

The Impact of Senior Centers and Geriatric Healthcare Policy

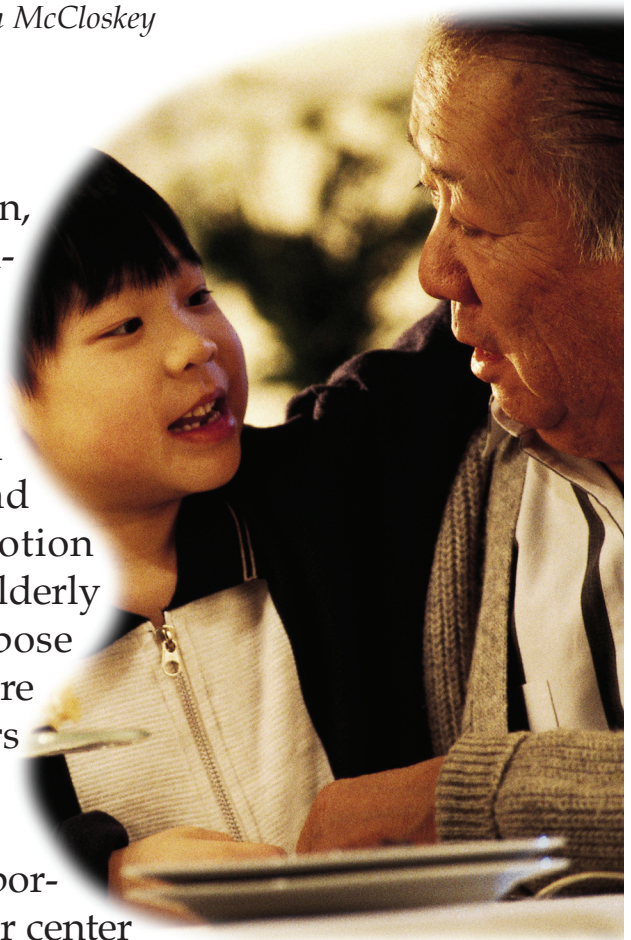
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OVERVIEW

With the aging of the baby-boomer generation, the impact of senior centers on local communities is becoming increasingly significant to national, state, and local policy-makers, practitioners, and community and nonprofit directors. All of these stakeholders are vital to encouraging leadership, awareness, and support of aging-related and health-promotion issues. Anticipated increases in Delaware's elderly population over the next several decades pose challenges to the state's lawmakers, healthcare policy researchers, and senior center directors in particular.

Delaware is unique to have in place a collaborative method of determining the state's senior center service-delivery needs, assessing senior centers' programs and services, and promoting best practices. However, recent budget constraints and continual demographic shifts illustrate the need for continual cost-effectiveness analyses of services offered at senior centers applying for grant-in-aid.

State and local stakeholders also bear the responsibility of recognizing and publicizing the need for continued support of senior center programs designed to maintain a high quality of life for Delaware seniors while minimizing aging-related healthcare costs. Advocating to citizens and local communities the long-term benefits of health-promotion activities is critical to cultivating preventative societal behavior.¹



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Therefore, projected increases in the state's senior population, coupled with the proven impact of senior center programs and activities as described below, requires that state and local leaders be knowledgeable of emerging research related to meeting community-specific needs, plan programs designed to maintain active lifestyles, and develop outcome-based methods of assessing programs and activities. The purpose of this fact sheet is to provide research-based educational information for individuals involved in funding, administering, and promoting services and programs offered at state and regional senior centers.

GENERAL SIGNIFICANCE & RELATED POLICY ISSUES

"Senior Centers are designated as community focal points through the Older Americans Act. The National Institute of Senior Centers defines a senior center as a place where 'older adults come together for services and activities that reflect their experience and skills, respond to their diverse needs and interests, enhance their dignity, support their independence, and encourage their involvement in and with the center and the community.'"

"Not only do senior centers offer helpful resources to older adults, they serve the entire community with information on aging, support for family caregivers, training professional and lay leaders and students, and developments of innovative approaches to addressing aging issues."

—National Council on the Aging (NCOA)

As defined by the federally sanctioned Older Americans Act (OAA), the NCOA, and the National Institute of Senior Centers (NISC), senior centers serve as hubs of nutritional, social, physical, and educational activities designed to respond to an increasingly diverse demand of elderly needs and interests while fostering independence and community interaction among participants.² A growing body of research supports the idea that activities and services offered at senior centers promote physical and mental well-being, facilitate self-sufficiency, and ultimately enhance the quality of life of many United States seniors. Studies also indicate that

programs, such as those offered at senior centers, might slow or even prevent functional deterioration, thus contributing to long-term national economic and societal benefits.

PROGRAM & SERVICE BENEFITS

PHYSICAL HEALTH PROMOTION

Senior centers throughout the nation offer a variety of physical health-promotion activities including aerobics, strength conditioning, and yoga. Many centers also provide congregate meal programs to help meet the daily nutritional needs of their participants. These activities and programs are valuable, given that various research studies prove that regular physical activity and a healthy diet can ward off heart disease, cancer, diabetes, and Alzheimer's disease.³ Furthermore, research from the Robert Wood Johnson Foundation indicates that seniors who practice regular physical activity tend to have overall improved cardiovascular health, better balance, and increased joint mobility, making them less prone to falls and long-term disabilities.⁴

Physical Health Promotion Services

Fitness: aerobics, strength conditioning, yoga, tai chi, aquatics, walking

Nutrition: congregate meals, homebound meals, counseling and monitoring

MENTAL HEALTH PROMOTION

In addition to promoting physical health, senior center activities can be linked to quality mental health of seniors. Numerous research articles, including a publication in *The New England Journal of Medicine*, report that social networking and participation in cognitively demanding leisure activities reduce seniors' risk of developing depression, dementia, and Alzheimer's disease while increasing their ability to defend against and recover faster from illness.⁵

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Mental Health Promotion Services

Social: card games, arts and crafts, singles clubs, celebrations, recreational trips

Outreach, Wellness: support groups, lectures, crisis and emergency care support, counseling and monitoring

DEMANDS OF NATION'S AGING BABY BOOMERS

Elderly health promotion and disease prevention efforts, like those administered through senior centers, are becoming increasingly important in the United States. The nation's population 65 years of age and older is expected to grow to nearly 40 million by 2010, an increase of more than six million in just six years.⁶ In 2000, 12.4 percent of the population was 65 years of age or older. By 2030, the percentage is expected to increase to 19.6, or approximately 71 million seniors, and 19.5 million seniors are likely to exceed 80 years of age.⁷ As the nation's senior population increases and becomes more heterogeneous over the next several decades, caregivers, communities, and governments will rely heavily on effective methods of coping with both a greater demand for senior services and a heightened potential for aging-related increases in healthcare costs.

HEALTHCARE COSTS

Currently, the United States spends \$250 billion annually, or 2.5 percent of its gross domestic product (GDP), on medical care for the elderly.⁸ As baby-boomers continue to age, rising healthcare costs could lead to financial crises for many state governments' Medicaid and Medicare programs.⁹ Additionally, the U.S. Department of Labor estimates that the country may need to triple its number of long-term care workers to 6.5 million by 2050 in order to accommodate the 27 million people expected to use nursing facilities, alternative residential care, or homecare services.¹⁰



SUMMARY

Although senior centers are not a panacea for the potential economic and social issues associated with the nation's increasing elderly population, they do provide physical and mental health promotion venues, which not only increase life expectancies and decrease long-term disabilities but may help control inflating healthcare costs associated with the nation's aging population.

Healthy living and independence for seniors are not only significant in reducing pressures on the nation's healthcare system, caregivers, and society, but, most importantly, also preserve dignity and enhance life satisfaction.

Senior center programs are designed to help the elderly live better by easing the physical, emotional, social, and financial challenges attributable to age and disability.¹¹ As the nation's elderly population continues to increase over the next 20–30 years, states will need to become increasingly aware of the demands of the aging population and supportive of programs like those offered at senior centers, which are designed to promote healthy, active senior lifestyles.

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NOTES & RELATED PUBLICATIONS

¹J.M. McGinnis, P. Williams-Russo, and J.R. Knickman, "The Case for More Active Policy Attention to Health Promotion," *Health Affairs* 21, no.2 (2002): 78-93. This article emphasizes the importance of health promotion policies and how they can affect the determinants of population health. Although there are many factors inhibiting the creation of health promotion and disease prevention policies (e.g., behavioral patterns, medical care), the paper offers ideas to improve and implement policies that encourage healthier living through incentives and social investments.

²"Facts about senior centers," National Council on Aging. Retrieved April 1, 2004 from www.ncoa.org.

³K. Fackelmann, "The Secrets to Longevity," *USA Today* 22 February 2004. Retrieved February 23, 2004, from www.usatoday.com.

⁴"National Blueprint: Increasing Physical Activity Among Adults Age 50 and Older," Robert Wood Johnson Foundation. Retrieved February 13, 2004, from www.rwjf.org.

⁵J.T. Coyle, M.D., "Use it or Lose it: Do Effortful Mental Activities to Protect Against Dementia," *The New England Journal of Medicine* 348, no. 25 (2003): 2489-2490. Coyle suggests that forming abundant, meaningful social networks and participating in mentally demanding activities can delay the onset of dementia among the elderly. While there is no concrete evidence that not participating in these activities is detrimental, studies indicate that applied mental activity may strengthen neural synapses and create new ones.

⁶"Older and better? Aging baby boomers have to face realities about their future," *The Post-Standard* 17 November 2003 Final ed.: A10. As the number of senior citizens is expected to reach 40 million by 2010, social and economic preparations must be made. While both baby boomers and government officials must be realistic about the future, appropriate planning efforts and resources should be determined and allocated to address the needs of the increasing senior population.

⁷"Public Health and Aging: Trends in Aging - United States and Worldwide," *MMWR Weekly* 14 February 2003, 52(6): 101-106. Chronic disease and disability among the American elderly is a public concern because federal and state monies go toward long-term health care; however, the incidence of disability among the United States elderly population is decreasing. The article discusses possible explanations for this phenomenon as well as the effects that declining disability can have on public policy and healthcare spending.

⁸D.M. Cutler, "Declining Disability Among Elderly," *Health Affairs* 20, no.6 (2001): 11-27.

⁹L. Polgreen, "As Population Grows Older, Towns Face Crisis," *New York Times* 4 November 2003. Retrieved November 4, 2004 from www.nytimes.com.

¹⁰"U.S. Healthcare Workforce will Need to Triple by 2025 to Account for Aging Population, Study Says," Daily Health Policy Report from the Kaiser Family Foundation 22 May 2003. Retrieved February 10, 2004, from www.kaisernetwork.org. The demand for long-term care facilities and resources is likely to increase as the baby boomers age over the next several decades. To meet the needs of the senior population, healthcare services may be forced to expand. This includes increasing the number of nurses and other health aides.

¹¹T.M. Gill, M.D., D.I. Baker, Ph.D., M. Gottschalk, P.T., Peduzzi, M.S., P.N., Ph.D., H. Allore, Ph.D., and A. Byers, M.P.H. "A Program to Prevent Functional Decline in Physically Frail, Elderly Persons Who Live at Home," *The New England Journal of Medicine* 347(14) 2002: 1068-1074. Despite a recent decline in the frequency of disability among elderly Americans, it is still important to prevent disability and other physical impairments. In the study, physically frail elderly participated in home-based physical therapy. The results indicated that those with moderate frailty benefited from the experience, thus supporting the idea that further decline among frail elderly can be slowed or even prevented.

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