



Indian Health Service

National Indian Council on Aging 30th Anniversary Biennial Meeting

“The Importance of Healthy Elders”

by

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Good morning. It is an honor to be here with you this morning to join in this celebration of the 30th anniversary of the National Indian Council on Aging (NICOA) — the grass roots voice of American Indian and Alaska Native Elders. I last spoke to you four years ago at the 2002 gathering in Albuquerque, New Mexico. I remember that I spoke right before lunch, and afterwards had an enjoyable time speaking informally with many of you. My staff still reminds me that they missed lunch that day.

The National Indian Council on Aging has a unique and essential role in the Indian health system. As the preeminent voice of American Indian and Alaska Native Elders, NICOA has had and continues to have an important role in advocacy for elder health care issues. For example, through its management of the Senior Community Service Employment Program, the NICOA provides an opportunity for low-income elders to enhance current skills, learn additional skills, and transition into private or public sector employment while providing community services to non-profit or public agencies. And NICOA has provided essential education and outreach on behalf of federal programs to Elders in our communities. NICOA is also one of the hosts of the 2nd Annual American Indian and Alaska Native Long-Term Care conference being held here in Tulsa today and tomorrow.

In fact, I just came from giving an address at the morning session of the conference. This conference is a terrific opportunity for Tribal programs and Indian organizations, including Urban Indian health programs, to share information and experience in the development of long-term care services in our communities.

When we speak of long-term care for the elderly, we know that the Indian family is at the center of long-term care. We need spiritually and mentally healthy families and communities if we are to care for our elders in the way that our traditions teach us.

The text is the basis of Dr. Grim's oral remarks at the National Indian Council on Aging Meeting on Sept. 18, 2006. It should be used with the understanding that some material may have been added or omitted during presentation.

But there is more to it than that. Elders also play a role in maintaining the traditions and structure that keep our families healthy. When we remove the elder from the family and community, we weaken the fabric that holds the family and community together. If we remove their wisdom, we remove an important bridge to our past and our heritage; and perhaps most importantly, we remove their immense love and devotion to their families. This is why I believe it is essential that we develop the services necessary to support elders so they can remain in the family and community.

What I heard from you all when we chatted four years ago, and what I heard consistently in my conversations with Tribal leaders, Tribal and Urban health directors, and Indian Health Service (IHS) staff over the years, is that the challenges facing us as Indian people require a vision for health care that recognizes the mental and spiritual health of the family community as critical, that focuses efforts on healthy choices and prevention of illness and injury, and that addresses management of chronic disease in novel and effective ways. That vision also points us in the direction of optimal elder care.

Our efforts over the last four years have been to reorganize the work of the IHS in support of that vision for the Indian health system. This effort has resulted in the establishment of the Director's Health Initiatives, which focus on sustained and committed efforts in three major areas: Health Promotion and Disease Prevention, Behavioral Health, and Chronic Disease Management. These initiatives concern you and your health as Elders, although they are also about your children and your grandchildren. I want to take this opportunity to share information on these initiatives with you because I need you, as Elders, to help guide us and your communities as we walk the path to wellness together.

The Health Promotion and Disease Prevention Initiative is aimed at supporting community-based efforts to improve wellness and fitness and prevent chronic disease, especially diabetes and cardiovascular disease.

We know that healthy aging depends on health in youth and middle years. The best care we can provide to an elder cannot undo a lifetime of exposure to chronic disease. The efforts underway in our communities to prevent and treat diabetes, cardiovascular disease, and tobacco and substance abuse will have profound implications for the health of the elders of the future.

But a healthy lifestyle also has huge benefits for you all, for our current elders. Exercise has been shown to reduce arthritis pain, improve sleep, reduce rates of fall and injury, and reduce the risk of dementia. Exercise and fitness is powerful medicine for the elderly — and no side effects. I urge you to make physical activity part of your life every day.

The Behavioral Health Initiative involves addressing mental health and related behavioral health issues, such as depression, drug addiction, suicide, and domestic violence, and their consequences on elder and family health.

Through the Behavioral Health Initiative, the IHS will work with Tribes to promote the mental and spiritual health of individuals, families, and communities, including a model of elder care that will help us keep our Elders with us and safe in lives of connection and meaning to the very end. You have told me how important this is. Elders often suffer from under-recognized and under-treated depression and substance abuse. And they may be the silent victims of domestic violence, drug abuse, and other behavioral health issues that occur in their families and communities. Not only are they often the direct victims of abuse and exploitation, but often are the “rescuers” who step in to try to salvage the family and protect the children. In addition to the direct effects on their health and well-being, having to struggle with these issues saps the energy

and focus our Elders need to attend to other chronic illnesses, such as arthritis, heart disease, or diabetes.

The Chronic Disease Initiative is aimed at using innovative, state-of-the-art approaches to helping individuals manage chronic disease and minimize its impact on their health and function. We know that the best management of diabetes, high blood pressure, heart disease, and other chronic diseases can minimize their effect on health and function. The bottom line is, we have to help our Elders care for themselves, so you can remain strong and healthy and involved in the life of your family and community.

The principles underlying good chronic disease management are also the principles on which good elder care is based. These principles include ongoing, proactive support for elders and their families, so that you understand and know how to manage your health conditions and meet your own goals for good health.

I'm going to tell you about one specific project that brings all of this together. We are working with the National Cancer Institute to improve access to symptom-focused palliative care for persons with serious illnesses such as cancer. Now we are used to thinking about palliative care in the context of hospice; that is, care at the very end of life. But we know that persons with serious illness suffer from pain, insomnia, anxiety, and other symptoms as a part of their illness or its treatment. And often we are so focused on the treatment of the cancer or heart disease that we do not attend to the physical and emotional pain and other symptoms that are a part of it. This kind of holistic care requires not just state-of-the-art medical care but also spiritual care and support from our behavioral health programs, in a multi-faceted, team approach.

So we are working with the National Cancer Institute on a variety of projects that will help increase access to symptoms-focused care palliative care in our IHS, Tribal, and Urban health programs. We are developing a set of guidelines that set a standard for what we should be providing in the way of palliative care services, and how to do that with a health care team that includes traditional medicine and behavioral health. We are working with Tribal and IHS sites, including the Hastings Indian Medical Center in Tahlequah, on developing innovative ways of delivering this care.

The role of elders in our communities has always been an important one; your wisdom and strength are invaluable assets to our families and our communities. We need you with us, healthy and vital, for as long as possible — for your sake and for ours. This is why the IHS is committed to supporting Tribes and Urban Indian health programs as they develop the support services that will enable their elders to remain with their families and in their communities.

Thank you, and congratulations to NICOA on 30 years of exemplary service to American Indians and Alaska Native Elders.