National Coalition on Mental Health and Aging Meeting

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Improving the lives of 10 million older adults by 2020

About NCOA

Our Mission:

Improve the lives of millions of older adults, especially those who are struggling

Our Social Impact Goal:

Improve the health and economic security of 10 million older adults by 2020

Visit us at ncoa.org



Center for Healthy Aging

Overarching Goal

Increase the quality and years of healthy life

Two National Resource Centers funded by ACL/AoA

- Chronic Disease Self-Management Education (CDSME)
- Falls Prevention

Other Areas of Focus

- Behavioral Health
- Oral Health
- Physical Activity
- Flu prevention



Technical Assistance Activities

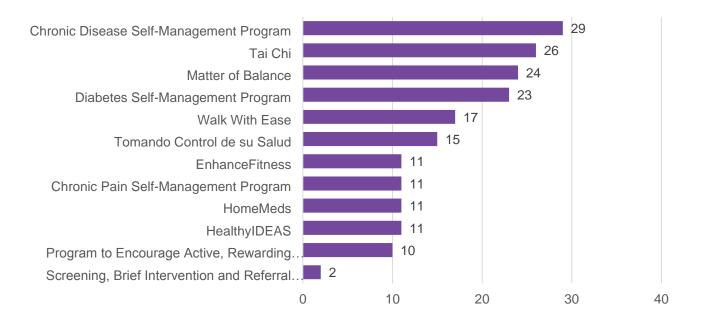


2017 National Survey of State Units on Aging re Evidence-Based Programs

- On-line survey open from March 18, 2017 to April 26, 2017
- 19 questions regarding
 - Current evidence-based program offerings and reach
 - Funding
 - Health concerns
 - Program gaps
 - Technical assistance needs
- 31 State Older Americans Act Title III-D coordinators responded



Most Popular Evidence-based Programs (N=31 states surveyed)

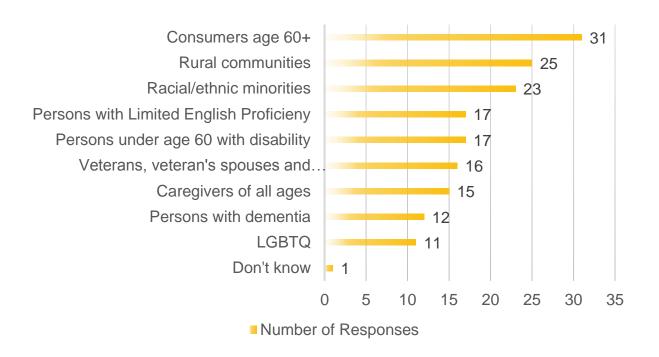


Number of States Offering Program



Populations Being Reached by EBPs

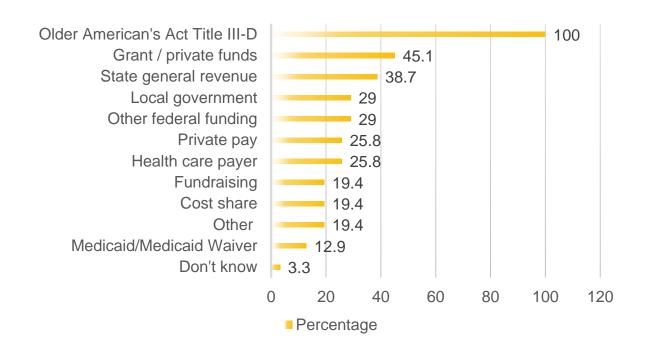
(N=31 states surveyed)





Funding Sources

(N=31 states surveyed)



Health Concerns and Programming Gaps

Health Concerns

- Diabetes
- Falls prevention
- Arthritis
- Hypertension
- Heart disease
- Chronic disease
- Nutrition
- Mental health, cancer, obesity

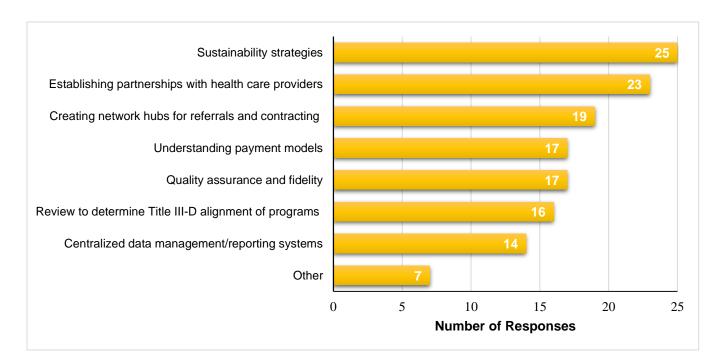
Gaps

- 42% reported programming gaps, including
 - Diabetes
 - Limited English proficiency
 - Culturally specific programs, including Native Americans
 - Caregiver programs



States' Technical Assistance Needs

(N=31 states surveyed)





Stanford CDSME Program Overview

- Developed at Stanford University
- 6 workshop sessions held once a week
- Each session 2 ½ hours, highly interactive
- Co-facilitated by 2 trained leaders, one of whom has a chronic condition
- Core content:
 - Symptom management/social role function
 - Exercises to build self-efficacy
 - Goal setting and action plans
 - Problem solving to overcome challenges



CDSME Program Benefits – Triple Aim

Better Health

- Better selfassessed health and quality of life
- Fewer sick days
- More active
- Less depression
- Improved symptom manage

Better Care

- Improved communication with physicians
- Improved medication compliance
- Increased health literacy

Lower Costs

 Decreased ER visits and hospitalizations (\$364 net savings per person)

Source: https://www.ncoa.org/resources/national-study-of-the-chronic-disease-self-management-program-a-brief-overview/



CDSME Program Participants Demographics

Participant Characteristics	% or n
Average Age	65.3 years
Race/Ethnicity	
White	68.5%
Hispanic	16.3%
African-American	22.9%
Asian-American	3.9%
Depression or Anxiety Disorders	19.3%
More than one chronic condition	55.2%
Limiting condition	46.6%
Caregiver	27.5%
# of sessions attended	4.3 sessions

Data collected from March 1, 2010 to June 16, 2017 N = 315,895

Evidence-based Program Review Council

- Funding through ACL
- Partnership with the Evidence-Based Leadership Council (EBLC)
- Purpose: to identify new health promotion and disease prevention programs that meet the Older American Act Title IIID Criteria
 - Demonstrated to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults and
 - Proven effective with older adult population, using Experimental or Quasi-Experimental Design and
 - Research results published in a peer-review journal and
 - Fully translated in one or more community site(s) and
 - Includes developed dissemination products that are available to the public.
- First round of program reviews Fall 2017





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