

National Indian Council on Aging American Indian and Alaska Native Long-Term Care Conference September 6, 2008 Taped presentation

The Importance of Elder Care

by

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Greetings and welcome to the National Indian Council on Aging conference. It is an honor for me, as Director of the Indian Health Service, to be asked to address all of you this morning. It is also a pleasure to recognize and thank the NICOA for 32 years of advocacy and service on behalf of American Indian and Alaska Native Elders. 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. On a personal note – Elders and Elder issues are important to me as I was raised by my Grandparents – Grandpa and Grandma McSwain. All that I am is the result of their care and teachings.

It is my loss not to be able to be with you in person today; I was so looking forward to spending some informal time with you to talk with you and hear your thoughts and wisdom on the important issues that face us. But I thank you for the opportunity to speak with you today using the gift of technology to share some ideas with you this morning.

I'm going start off by taking a few minutes to tell you something that most of you are already very aware of. Huge health challenges face Indian country and the Indian health system. Cultural and lifestyle changes over the past generation have resulted in significant increases in areas such as diabetes, heart disease, substance abuse, and suicide. We now know these illnesses and outcomes to be lifestyle related. They are a product of a lifestyle in which food of the wrong type is too plentiful, physical activity is insufficient, and the traditional support system of strong families and communities has seriously eroded. They are a product of lives out of balance. And these lifestyle problems affect not just Indian people, but all Americans.

Now we often think of lifestyle-related problems such as diabetes, obesity, or substance abuse as being solely individual problems or failings. But I want to tell you that this is not just an individual problem but a cultural one. And it is not just an Indian problem, but one that encompasses the larger American culture as well. We have spent years designing our communities, our homes, and our culture to reduce physical activity. We have stood by and

watched our families dissolve and our cultural supports weaken. Now we suffer from the results of this. Now we have to redesign our communities and our culture to promote healthy lifestyles and strengthen our families and communities.

It has taken two to three generations to bring us to the out-of-balance health state that we find ourselves in now. We cannot turn it around overnight. But I believe that we can return to balance. With the help of your invaluable leadership as Elders and with the support of all of those who follow your lead, we can reverse the trends and see each generation grow healthier than the last.

Over the past several years we have developed health initiatives to help drive these changes by focusing on sustained and committed efforts in three major areas: Health Promotion and Disease Prevention, Behavioral Health, and Chronic Care. These initiatives are being accomplished by implementing effective prevention programs in collaboration with our key stakeholders, the American Indian and Alaska Native people, and by building on individual, family, and community strengths and assets.

Healthy Indian families and communities are at the center of our model of care. And Elders play a vital 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.

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. But health promotion and disease prevention is not just about keeping our current Elders healthy, it's about creating a future for our people. The best health care in the world can't undo a lifetime of exposure to risk factors for chronic disease. The only way to ensure healthy and strong Elders is to promote health and wellness in the young and middle-aged.

And a healthy lifestyle also has huge benefits 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 are powerful medicine for the elderly — and with no side effects.

And you as Elders have a key leadership role to play here, as models and mentors, leading the way to wellness – literally walking the path to wellness with your children and grandchildren.

Closely related to this initiative is the **Behavioral Health Initiative**, which focuses on addressing depression and addiction; building strong, healthy families and communities; and incorporating an awareness of the importance of mental and spiritual health into all of our health care system.

Behavioral health issues have an impact on the health of our Elders in a number of ways. Elders suffer from under-recognized and under-treated depression and substance abuse. And struggling with these issues saps the energy and focus our Elders need to attend to other chronic illnesses, such as arthritis, heart disease, or diabetes.

But there is another aspect to this. The most important support system for frail Elders, and the most important long-term care service we have or will ever have, is the family. Therefore, we must have spiritually and mentally healthy families and communities if we are to care properly for our Elders in their advanced years. And conversely, caring for our Elders in our homes and communities helps bring health and wholeness to our lives, our families, our communities, and our Tribes. You all know this.

And you also know that we have to include attention to the mental and spiritual health of our people in all aspects of their health care. It's been shown repeatedly that untreated mental illness has a powerful negative effect on chronic physical illness. We must address the whole person, the physical, mental, emotional, and spiritual aspects, when we talk about health.

The bottom line is that making behavioral health services an integral part of our healthcare process will improve the overall health of all our people.

This brings us to the **Chronic Care Initiative**, which is aimed making fundamental changes in the way we provide care in our hospitals, clinics, and communities. The goal is to better help individuals and families prevent and manage illness and chronic conditions. The principles underlying the best prevention and treatment for chronic conditions also apply to good Elder care. These principles include:

- Providing ongoing, proactive support for Elders and their families so that they understand and know how to manage their health conditions and meet their own goals for good health;
- Using new technologies and our powerful information systems to help patients, families, and health care professionals provide the best possible care;
- Promoting interdisciplinary care so that we make use all of the talents and resources of the care teams in our clinics and hospitals to help Elders and their families remain healthy; and
- Implementing a care system that goes beyond the clinic walls to reach the Elder in the home and community.

In support of these ideals, the Innovations in Planned Care Collaborative has brought together IHS, tribal, and urban pilot sites to bring about foundational changes in how they deliver care. These sites are adapting a Care Model to chart a new course in health care. The first 14 pilot sites have been working over a year and a half now, and they have already begun to show improvements in the delivery of care for chronic medical problems. They have begun to reduce wait times; improve access to care; increase screening for cancer, domestic violence, and alcohol misuse; and improve efforts to ensure that patients have a care team and provider who they know and who knows them. We now have expanded the collaborative to a total of 40 IHS, tribal, and urban sites to continue to develop ideas on improving health care in Indian Country.

The Indian Health Service and Tribes made dramatic improvements in the health of Indian people in the last half of the twentieth century through improved sanitation; infectious disease prevention and treatment; improved maternal and child health care; and increased access to health care services. Now we all, in partnership, face a new set of challenges. We must create an understanding in our communities that a lifestyle in balance can lead to healthier lives and healthier communities. And we must develop new ways to provide care that places the patient, family, and community at the center of care, and to organize the care team to support them on their health and wellness path.

We believe in the vision of healthy communities and we believe in the ability of our Elders to lead us there. I am here in spirit and voice with you because I believe that in partnership with the Elders of Indian Country, we can tip the balance back toward health in our communities.