Healthy Aging and Older Adult Health Policy Statement

POSITION
The Association of State and Territorial Health Officials supports prioritizing healthy aging throughout the life course through prevention and risk reduction efforts, in addition to promoting older adult health.

Healthy aging is a multi-factorial process, with experiences in early life contributing to overall health status as one ages.1–3 There is a growing recognition of the need for resources and systems to support health and social wellbeing for all age groups.4 Since life expectancy has not increased equally across all racial and ethnic groups and regions of the nation,5,6 an equity lens must be applied to supporting healthy aging over the life course. State and territorial health agencies (S/THAs) can engage diverse partners to build and sustain equitable systems that address structural determinants of health and improve access to quality services across all ages, including older adults.

BACKGROUND
As of 2019, 54 million—or 16% of—U.S. adults were aged 65 or older.7 By 2060, that is projected to exceed 94 million and represent nearly 25% of the entire population.8 Between 2019 and 2040, the proportion of Hispanic or Latino, Black or African American, American Indian or Alaska Native, and Asian American older adults is expected to increase by 115%; the non-Hispanic white older adults group will grow by 29%.7 It is important for S/THAs to prioritize health equity and be cognizant of the diverse needs of older adults. As the older adult population grows, the need for caregivers to support the diverse needs of older adults is a priority, in addition to strengthening caregivers’ wellbeing.48

It is important to consider how experiences over the life course influence health outcomes in later life.2,9,10 Social factors, such as access to reliable transportation, affordable and safe housing, opportunities for social participation, economic security, and access to nutritious food are examples of elements that can impact health and wellbeing over the life course. Additionally, clinical factors such as accessibility and affordability of high quality health services, early diagnosis and treatment of chronic disease, the presence and usage of community-based social services, and family and social support can contribute to the quality of health outcomes as people age.3 These drivers, which public health agencies are well suited to address, in combination with chronic disease and health behavior risk factors, can contribute to an accumulation of health challenges over the life course.5

Supporting healthy aging is a cross-sectoral effort, and each sector plays a crucial role in ensuring all people have equal opportunity to maintain health as they age. S/THAs can collaboratively prioritize healthy aging and older adult health in their jurisdictional plans and inform policymakers about policies that can increase equity in health outcomes over the lifespan. Older adults make valuable contributions to society, and when health promotion and disease prevention planning includes this population, people across all ages and abilities benefit.

ASTHO supports the following recommendations for S/THAs to promote healthy aging and address the needs of older adults and their caregivers.

Summary of Recommendations
- Adopt a health-in-all-policies approach to improve health outcomes and reduce health disparities over the life course.
- Support community-based service delivery and health promotion activities to help older adults age in place safely and healthily.
- Improve older adults’ access to healthcare services and quality of care.
- Strengthen supports for family caregivers.
- Collect comprehensive data on aging topics.
Improve Older Adults’ Independence, Access to High Quality Healthcare Services, and Family Caregiver Supports

- Strengthen the geriatric and dementia care workforce by reducing physician shortages, leveraging interprofessional care teams, and increasing workforce cultural competence.\textsuperscript{11-13}
- Promote integration of palliative care as a key component of comprehensive healthcare.\textsuperscript{14}
- Address older adults’ underuse of preventive healthcare services through multifaceted public health interventions.\textsuperscript{15,16}
- Support increased access to screening to improve early detection of dementia.\textsuperscript{17}
- Address ageism in healthcare settings and as a social determinant of health to prevent discrimination based on age and associated negative health impacts.\textsuperscript{18}
- Address unmet needs for dental, vision, and hearing services among older adults by improving access to and reducing the financial burden of services.\textsuperscript{19}
- Increase older adults’ use of telehealth services by improving its quality and reducing older adults’ barriers to telehealth access.\textsuperscript{20}
- Implement and enforce evidence-based policies and practices to ensure high-quality care is provided across the spectrum of long-term care settings.\textsuperscript{21}
- Support policies and programs that expand community health workers’ role in promoting older adult health and addressing dementia at the community level.\textsuperscript{22}
- Improve family caregivers’ economic security through policies \textit{addressing paid family leave}, and workplace discrimination, increasing family caregivers’ access to financial education and planning tools, and reducing out-of-pocket long-term care costs.\textsuperscript{23-25}
- Collaborate with clinical and community-based partners to reduce older adults’ fall risk through evidence-based mobility, medication management, and home modification programs.\textsuperscript{26,27}
- Support older adults’ social engagement and mental health through community-led social outreach, civic participation opportunities, and programs implemented in partnership with aging services organizations and clinical-community linkages.\textsuperscript{28}
- Work with clinical and community partners to support older adults experiencing food insecurity and increase their participation in nutrition programs such as SNAP and congregate or home-delivered meals.\textsuperscript{29}
- Support older adults’ preferences around end-of-life protocols and promote comprehensiveness of jurisdiction and health system policies, programs, and provider training in these areas.\textsuperscript{30,31}

Promote Healthy Aging Over the Life Course Through a Health-in-All-Policies Approach

- Address social determinants of health in childhood and adolescence, including promoting educational attainment and school-based health,\textsuperscript{32} investing in early child development,\textsuperscript{33} preventing and addressing adverse childhood experiences,\textsuperscript{34} and reducing child poverty.\textsuperscript{35}
- Mobilize cross-sector partnerships to create opportunities for economic wellbeing and reduce economic inequalities for all age groups, including older adults.\textsuperscript{36,37}
- Promote equitable access to healthy built environments and ensure safe, healthy, and affordable housing for all age groups, including older adults.\textsuperscript{37-39}
- Ensure that interventions and strategies to support physical and mental well-being during public health emergencies are tailored to the unique needs of all age groups, including older adults.\textsuperscript{40}
- Support use of the Behavioral Risk Factor Surveillance System caregiving and cognitive decline modules to assess cognitive health and caregiver outcomes.\textsuperscript{41}
POLICY APPROVAL HISTORY
Community Health and Prevention Policy Committee Approval: March 7, 2023
Board of Directors Approval: June 22, 2023
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Prior Statement Versions:
Healthy Aging Policy Statement
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Policy Expired: March 31, 2022

Healthy Aging and Public Health Position Statement
Board of Directors Approval: June 2015
Statement Expired: June 2018

ASTHO membership supported the development of this policy, which was subsequently approved by the ASTHO Board of Directors. Be advised that the statements are approved as a general framework on the issue at a point in time. Any given state or territorial health official must interpret the issue within the current context of his/her jurisdiction and therefore may not adhere to all aspects of this Policy Statement.

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REFERENCES


22. ASTHO. *Community Health Workers - A Resource for Healthy Aging and Addressing Dementia.*; 2021.


40. NORC at the University of Chicago. Needs Assessment and Environmental Scan Report: Maintaining Physical and Mental Well-Being of Older Adults and Their Caregivers During Public Health Emergencies.; 2021.