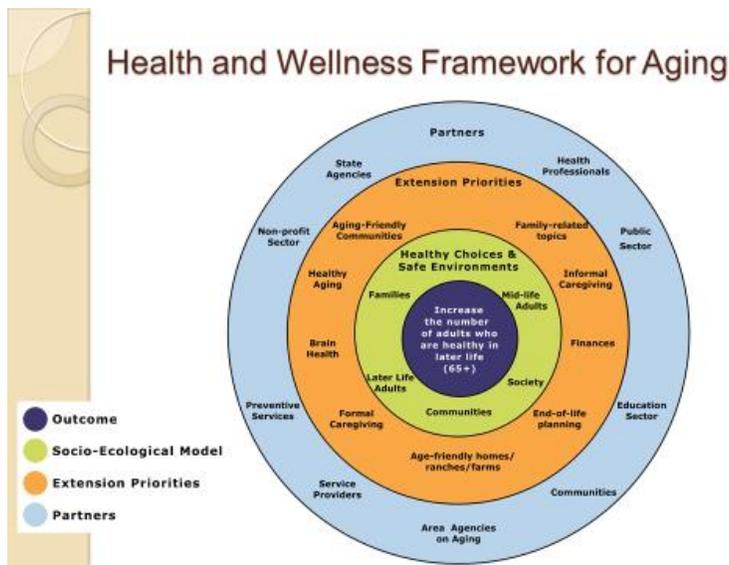
1. Finances - estate planning, financial exploitation, preparing for retirement, health insurance costs, living on a fixed-income, accessing public resources
2. Healthy aging - fall prevention, medication management, elder abuse prevention and awareness, driving, sexual health, chronic disease self-management, food insecurity, social relationships, normal vs. disease-based aging
3. Aging-friendly communities - transportation, walkability, workforce development, workplace modifications, dementia friendly communities, community awareness of aging-related issues, usability
4. Brain health - dementia risk reduction, Alzheimer's disease, steps to brain health
5. Aging-friendly homes/ranches/farms - AgrAbility, home modifications, farm/ranch modifications, assistive technology, universal design
6. Family-related topics - intergenerational communication skills/strategies, healthy relationships, managing changing roles and relationships, engagement, isolation, grandparenting, grandparents raising grandchildren
7. Informal caregiving – mental health/well-being, caregiver stress/burnout, paying for informal caregiving, domestic elder abuse prevention
8. End-of-life planning - advance health care planning for end-of-life decisions, transition planning, funeral planning
9. Formal caregiving - identifying and selecting long-term care housing options, paying for long-term care, institutional elder abuse
10. Ageism - what it is, how to encourage age-positive attitudes across all generations, public policy

It is proposed that these topics be added to a revised version of a framework for health and wellness in aging as **Extension priorities**.

**Panelist 3: Leacey Brown, South Dakota State University**

The NCRAN team is looking forward to next steps and future opportunities and propose three general recommendations. They are: (1) Examine how we are targeting older people for health outreach efforts recognizing the heterogeneity within this population, (2) Infuse existing outreach efforts with gerontological literacy, and (3) Prioritize positive adult development.

As Extension professionals continue to nurture existing partnerships and forge new ones, successful programmatic efforts will be achieved in collaboration with partner individuals and organizations. It is proposed that **partners** specific to aging be integrated into programmatic efforts and into a comprehensive health and wellness framework for aging.



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