### **North Carolina**

## **Pushing Healthy Aging Initiatives to the Forefront**

#### **Public Health Problem**

In 2001, 2.3 million North Carolinians were age 50 or older, representing 28% of the total state population. By 2030, 35% of the state's population is projected to be age 50 or older. The health-related behaviors of this population put them at risk for multiple chronic diseases: 18% currently smoke; 62% are overweight or obese; and 23% do not engage in leisure-time physical activity. These and other risk factors among this population contribute to their leading causes of death, which are largely preventable: heart disease, cancer, diabetes, stroke, and chronic respiratory disease. Though proven programs exist, too few older adults have had access across the state.

### **Taking Action**

Prior to 2000, healthy aging activities in North Carolina (NC) were coordinated by a fledgling partnership between the University of NC (UNC) at Chapel Hill Institute on Aging, the NC Division of Public Health (NCDPH) Older Adult Branch, and the NC Division of Aging and Adult Services (NCDAAS). When the UNC Institute on Aging became part of CDC's Prevention Research Centers Healthy Aging Research Network in 2001, the funding, though limited, pushed healthy aging activities into the forefront. The partnerships between public health, aging, and the university system were solidified by the creation of the NC Healthy Aging Coalition (NCHAC).

In fiscal years 2003 and 2005, North Carolina successfully competed for SENIOR (State-Based Examples of Network Innovation, Opportunity, and Replication) grants funded by CDC and administered by the National Association of Chronic Disease Directors. These funds were used to focus on healthy aging awareness and physical activity. These SENIOR grant activities, though funded each year at less than \$13,000, were very successful and prepared the collaborative to be ready for additional healthy aging opportunities, including participation in the Agency for Healthcare Research and Quality's (AHRQ) Evidence-Based Health Promotion Training Conference (co-sponsored by CDC and other federal agencies). Participation in that conference sparked a statewide planning effort in NC.

In 2006, North Carolina received another SENIOR grant, this time to take their planning activities to the next level. Using these funds, the state began creating the *Roadmap for Healthy Aging*, a report that will describe older adults' health conditions and risk factors at a regional or county level and will identify evidence-based health promotion programs and resources available to best address these conditions. The *Roadmap* will be used to inform the State Aging Services Plan, service providers, and public health planning.

# **Implications and Impact**

Early efforts to address healthy aging in NC were unfocused and disjointed as a result of reacting to opportunities rather than following a strategic plan for healthy aging. However, the SENIOR grants and AHRQ conference allowed NC to examine their state's needs and lay out a concerted and better integrated plan for healthy aging. To see this vision through, the NCDPH has created a Health Promotion Manager position whose responsibilities include strengthening and coordinating activities across the lifespan, and assuring that healthy aging perspectives are integrated in all program areas. The NCDPH and the NC Division of Aging and Adult Services have also created a Memorandum of Agreement (MOA), which formalizes their working relationship and delineates roles for the *Roadmap* project.