The Power of Community: Becoming a Leader in the Age and Dementia Friendly Movement!

Emily Kearns, PhD, MBA – Coordinator: Dementia Friendly Massachusetts

James Fuccione – Senior Director: Massachusetts Healthy Aging Collaborative

Amy Schectman – President and CEO: Jewish Community Housing for the Elderly
Agenda

Why Dementia Friendly – Dementia Prevalence and Impact

Dementia Friendly Massachusetts: An Overview

Better Together: An Overview of Age- and Dementia Friendly

How You Can Get Involved!

Video: Always a Dancer

Discussion – Q&A
By 2050 there will be

- 18 MILLION AMERICANS AGE 85+
- 32 MILLION 65+ MINORITIES

Source: CDC
Speaking of Dementia: Language Matters

• Dementia is – NOT a specific disease
• Dementia is - a general term for a decline in mental ability severe enough to interfere with daily life
• Memory loss is an example
• Alzheimer’s is the most common type of dementia
• Some conditions creating dementia are reversible: thyroid problems and vitamin deficiencies
Prevalence and Whole-Community Impact

- 1 in 10 people age 65 and older has Alzheimer’s Disease (10 percent!)
  - Not including other causes of dementia

- Of those living with Alzheimer’s:
  - 3% are ages 65 – 74
  - 17% are ages 75 – 84
  - 32% are 85 and older
Massachusetts

- Current: 120,000 individuals living with Alzheimer’s
- 2025: 150,000 will be living with Alzheimer’s
  = a 25% increase

Disparities

- Older African Americans and Hispanics are more likely to live with Alzheimer’s and other dementias

- African-Americans: twice as likely than older whites

- Hispanics – 1.5 times as likely than older whites

- NOTE: genetic factors don’t seem to account for this difference in prevalence.

- Health, lifestyle, and socioeconomic risk factors do
ALZHEIMER’S DISEASE IS THE 6TH LEADING CAUSE OF DEATH IN THE UNITED STATES.

MORE THAN 5 MILLION AMERICANS ARE LIVING WITH ALZHEIMER’S.

1 IN 3 SENIORS DIES WITH ALZHEIMER’S OR ANOTHER DEMENTIA.

IN 2015, MORE THAN 15 MILLION CAREGIVERS PROVIDED AN ESTIMATED 18.1 BILLION HOURS OF UNPAID CARE.

ALZHEIMER’S COSTS CAREGIVERS MORE THAN THEIR TIME.

FAMILY CAREGIVERS SPEND MORE THAN $5,000 A YEAR CARING FOR SOMEONE WITH ALZHEIMER’S.

FOR SOME FAMILIES THIS MEANS MISSING A VACATION.

BUT FOR OTHERS, IT MAY MEAN GOING HUNGRY.

EVERY 66 SECONDS SOMEONE IN THE UNITED STATES DEVELOPS THE DISEASE.

IN 2016, ALZHEIMER’S AND OTHER DEMENTIAS WILL COST THE NATION $236 BILLION.

IT KILLS MORE THAN BREAST AND PROSTATE CANCER COMBINED.
The Response: Dementia Friendly Massachusetts

Goals

1. Support and accelerate the creation and expansion of dementia friendly systems and grassroots programs across Massachusetts.

2. Ensure that diverse stakeholders are engaged, and that benefits reach varied geographic and cultural communities.

Guideposts

1. Efficiency
2. Inclusion
3. Scale
History

• May 9, 2016: Dementia Friendly Massachusetts Leadership Summit, hosted by Tufts Health Plan Foundation

• June/July 2016: Establishment of Advisory Group and Management Committee

• August 2016: Launch of first Learning Communities
Co-conveners: Executive Office of Elder Affairs (EOEA), Jewish Family and Children’s Service (JF&CS)

DFMI Management Committee
- Alzheimer’s Association MA/NH
- EOE
- JF&CS
- LeadingAge MA
- Multicultural Coalition on Aging
- Massachusetts Association of Councils on Aging (MCOA)

DFMI Advisory Group
- Over 40 organizations representing diverse geographic and cultural communities and professional sectors

DFMI Learning Communities
- Eastern Massachusetts Town/City
- Cape Cod & The Islands
- Central Massachusetts
- Western Massachusetts
- Faith Leaders
- More being developed!

Made possible by support from Tufts Health Plan Foundation
Dementia Friendly America

dfamerica.org

Twitter
@dfamerica_
Our website includes sector guides, provider tools, a community toolkit and other guidance for communities working towards becoming dementia friendly.
Community Web-Based Resource
Taking an All Sectors Approach

Every part of community has a unique role in contributing to dementia friendliness

- Dementia Friendly Essentials
- Banks and Financial Services
- Neighbors and Community Members
- Legal and Advance Planning Services
- Government, Community, and Mobility Planning
- Health Care Throughout the Continuum
- Independent Living
- Communities of Faith
- Businesses
- Government: Emergency Planning and Response
- Memory Loss Supports and Services
- Additional Guide Resources
• Business
• Banks and financial
• Community-based supports
• Faith communities
• Health and long term care
• Legal and advance planning
• Local government (planning, emergency response, law enforcement)
• Neighbor and community members
1. **Convene** key community leaders and members to understand dementia and its implications for your community. Then, form an Action Team.

2. **Engage** key leaders to assess current strengths and gaps in your community using a comprehensive engagement tool.

3. **Analyze** your community needs and determine the issues stakeholders are motivated to act on; then set community goals.

4. **ACT together** to establish implementation plans for your goals and identify ways to measure progress.
Dementia Friends

- www.dementiafriendsusa.org
- Based on UK model
- Online Training and Certification

- Dementia Friends Massachusetts – Coming Soon!
Dementia Friendly America

Visit the website at
www.dfamerica.org
Key lessons from the Dementia Friendly Massachusetts Leadership Summit, 5/9/16

1. We need ways to **share existing tools and knowledge**, so that no one has to reinvent the wheel.

2. **Collaboration** helps resources go farther. Dementia friendly initiatives should work closely with the age-friendly movement. Regional or statewide organizations, associations and business chains can spread knowledge and increase participation.

3. **One size does not fit all**. Initiatives need to fit the local community or sector in order to be effective.

4. **Cultural inclusion** requires focused attention and resources.

5. Start with a broad, representative action team, and learn together about strengths and gaps, to achieve **sustainable results**.

6. **Language matters**. Use respectful, empowering, and accurate language to educate and reduce stigma about dementia.

7. **We are part of a national movement**. Dementia Friendly America offers free sector guides, and an in-depth toolkit for geographic or cultural communities to follow. These materials are meant to be adapted as needed to individual community needs.

8. Massachusetts is emerging as a **national leader**.
Main Lesson: Share existing tools and knowledge

Three approaches:
• Environmental scan
• Learning communities
• Quarterly online newsletter: DFMI Connection
Learning Communities

• Organized around a common goal

• Meet periodically to share their progress and learn from one another

• A democratic space where there is no single expert, but everyone’s contribution is valued

• Based on geographic area, sector, cultural community, or function


Learning Communities - Current

Region-Based:
• Eastern Massachusetts
• Cape & Islands
• Central Massachusetts
• Western Massachusetts

Sector-Based:
• Faith Community
DFMI Newsletter - The Connection

• Quarterly online newsletter – free!

• Purpose: to identify and share resources and success stories

• Accessible: links from key partners’ websites

• Submissions – open to all DF efforts
  • Easy access: online submission process
  • Short (5 – 6 sentences)
Aligning Age Friendly & Dementia Friendly

Better Together: A Comparative Analysis of Age-Friendly and Dementia Friendly Communities

Natalie Turner and Lydia Morken
Leveraging Age-Friendly Efforts

• The opportunity – leverage existing efforts and resources rather than compete

• The challenge – age-friendly is more established; dementia friendly is new

• Strategy – Better Together – coordinating outreach and community efforts

• Impact: reduce redundancy, attract external resources by uniting for sustainability – grants, etc.
Alignment with Age-Friendly

Age and Dementia Friendly Communities

Since age is the greatest risk factor for dementia, communities working towards age-friendly resources may want to consider adding dementia friendly elements to their efforts. The list below, shows dementia friendly elements that communities may want to consider adding to their age-friendly efforts.

<table>
<thead>
<tr>
<th>Age Friendly</th>
<th>Dementia Friendly</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td></td>
<td>The city is clean and pleasant, with enforced regulations.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>The environment is familiar (the functions of buildings are obvious) and distinctive (urban building form is varied).</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>The physical environment is easy to navigate and includes a variety of landmarks to aid wayfinding.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>A spectrum of quality housing options, including support for aging in place, is available for older people as their needs change over time.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>A range of quality housing options, including memory care services and supports, exists for people with dementia at various stages of the disease.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>A wide variety of affordable, convenient and accessible activities is offered to older adults and their companions.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>People with dementia and their caregivers have access to organized activities designed specifically for their needs.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Public transport is reliable, frequent, safe and affordable; serves all city areas; and has priority seating for older adults.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Transport does not require passengers to handle money, and supportive assistance is available along the way to help passengers with dementia travel successfully.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Drivers (public transport, taxis, other services) are courteous and sensitive to older riders.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Drivers are trained to recognize passengers with dementia and how to help them.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Roads are well-maintained, well-lit, and well-signed, and priority parking and drop-off spots are readily available.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Transportation services for people with dementia are well-advertised and promoted as supportive.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Older people are valued and respected by the community.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Community is dementia-aware and puts forth a spirit of support; people with dementia, including those from seldom-heard communities, are free from stigma.</td>
</tr>
<tr>
<td>✓</td>
<td></td>
<td>Older people receive services and products adapted to their needs and preferences.</td>
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</tbody>
</table>

Better Together: A Comparative Analysis of Age-Friendly and Dementia Friendly Communities

Natalie Turner and Lydia Morken
Dementia Friendly Massachusetts
How to Get Involved

- Join our DFMI mailing list
- Visit www.dfamerica.org. Click “Get Involved.”
- Become a Dementia Friend
- Join a DFMI Learning Community
- Organize a local educational event about dementia
- Start and support memory cafés
- Share Dementia Friendly America’s Sector Guides and Videos
Always a Dancer
Share your knowledge.
It is a way to achieve immortality.

–Dalai Lama

Check out our website: www.dfmassachusetts.org
Emily Kearns: ekearns@jfcsboston.org or 978-604-0830
Beth Soltzberg: bsoltzberg@jfcsboston.org or 781-693-5628
Massachusetts Healthy Aging Collaborative
LeadingAge 2017 Annual Conference

James Fuccione
Senior Director
May 11, 2017
What is the MHAC?

The Massachusetts Healthy Aging Collaborative is a network of leaders in community, health and wellness, government, advocacy, research, business, education, and philanthropy who have come together to advance healthy aging.

Focus: Advancing Age-Friendly and Dementia Friendly Communities

1) Initiate behavior change among policymakers and planners to use an age-friendly lens and adopt specific asks (aging in all policies).

2) Create “champions” among the usual and unusual suspects and raise public awareness of healthy aging and age-friendly community efforts.

3) Build capacity of local communities to embark on the age-friendly designation journey
Timeline: Age-Friendly Movement

**International/National:**
- WHO Age-Friendly
- AARP becomes USA affiliate for WHO
- Dementia Friendly America Announced at WH Conference on Aging

**Massachusetts:**
- Tufts HP Foundation and Healthy Aging
- Dementia Friendly MA
- Mass. Healthy Aging Collaborative: Convener/Steering Committee
- Mass. Healthy Aging Collaborative: Action
What is “Age-Friendly”?

- **AARP**: Joining the Age-Friendly Network means making a commitment to policies, services, settings, and structures that support and enable *all people* to age well in their communities.

- A *continuous improvement* process focusing on three areas:
  - *built environment*
  - *community and health services, and*
  - *inclusion and engagement.*
Simplifying the “8 Domains of Livability”
Aging Population in Massachusetts (60+)

Current state

10-year projection

Source: Center for Social & Demographic Research on Aging, Gerontology Institute, UMass Boston. Based on data from the Donahue Institute, University of Massachusetts
Aging Population in Massachusetts (60+)

20-year projection

% of Older Population (60+)
- Below 20%
- 26%-29%
- 30% or Above

Source: Center for Social & Demographic Research on Aging, Gerontology Institute, UMass Boston.
Based on data from the Donahue Institute, University of Massachusetts
Massachusetts Healthy Aging Data Report: The Health of Older Adults in Every Community

121 health risk indicators in 367 communities*

**KEY FINDINGS**
- **1 out of every 5 people will be age 65 or older.**
- **78%** have ever been diagnosed with hypertension.
- **Nearly 2 out of every 3** have 4 or more chronic conditions.
- **1 out of every 3** has ever been diagnosed with diabetes.
- **23%** are obese.
- **1 out of every 3 households** has an annual income of less than $50,000.

**FACTORS DRIVING HEALTH**
- **Income and education have powerful effects on health.**
- Factors associated with **better population health**:
  - Higher levels of income and education.
  - Communities with a higher percentage of women and veterans.
  - Communities with more racially diverse and acculturated residents.
  - Healthy behaviors and preventive services.

- Factors associated with **worse population health**:
  - Communities with poorer social environments (higher crime rates, lower voter participation rates).
  - Older Asian adults generally appear much healthier than their non-Asian counterparts, reporting:
    - chronic diseases (except diabetes in both men and women, and osteoporosis in women only).

**RACIAL DISPARITIES**
- Compared to older white men, **older black and Hispanic men** report:
  - emotional support
  - engagement in healthy behaviors
  - hypertension, diabetes, kidney disease and glaucoma
  - other chronic conditions such as osteoporosis, hip fracture and COPD

- Compared to older white women, **older black and Hispanic women** report:
  - most heart conditions (e.g., stroke, heart attacks, congestive heart failure, high blood pressure)
  - disability
  - obesity
  - engagement in healthy behaviors

**RECOMMENDATIONS**

**UNDERSTAND.**
- Download your Community Profile.
- Educate yourself and others about the older adults who live in your city or town.
- Compare your city or town to state averages for every indicator.

**ENGAGE.**
- Start a conversation about what the data mean and what can be done to address challenges.
- Bring stakeholders and community members together.

**ACT.**
- Prioritize needs, potential interventions, and allocation of resources.
- Diversify partnerships and funding sources.

* Data reflect health for adults age 60+ or 65+ in Massachusetts.

Learn more at mahealthyagingcollaborative.org/data-report/explore-the-profiles
Power of Purpose

Massachusetts Healthy Aging Collaborative

DATA REPORT

Explore the Report
- Highlights Report
- Community Profiles
- Geographic

State Maps
Interactive Map
Data Sources and Methods
Find Other Data
Area Plans on Aging

HOME > DATA REPORT > EXPLORING THE REPORT > COMMUNITY PROFILES

Community Profiles
Choose a city or town to download its community profile.
Select...

Choose a county to view a collection of community profiles.
Select...

Or explore via the map.
Boxborough (Middlesex)

Boxborough is rural town northwest of Boston with 474 residents aged 65 and older. The walkscore indicates it is a car dependent community (35/100). Compared to state averages, older residents of Boxborough do very well on healthy aging indicators. They are better than state averages with lower rates of: diabetes, COPD, hypertension, congestive heart failure, arthritis, osteoporosis, and tooth loss. They have fewer hospital stays and readmissions, nursing home stays, home health visits, emergency room visits, and a lower use rate of prescription medications. Their health promotion behaviors include physical activity, flu shots, annual dental visits, eating fruits and vegetables, and not smoking. Community resources to promote healthy aging include a Council on Aging and recreation department. Senior transportation options and physical activity resources are limited.

<table>
<thead>
<tr>
<th>POPULATION CHARACTERISTICS</th>
<th>COMMUNITY ESTIMATE</th>
<th>STATE ESTIMATE</th>
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</thead>
<tbody>
<tr>
<td>Total population all ages</td>
<td>4,996</td>
<td>6,547,629</td>
</tr>
<tr>
<td>Population 60 years or older as % of total population</td>
<td>15.4%</td>
<td>19.2%</td>
</tr>
<tr>
<td>Total population 60 years or older</td>
<td>761</td>
<td>1,249,723</td>
</tr>
<tr>
<td>Population 65 years or older as % of total population</td>
<td>9.6%</td>
<td>13.7%</td>
</tr>
<tr>
<td>Total population 65 years or older</td>
<td>474</td>
<td>891,303</td>
</tr>
<tr>
<td>% 65-74 years</td>
<td>61.2%</td>
<td>49.8%</td>
</tr>
<tr>
<td>% 75-84 years</td>
<td>25.3%</td>
<td>34.3%</td>
</tr>
<tr>
<td>% 85 years or older</td>
<td>13.5%</td>
<td>15.8%</td>
</tr>
<tr>
<td>Gender (65+ population)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% female</td>
<td>58.2%</td>
<td>58.5%</td>
</tr>
<tr>
<td>Race/Ethnicity (65+ population)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% White</td>
<td>90.3%</td>
<td>91.5%</td>
</tr>
</tbody>
</table>
Current State – AF/DF Communities
LeadingAge as “Age-Friendly” Leaders

Convene
- Start the conversation by convening existing partners and municipal leaders
- Talk about who should be at the table – remember the “unusual suspects”

Educate
- Educate or re-educate your community/service area about how you serve older adults.
- Help community leaders and the “unusual suspects” understand what an age-friendly community looks like and your role as a local expert.

Act
- Help establish local action committees
- Help gather data that can inform a community’s action plan
- Get surveys and assessments to your consumers to ensure their voices are heard.
LeadingAge as “Age-Friendly” Leaders

1) Collaborate across traditional and nontraditional sectors
2) Celebrate racial and ethnic diversity
3) Build individual relationships
4) Honor your unique local community
5) Revere older adults
6) Embrace longevity as an opportunity
7) Tackle social factors that determine community wellness
8) Seize opportunities to infuse age in everything
9) Send the right messages
10) Leverage local dollars for livability

http://www.n4a.org/files/n4aMakingYourCommunityLivable1.pdf
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Natalie Turner and Lydia Morken
### Instead of these words and cues:

- "Tidal wave," "tsunami," and similarly catastrophic terms for the growing population of older people
- "Choice," "planning," "control," and other individual determinants of aging outcomes
- "Seniors," "elderly," "aging dependents," and similar "other-ing" terms that stoke stereotypes
- "Struggle," "battle," "fight," and similar conflict-oriented words to describe aging experiences
- Using the word "ageism" without explanation
- Making generic appeals to the need to "do something" about aging

### Try:

- Talking affirmatively about changing demographics: "As Americans live longer and healthier lives . . ."
- Emphasizing how to improve social contexts: "Let's find creative solutions to ensure we can all thrive as we age."
- Using more neutral ("older people/Americans") and inclusive ("we" and "us") terms
- The Building Momentum metaphor: "Aging is a dynamic process that leads to new abilities and knowledge we can share with our communities."
- Defining ageism: "Ageism is discrimination against older people due to negative and inaccurate stereotypes."
- Using concrete examples like intergenerational community centers to illustrate inventive solutions
We must also think differently about how we support and engage older adults. The notion that people are fully retired at the age of 62 or 65 is inconsistent with what I see every day.

And even if some have stepped back from what they spent most of their lives doing, most still have tons of time and talent available to do something else.

Hey – I turned 60 in November. Sixty.

I remember thinking that was ancient when my dad turned sixty.

Now he’s 88 and still the smartest, most informed person I know. And Dad – nobody gives better advice than you do.

There are thousands of citizens in Massachusetts who are still very much in the game in their 60s, 70s, and even 80s. And there’ll be more as our population continues to age.

I’ll be signing an Executive Order in the coming weeks that will establish a Council on Older Adults. It will focus on policies and programs that make it possible for even more older adults and seniors to live vibrant, purposeful lives.
Governor’s Council to Address Aging
Resources and Contact Info

- James Fuccione: James.Fuccione@mahealthyaging.org
  - 617-717-9493

- AARP: Livability Index
- Dementia Friendly Massachusetts Toolkit
- MHAC: Age-Friendly Toolkits
- MHAC: Mass. Healthy Aging Community Profiles
- MHAC: Current Age/Dementia Friendly Communities in MA
- N4A Report: Making Your Community Livable for All Ages
- WHO: Checklist of essential features of age-friendly cities