



Healthy Aging Update

Iowa Department of Elder Affairs

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Welcome

This issue of Healthy Aging Update highlights fall prevention. Sources for this information are the Iowa 2006 BRFSS and University of Florida ENAFS Healthy Living Program Module on Falls Prevention. Check out the Resource section for information on obtaining the complete educational module. Additional information in this newsletter is intended to serve as a resource for providing nutrition and health promotion services to older adults.

Fall Prevention

Each year thousands of older men and women are disabled, sometimes permanently, as a result of falling. Falls are the leading cause of fatal and non-fatal injuries in people over the age of 65. In the United States, one of every three people age 65 years and older fall each year.

More than 90 percent of hip fractures occurring as a result of falls, most of these fractures occur in persons over the age of 70 years of age. Older adults who survive a fall experience significant problems. Hospital stays are almost twice as long in older adults who are hospitalized after a fall than those admitted for another reason. Compared with older adults who do not fall, those who fall experience greater functional decline in activities of daily living (ADLs) and in physical and social activities, and they are at greater risk for subsequent institutionalization.

In Iowa in 2005, 314 persons died as the result of falls with 256 being among those 75 years of age or older. The number of people age 65 years and older is projected to double in the next 50 years. This coupled with the fact that Iowa ranks fourth in the nation for percent population 65 years and older and second in the nation for percentage population 85 years and older, fall prevention programs are needed in Iowa.

This is not only a social tragedy, but also an economical disaster. It is estimated that the total cost of falls in the U.S. is \$20.2 billion annually. The good news is that many falls are preventable. Most experts agree that over 50% of falls can be prevented. A multi disciplinary approach to fall prevention seems to be the most efficient way of preventing

falls. Identifying individuals with a higher risk of falling is a necessary and effective first step in the fall prevention process.

Exercising can provide a number of benefits including reducing the risk for falling. Recent studies have shown that older adults are physically capable of reaping the benefits of an exercise program.

This is true for individuals of all ages, including people in their 80s and 90s. In fact, researchers now believe that most of the physical changes we see in older individuals are mostly due to lifestyle changes, rather than the aging process.

EXERCISE BENEFITS

Exercising provides older adults with a wide range of benefits that include: increased strength, flexibility, endurance, and improved coordination and balance. There are also some psychological benefits from regular exercises that include:

- increased self-esteem
- reduced stress, depression, and anxiety
- improved mental alertness, perception, and information processing.

All of these factors are crucial in daily life, and some of them have been linked with risk for falls. This is why an exercise program should be included in any fall prevention plan.

Exercise programs should include exercises or activities that focus on improving endurance, strength, flexibility, balance, and coordination. Intensity and frequency needs to be continually assessed to consider the gains and adaptation of the individual to the exercise regime.

SUMMARY

Falls are not just the result of getting older. There are some well-documented risk factors that can increase the risk of falling. Lack of exercise is one of them. It is crucial to abandon the myth of exercising being an activity “just for young people.” Educators who work with older adults have an opportunity to encourage them to participate in exercise programs. Training adaptations observed in older adults who participate in exercise programs are very beneficial for their health. These adaptations greatly improve the functional capacity of older men and women, enhance their quality of life, and extend independent living. (Source: Healthy Living Program, <http://enafs.ifas.ufl.edu>)

ENAFS Healthy Living Program

Module 6: Fall Prevention

Lesson 1: Who’s at Risk?

Lesson 2: Reducing Home Hazards

Lesson 3: Staying Strong & Improving Balance

Lesson 4: Lifestyle Factors Affecting Fall Risk

Lesson 5: How to Handle a Fall

<http://enafs.ifas.ufl.edu>



Iowa Administrative Code

321—7.11(231) Disease prevention and health promotion under Title III-D of the Act.

AAA shall use Title III-D funds to provide disease prevention and health promotion services and information at multipurpose senior centers, at congregate meal sites, through home-delivered meals programs or at other appropriate sites.

OAA Title III-D funds under General Aging can be used for: (bold items have potential for supporting evidence based health promotion programs).

Personal care

Case Management

Nutrition counseling

Caregiver Support

Health Well Elderly Clinics

Senior Center

Counseling

Assessment and Intervention

Material Aide

Respite

Emergency

Response System

Nutrition Education- Promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants and caregivers in a group or individual setting overseen by a

dietitian or individual of comparable expertise.

Preventive Health Promotion- Service to promote the health of older adults by conducting health assessments and education to maintain, restore and improve their health and provide information about services and resources.

Medication Management- May provide screening and education.

Training and Education- Formal or informal opportunities for individuals or groups to acquire knowledge, experiences or skills. Includes events to increase awareness in such areas as nutrition, crime, or accident prevention.

Public Information- Service to inform and assist a group to identify available services.

Consider using Title III-D funds for evidence based health promotion programs (EBHP). EBHP are proven to be successful thus increase the likelihood of positive outcomes. Examples of EBHPs are:

- Stanford Chronic Disease Self Management Program. This program covers medication management so could be provided with medication management funding. (<http://patienteducation.stanford.edu/programs/>)
- EnhanceFitness (<http://www.projectenhance.org/>)
- A Matter of Balance- Fall Prevention Program (<http://healthyagingprograms.org/content.asp?sectionid=32&ElementID=489>),
- Eat Better & Move More (http://nutritionandaging.fiu.edu/You_Can/index.asp).

Evidence-Based Health Promotion Disease Prevention Programs

(The following is from AoA Frequently Asked Questions
http://aoa.gov/oa2006/Main_Site/resources/faqs.aspx)

What new opportunities does the 2006 Reauthorization offer the Aging Services Network for developing or enhancing evidence-based health promotion/disease prevention strategies?

Evidence-based disease prevention is the utilization of clinically tested and proven tools and behavioral changes to manage an individual's health and disease. [Evidence-based prevention programs](#) take place at the community level to help participants avoid hospitalizations and unnecessary physician visits.

Evidence Based Programming, regardless of funding source, is central to empowering older adults to take responsibility for their health by making informed health choices and adopting healthful behaviors. It is important to modernize programs by using the best available science and evidence and leveraging funding and expertise through community resources.

The 2006 Amendments reaffirm AoA's commitment to ensuring that all older Americans have access to programs and services that help reduce the impact of disease and chronic disabilities and encourage the promotion of preventive measures to eliminate or reduce the occurrence of new diseases and disabilities. Under Titles III and IV, States continue to have the option to design programs to advance chronic disease self-care practices, increase physical activity, prevent falls, promote proper nutrition and diet, and address depression and/or substance abuse in older persons.

Senior Hunger in America

On March 5, 2008, a report on senior hunger was released during a Senate Special Committee on Aging Hearing. This report is the most comprehensive national research study to look exclusively at *senior hunger* in the United States. In excess of 5 million individuals -- an astonishing 11.4 percent of all seniors are facing the threat of hunger.

The most likely to be at-risk are seniors with limited incomes, under age 70, African-Americans, Hispanics, the unmarried, renters and persons living in the South. A striking finding is that hunger is not confined primarily to those who are poor. The poor are more likely to be at-risk, but half of all at-risk seniors have incomes above the federal poverty line. Additionally, hunger is not just a problem for minorities. Over two-thirds of all hungry seniors are white related to the great numbers in the demographic group.

Interestingly, being divorced, separated, or never married is a risk factor. Married seniors are 20 percent less likely to be at risk of hunger. One of the study's most astonishing findings is that living with a grandchild in the home is a risk factor for

hunger. In fact, seniors living with a grandchild are 50 percent more likely to be at-risk of hunger than those who don't.

That has been the conventional wisdom, but what the study finds is strikingly different. The research clearly indicates that the senior cohort most likely at-risk of hunger is the younger old, those individuals in the 60-64 age range. An 84 year old is over one-third less likely to be at-risk of hunger than a 64 year old. This may reflect the older seniors reporting less hunger or they may have more coping skills learned during the Great Depression.

These seniors at risk for and experiencing hunger are significantly more likely to be in poor or fair health. In addition, they are more likely to have lower intakes of major nutrients. Hunger has a staggering impact on independence. A senior at risk of hunger has the same chance of an ADL limitation as someone 14 years older. That is, there is in effect a large disparity between actual chronological and "physical" age, so that a 64 year old senior suffering hunger is likely to have the ADL limitations of a 78 year old.

Controlling for other factors the study enumerates the following causes of hunger:

- Being between the ages of 60 and 64
- Living with a grandchild
- Living at or below the poverty line
- Being a high school drop out
- Being an African-American or Hispanic
- Being divorced or separated
- Being a renter

The study projects significant increases by 2025 – *75 percent more seniors will experience some form of food insecurity and 33 percent more will suffer hunger*. The research was funded by the Meals on Wheels Association of American Foundation with a grant from Harrah's Foundation. The entire report "*The Causes, Consequences, and Future of Senior Hunger in American*" can be accessed at <http://www.mowaa.org/> .

Food Stamp Participation in Iowa

In February 2008, there were 14,426 Iowans over the age of 60 participating in the Iowa Food Assistance Program. This is significantly below the numbers who are potentially eligible for the program. Nationally only 31 percent of eligible older adults participate. The overall average benefit was \$76.82 per month. Of the older adults participating, the largest group was the 60-69 year olds. There are eight people over 100 years of age participating in the program.

- Consider promoting the Food Assistance Program by inviting the local DHS office to give a presentation.

- Encourage eligible seniors to participate as one way to improve the NAPIS Registration Nutrition Score if they have identified “*I do not always have enough money to buy the food I need*”.
- The Food Assistance Program can help them purchase more fruits, vegetables and whole grains which are needed for good health.

Information about the Iowa Food Assistance Program can be obtained by calling 1-711-YES-FOOD. The on-line application can be accessed at http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Forms/470-0306.pdf

Senior Farmers Market Nutrition Program

The Iowa Department of Agriculture and Land Stewardship is preparing for the 2008 Senior Farmers Market Nutrition Program (SFMNP). The program will again provide 14 checks of \$2.00 each to seniors 60 years of age or older who meet the income guidelines of \$19,240 for a single person and \$25,900 for married couples. Seniors must be 60 years old on the day the checks are issued to them. Program materials (Directory of SFMNPs and checks) will be distributed to AAAs mid-May. Consider having a nutrition education event with media coverage as a way to kick off the distribution of the SFMNP checks. The Chef Charles program has easy to use nutrition activities- see web site below. The 2008 SFMNP nutrition message that will be in the Directory is in the box.

http://www.idph.state.ia.us/nutritionnetwork/chef_charles.asp

Siouxland W.A.I.S.T. Program

Siouxland Area Agency on Aging started a walking program at all meal sites and apartment complexes on February 1, 2008. The program is called W.A.I.S.T. – Walk Across Iowa Senior Teams. Each meal site or apartment complex has a team.

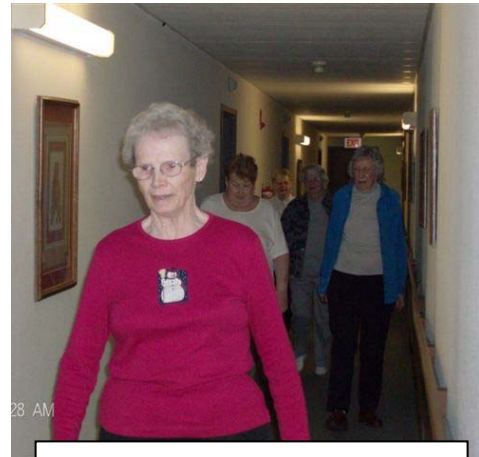
Fruits & Veggies: More Matters™

Fruits and veggies provide great taste, nutrition, and abundant variety. Consuming fruits and veggies can be a factor in maintaining a healthy weight and may help reduce the risk of some types of diseases. Use your Farmers Market Nutrition Program checks at authorized farmers markets and farmstands to buy more fruits and veggies to eat because more matters for your health!

How Much Matters?

The amount of fruits and veggies you need every day depends on your age, gender and level of physical activity. As a general rule, fill about half your plate with fruits and veggies at meals. And don't forget to choose fruits and veggies for a tasty, convenient snack!

The W.A.I.S.T. program has 130-140 participants. Participants were provided pedometers purchased with grant funds and they are accumulating steps. Three participants have almost walked across the state to Clinton. The group total is approaching the 5,000 mile mark. Motivational prizes have been provided such as t-shirts, sweat shirts, mugs, cups, meal certificates, golf balls, and a free one year membership at WITCC for classes. The t-shirts and sweatshirts have been donated by the various colleges. Also, booster clubs from some of the high schools where meal sites are located have donated school gear.



W.A.I.S.T. Participants

CDC Gathering Pandemic Stories

The Centers for Disease Control and Prevention is marking the 90th anniversary of the world's worst influenza pandemic by creating an online archive of flu stories. CDC is collecting family histories of the 1918-1919 flu pandemic for inclusion in a Pandemic Flu Story-book. The 1918 flu pandemic killed between 30 million and 50 million people worldwide, with 675,000 deaths in the US. For more information e-mail shoskins@cdc.gov or call 404-639-7232.

March for Mayors Campaign

Hawkeye Valley Area Agency participated in the Meals on Wheels Association "March for Mayors" campaign. Here is some of the media coverage of the event to raise awareness of the home delivered meal program and to reduce senior hunger.



Buchanan County Supervisors Mike Everett, Ellen Goffney and Ralph Kremer help package meals in the Senior Center kitchen on Wednesday for Meals Day.



O'Day delivers meals

Fredericksburg Mayor Bryan O'Day (left) helped Don Pett and Marlowe Steege deliver meals to seniors last week Tuesday, March 18. When he was finished delivering meals he ate with seniors who take their meals at the meal site, which is located at the Fredericksburg Community Center.



Mayor helps promote nutrition for seniors

By Elaine Hansen
Fredericksburg Mayor Bryan O'Day...
...the mayor is promoting senior nutrition and raising awareness of senior hunger in our community...
...Mayor O'Day delivered meal certificates as part of the March for Meals Day sponsored by the Hawkeye Valley Area Agency on April 18.
...The senior meal site currently serves about 18 home-delivered meals and 22 congregational meals at the Chickadee Center, as well as walking meals to senior care homes throughout the week.
...Meals for Meals is a national campaign to raise awareness of senior hunger and to encourage action on the part of local governments.
...Following the meal deliveries, Mayor O'Day reported to the Chickadee Center to dine with the local seniors. Mayor O'Day's report included that many, needed assistance and improve nutrition with healthy diet.



Ralph Kremer acts as the runner, while driver Rabbit Donnelly plans the next stop. Donnelly has been a Meals on Wheels volunteer for over 25 years.

Senior Center participates in March for Meals event

Buchanan County Supervisors Mike Everett, Ellen Goffney and Ralph Kremer participated in the annual March for Meals Day on Wednesday. The event included preparing, packaging and delivering meals to seniors as a part of the Meals on Wheels program. "We are excited about having the Supervisors participate in our event. We hope to raise awareness of senior hunger in our community," said Senior Center Manager Donna Johnson. In past years, mayors from around Buchanan County have also participated as a part of the National March for Meals Day. "Senior nutrition programs across the United States promote March for Meals in their local communities through public events, partnerships with local businesses, volunteer recruitment and fundraising initiatives."

RESOURCES

Health Promotion



- **Investing in employee wellness** is good business. Iowa State Extension has an “Eating Well-Moving More” program for a healthier blood pressure, blood cholesterol and weight. Contact your ISU Extension Family Nutrition and Health Field Specialist for more information.
- **Know Your Rx Options.** Are the newest or most expensive medications the best? AARP web site provides a comparison of medications at <http://www.aarp.org/comparedrugs>.
- **“Help Seniors Live Better, Longer: Prevent Brain Injury”** is a CDC initiative to raise awareness about ways to prevent, recognize, and respond to Traumatic Brain Injury (TBI). Falls are the leading cause of TBI.
<http://www.cdc.gov/BrainInjuryInSeniors/>
 - People 75 years of age and older have the highest rates of TBI-related hospitalizations and death.
 - Family members and other caregivers of older adults can help protect their loved ones’ health and independence by:
 - Reducing their risk for falls
 - Recognizing signs of TBI after a fall occurs; and
 - Taking the appropriate steps when signs of TBI are observed.
- **Spanish-language health care campaign** encourages Hispanics to become more involved in their health care. Hispanics are 38 percent less likely than non-Hispanics to have visited the doctor within the past year, according to the latest data from AHRQ. In addition, more than a quarter of Hispanic adults have never had their cholesterol checked, two-thirds of Hispanics over 50 have never had a colonoscopy, and nearly 54 percent of Hispanic women over 40 have not had a mammogram within the last year.

http://adcouncil.wmod.llnwd.net/a540/o1/adcouncil/WebPkg/patient_hispanic_WebPkg.w_mv

For more information, please visit: <http://www.ahrq.gov/superheroes>,
<http://www.ahrq.gov/news/press/pr2008/spsuperheropr.htm>,
<http://www.ahrq.gov/news/press/pr2008/superheropr.htm> or call 1(800) 358-9295.

- **Iowa Cancer Consortium provides resources.** Cancer develops over time. It is a result of a complex mix of factors related to lifestyle, heredity, and environment. A number of factors that increase a person's chance of developing cancer have been identified. Many types of cancer are related to the use of tobacco, what

people eat and drink, exposure to and from the sun, and, to a lesser extent, exposure to cancer-causing agents in the environment and the workplace. Some people are more sensitive than others to factors that can cause cancer. The more we can learn about what causes cancer, the more likely we are to find ways to prevent it. For more information on risk and protective factor, cancer information, and cancer resources visit <http://www.canceriowa.org/>

- **Nutrition Basics website** provides a new resource on topics like fats, carbohydrate, protein, water, vitamins and minerals. By knowing these basics, you will be better equipped to sort through nutrition research and dietary advice. http://www.cdc.gov/nccdphp/dnpa/nutrition/nutrition_for_everyone/basics/index.htm.
- **Americans lack facts about maintaining eye health.** Survey found disparities are greatest among Hispanics. The full NIH News Release is available online at: <http://www.nih.gov/news/health/mar2008/nei-13.htm>.
- **Healthy Living Program Module 6: Fall Prevention.** The fall prevention module will help older adults identify their risk for falling and recognize the importance of preventative measures to avoid falls by reducing home hazards and making certain lifestyle changes. In addition, participants will learn specific exercises to help prevent falls and the proper response to a fall should one occur. For information about the program visit the University of Florida Extension web site at <http://enafs.ifas.ufl.edu> or call 352-392-1895 ext 306.

Physical Activity



- **Step Up to Better Health-** AARP 10-week walking program information includes guidelines for individuals to set goals, record activity along with educational information. The following is an example of educational information that can be found at <http://aarp.stepuptobetterhealth.com/default.asp>. To stay consistent, you have to make physical activity a habit. But any habit can become monotonous after a while, which means you need to alter your regular walking routine enough to keep it interesting.
 - You can work your legs, arms, buttocks, and torso all at once with some heavy gardening and yard work
 - If you don't already, try listening to music while you walk; choose different kinds for different moods... or consider learning a new language
 - If you normally exercise in the morning, give yourself the chance to catch a few extra winks one day and change your workout to the afternoon
 - Get a friend or family member to join you; if they're busy, take your pooch for a run.

- Try exploring different routes

- **Communicating with Your Doctor Video**

AHRQ has released a consumer-oriented video, [Communicating With Your Doctor](http://www.ahrq.gov/consumer/commdrvid.htm) (<http://www.ahrq.gov/consumer/commdrvid.htm>). Experts discuss the barriers to good communication between patient and doctor; steps that can be taken to make sure patients understand everything their doctor is saying; questions patients should ask their doctor about medical tests, diagnosis, and medicines; and how patients can become more comfortable discussing sensitive topics with their doctor.

Meal Program



- **Promote nutrition program in church bulletin.** The Meals on Wheels of Tarrant County, Texas uses a flyer inserted in the area church bulletins on a periodic basis to promote the nutrition program. Information is provided on “You may know someone who needs Meals on Wheels” and “Eligibility”. A section on “How you can help” seeks donations of time, talents and money. A web site is provided for on-line donations.

Food Safety



- Food Safety Presentations are available on line for the University of Nebraska Extension. The following links are for PowerPoint presentations and an article on each. Please feel free to adapt them to meet your needs!

1) Keep or Toss at <http://lancaster.unl.edu/food/keep-toss.shtml#play> (a link to a Web page)

2) Food Safety Myths at <http://lancaster.unl.edu/food/myths-ss/index.htm> (direct link to a slide show with a link to a Web page at end)

Emergency Preparedness



- American Public Health Association provides reminders to check emergency preparedness stockpiles to ensure they are up to date. Their campaign “Set Your Clocks; Check Your Stocks” is designed to remind Americans to make sure that emergency preparedness stockpiles have adequate food, water and supplies and ensure that nothing is missing or has expired. The biannual campaign is also designed to encourage those who do not have an emergency stockpile to create one. For more information visit www.getreadyforflu.org.

Miscellaneous Resources



- **Iowa Department for the Blind Resources:** At age 86, Theda uses large print labels to identify her frozen meals and remind her how to cook each of them appropriately. She uses tactile markings on her appliances to set them and prepares her meals independently using recipes on cassette. Theda continues to read her [Bible](#) using a large print version obtained through the [Library for the Blind and Physically Handicapped](#). She uses a talking watch to manage her time, uses a large print thermostat to keep her home comfortable, and uses directory assistance cost exemption to obtain phone numbers and keep in touch with family and friends. Theda manages her own medications using a pill organizer and an identification method she developed with the help of her rehabilitation teacher. Theda uses non-visual methods for identifying her canned goods and clothing, uses writing guides to assist with communication needs, and uses non-visual methods to identify her money. This allows her to go anywhere she chooses and pay her bills independently. All of these things have helped Theda to realize her goal of staying active and in her own home. If you know someone with vision loss who could benefit from services, call 800-362-2587 or [fill out an online referral form](#). Services are free, confidential, and available statewide.
- **Integrated Database**
The [Administration on Aging](#) (AoA) has posted the *Aging Integrated Database* (<http://www.data.aoa.gov/>) online. The database provides dynamic access to AoA-related program performance results, surveys, and other data files. Customized, state-based tables and reports can be produced using the information
- **MyPyramid Menu Planner** provides a new interactive program to record personal menus and compare food intake to recommended servings for good health. This web site also has a new MyPyramid podcast video shows how taking small steps can add up to real changes in your weight and health. Visit <http://www.mypyramid.gov/>.



Pick a Better Snack *On the Go* – With Pineapple!

After a long winter, everyone's ready for a taste of the tropics. Look no further than your local grocer for a juicy pineapple, the delicious, nutritious fruit that brings the feeling of summer.



Fresh pineapple is naturally super-sweet and a great way to satisfy a sugary craving with a healthful snack. One serving (two slices) contains only 60 calories and a quarter of your daily recommended vitamin C, in addition to containing very little sodium. Jim Dole thought pineapple was so great that he founded the Hawaiian Pineapple company in 1901, with the mission of making pineapple available in every grocery store in the United States!

Pineapple doesn't ripen any further after it is picked, so it can be enjoyed immediately after purchase. The most flavorful pineapples will be heavy for their size with dry, crisp shells and dark green crown leaves. After washing, remove the pineapple's outer shell by slicing lengthwise with a sharp knife. Then cut the fruit away from the fibrous core. Your scrumptious snack is ready to eat!

Wash. Cut. Eat. (how easy is that?)

Take Pineapple With You!

- Make skewers with pineapple, grapes, strawberries and any other yummy fruit of your choice.
- Dip slices into low-fat yogurt for a quick snack.
- Add fresh chunks of pineapple to vanilla frozen yogurt for a good-for-you goodie!

Quick Nibble:

As a Caribbean rite of manhood, barefoot youths ran through prickly-skinned pineapple plantings and were expected to endure the resulting cuts without protest.

Pick a **better** snack™ was developed in partnership with the Iowa Nutrition Network and the USDA's Food Stamp Program and Team Nutrition – equal opportunity providers and employers. For more information about the Iowa Nutrition Network or the Chef Charles nutrition education program, call the Iowa Department of Public Health at (800) 532-1579. Note that short articles like the "On the Go with Carrots" are on the IDPH web site and are available for use in newsletters or newspapers (http://www.idph.state.ia.us/pickabetttersnack/social_marketing.asp).

Our Mission

To provide advocacy, educational, and prevention services to help Iowans remain independent as they age.

IDEA provides over \$30 million in services through a network of 13 Area Agencies on Aging across the state. For more information on the Iowa Department of Elder Affairs (IDEA), visit <http://www.state.ia.us/elderaffairs>. To locate resources for older adults and people with disabilities, visit <http://www.lifelonglinks.org/>.

Iowa Department of Elder Affairs

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