

The number of older adults in the United States is increasing rapidly, making up an increasingly large proportion of the population. This demographic shift highlights the need to address common health issues that many older people face, such as chronic diseases, disabilities, cognitive impairments, or problems with memory and thinking.

Aging increases the risk of many health issues, including:

- Heart disease
- Arthritis
- Cancer
- Type 2 diabetes
- Respiratory diseases
- Dementia
- Reduced mobility

As people age, they may also face life changes such as serious illness or the loss of loved ones, which can affect their mental health. If these feelings last, they can turn into mental health issues like depression and anxiety. Unfortunately, many older adults are often misdiagnosed or not treated properly, and they might not seek help because they don't realize that they can feel better with the right treatment.³

While health problems in older adults are quite common, expensive to treat, and often preventable⁴, poor health is not a natural part of aging. Maintaining a lifestyle with healthy behaviors and managing chronic conditions can help older people keep their independence and a high quality of life.



What are CDC Prevention Research Centers?

PRCs are academic research centers that study how people and their communities can reduce the risks for chronic illnesses. PRCs collaborate with local communities to make a positive impact, especially in populations affected by health disparities. Together, they identify key public health issues, develop and test programs, policies, and practices to prevent chronic diseases, and create tools and resources that can be shared widely.

Statistics about aging and chronic conditions



78 million adults projected aged 65 or older in the U.S., making up 22% of the population.



89 million older adults projected, making up 24% of the U.S. population.¹



88% of older adults have at least one long-term health problem or chronic condition.



64% have two or more long-term health problems or chronic conditions.²



SUPPORTING HEALTHY AGING

CDC <u>Prevention Research Centers</u> (PRCs) carry out innovative research and create and test evidence-based programs that address health issues specific to their communities. PRCs support the health of older adults by promoting healthy aging, preventing chronic diseases, and enhancing quality of life. This includes providing resources for caregivers, increasing access to preventative services, and carrying out proven health promotion programs.

Some PRCs are part of Thematic Research Networks, like the Dementia Risk Reduction Research Network (DR3N). The DR3N focuses on improving the quality of life for people with Alzheimer's disease and related dementias (ADRD). Members from the PRC Network, including the University of Illinois Chicago, University of South Carolina, and Washington University in St. Louis, work together to create guidelines, policies, and environmental changes that help reduce the risk of ADRD in older adults. By focusing on people who face health disparities, DR3N aims to close knowledge gaps and put effective programs in place for older adults who show early signs of ADRD.

ACTIVE AGING: PROMOTING PHYSICAL ACTIVITY AND MANAGING ARTHRITIS

Promoting physical activity plays a vital role in managing chronic conditions like arthritis. This condition affects about 53 million adults and is a leading cause of disability in the United States.⁵ Although there is no cure for arthritis, staying physically active and participating in self-care programs can help manage it.

Programs like Walk with Ease (WWE), created by the Arthritis Foundation, have been shown to lessen arthritis symptoms.

In-person WWE program participants reported:

- Reduced pain
- Improved balance and strength
- Increased confidence in performing physical activity
- Overall improved well-being⁶

However, many people face barriers that prevent them from attending in-person programs.

The <u>University of South Carolina Prevention Research Center</u> (USC PRC) partnered with the South Carolina Department of Health and the South Carolina Department of Aging to reduce the impact of arthritis on older adults. They adapted WWE to create a new program called <u>Walk</u> with <u>Ease by Telephone</u> (WWE-T).

The WWE-T program includes:



- Two weekly phone calls for 6 weeks with trained WWE staff to provide health education.
- Four study assessments at the start and at 6 weeks, 6 months, and 12 months.
- Assessments monitored pain levels, physical function, physical activity, depressive symptoms, confidence in managing health, work loss, and use of healthcare services.

Preliminary results at 6 weeks indicated that the WWE-T program led to greater improvements in fatigue, physical activity, self-efficacy, and activity impairment due to health compared to those who did not receive the program. There were also improvements in self-reported disability, physical function, and depressive symptoms.

Pending favorable findings, the program will be submitted for consideration as an <u>Arthritis Appropriate Evidence-Based Intervention (AAEBI)</u>. All training materials for WWE-T will be made available, and future adaptations will be considered once all study results are finalized.

Offering more virtual or telehealth programs for older adults can make it easier for them to get the resources they need. This can help more older adults stay active and exercise, which is crucial for managing arthritis and improving overall health and brain function.

Many adults with arthritis face barriers to participation in in-person programs, so we wanted to create a version of WWE that could reach those individuals. We opted to go with a telephone-delivered program, which provides the accountability that one would get from an in-person program, while also being accessible to those without technology or in rural areas where access may not be consistent."

-Christine Pellegrini, PhD, Principal Investigator of WWE-T



DANCE AND EXERCISE FOR MIND AND BODY: COGNITIVE ENHANCEMENT THROUGH PHYSICAL ACTIVITY

The Policy, Practice and Prevention Research Center (P3RC) at the University of Illinois Chicago's School of Public Health actively encourages older adults to stay physically active and socially engaged to reduce cognitive decline, like that seen in Alzheimer's disease. Experts predict that by 2060, nearly 14 million people aged 65 and above in the United States will have Alzheimer's.

Older Latino/Hispanic adults are at a higher risk of ADRD compared to older White adults.⁷ Currently, 14% of older Hispanic adults are diagnosed with Alzheimer's, and this number is expected to rise significantly in the coming years.⁸ Research consistently shows that physical activity improves brain function and overall well-being, especially in group settings. However, Latino adults are significantly less likely than non-Latino White adults to get regular physical activity. Older Latino adults in urban areas often cite unsafe neighborhoods and less access to parks and recreational facilities as significant barriers to walking, a common form of exercise.⁹

To tackle these challenges, P3RC's <u>Cognitive Enhancement and Risk-Reduction through Exercise for Brain-Related Outcomes</u> (<u>CEREBRO</u>) program offers online group dance and exercise sessions for older Latino adults. Walking and dancing are the two most reported forms of physical activity among older Latino adults. Given the barriers to walking, indoor physical activity programs like online dance sessions present a viable solution.

Older Latino adults value functional independence and associate physical fitness with feeling healthy and being able to perform daily activities with ease. Traditional exercise programs have rarely been adapted to their needs. Latin dance is a promising activity that is culturally acceptable to this population. Studies have shown that various dance styles can improve global cognition, executive function, episodic and working memory, and attention.¹⁰

CEREBRO offers two successful programs for dance or exercise: BAILAMOS™—Balance and Activity in Latinos, Addressing Mobility in Older Adults and ¡En Forma y Fuerte!—Fit & Strong!. The study aims to determine if online dance and exercise programs can lower the risk of ADRD and improve quality of life for people showing signs of cognitive decline.⁹ Data are collected remotely when the program starts, after 12 weeks, and after 24 weeks. Physical activity, cognition, quality of life, and social connectedness are evaluated.

Benefits of the program include:

- Accessibility: Online sessions eliminate barriers related to unsafe neighborhoods and extreme weather conditions.
- Social connectedness: Group settings enhance social engagement, which is beneficial for cognitive health.
- Physical and mental health: Enjoyable physical activity promotes overall well-being and cognitive function.
- Quality of life: Improved physical health, mental well-being, and increased social interaction can lead to a sense of enjoyment and fulfillment.

- 1 feel more flexibility in my body. I've always had problems with insomnia, but after starting the program I've been sleeping well.

 [The En Forma y Fuerte Program] has helped me a lot."
 - -Forma y Fuerte! Fit & Strong Program Participant
- 66 I have more energy and I have more motivation to be active."
 - -BAILAMOS™ Program Participant

By offering culturally relevant and easily accessible physical activity programs, P3RC hopes to reduce cognitive decline and improve the overall quality of life for older Latino adults.



BREAKING BARRIERS: IMPROVING MENTAL HEALTHCARE ACCESS

The <u>University of Washington Health Promotion Research Center</u> (UW HPRC) partnered with health care professionals and organizations to improve mental health care access for older adults. In 2022, 15.5% of U.S. adults aged 65 or older reported having ever been diagnosed with depression.¹¹

The <u>Program to Encourage Active</u>, <u>Rewarding Lives (PEARLS)</u> educates older adults about depression and helps them develop the skills they need to lead more active and independent lives. Designed with community input, PEARLS expands access to mental health services for underserved older adults without requiring a diagnosis.

66 All these skills helped me realize I can have a life I enjoy. Before PEARLS, I did not see beyond a day."12

-Former PEARLS program participant

To make the program more accessible, the PEARLS team at UW HPRC launched a new, fully remote and online version of the <u>PEARLS Coach Training</u>. PEARLS coaches are the staff at community-based organizations (CBOs) who meet one-on-one with older adults to help them build the skills they need to live a happier, healthier life. There are no professional licensing, accreditation, or higher education requirements to participate in PEARLS training or become a PEARLS coach, making it easier for community-based social service organizations to adopt the program and reach older adults with poor access to mental health care.

The goal of PEARLS has always been to expand access to depression care for older adults," said Caitlin Mayotte, PEARLS Program Manager at UW HPRC. "Demand for online training increased significantly at the start of the pandemic. Now, video conferencing and connecting with people remotely have become more common. We knew we had to use this opportunity to provide more accessible training."

PEARLS Equity, an expansion of the previous program, aims to increase access to depression care for older adults who:

- Experience poverty.
- Belong to racial and ethnic minority groups.
- Speak a language other than English.
- Live in rural areas.

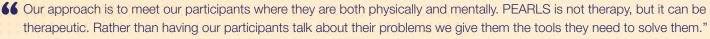
The program focuses on older adults with significant depressive symptoms who have faced unfair treatment due to racism, sexism, ageism, and unjust systems, making it harder for them to access mental health care. PEARLS Equity worked with CBOs in Washington and California that connect with older adults beyond hospitals and clinics to create plans that align with the values and priorities of the organization, staff, and community members.

New communication approaches included:

- Proactive outreach to CBOs that serve older populations through group and one-on-one interactions.
- A <u>peer-to-peer video</u> featuring PEARLS organizations sharing their strategies for reaching communities underserved by clinical care.
- Updated PEARLS messaging on the website and other communication channels to better connect with CBO leadership, staff, and clients.

New strategies to increase PEARLS adoption included:

- Personalized support calls to provide tailored guidance for different contexts.
- On-demand training videos featuring trainers from various organizations, providers, and priority populations.
- Zoom webinars and community conversations led by PEARLS community partners.



- PEARLS Coach Joel Hernandez

During the three-year trial (2021-2023), PEARLS Equity reached over 500 organizations in Washington and California. The study team is analyzing study data to understand whether this approach increased PEARLS adoption among organizations that engage older adults from the priority populations. They are preparing presentations, papers, and other materials to share tools and stories with audiences across the country.

By working closely with local organizations, PEARLS Equity aims to bridge gaps in mental health care and ensure that older adults in underserved communities receive the support they need to lead active, fulfilling lives.

THE IMPACT OF ADDRESSING CHRONIC DISEASES IN OLDER ADULTS

Addressing chronic diseases among older adults is a public health priority. Effective prevention, early detection, and comprehensive management can promote healthy aging, reduce disability, and improve overall health outcomes. This approach not only preserves quality of life for older people and their families but also helps reduce the economic burden on health care systems by lowering the costs of managing chronic diseases.



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