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with the US ADMINISTRATION ON AGING



EATING BETTER

&

MOVING MORE

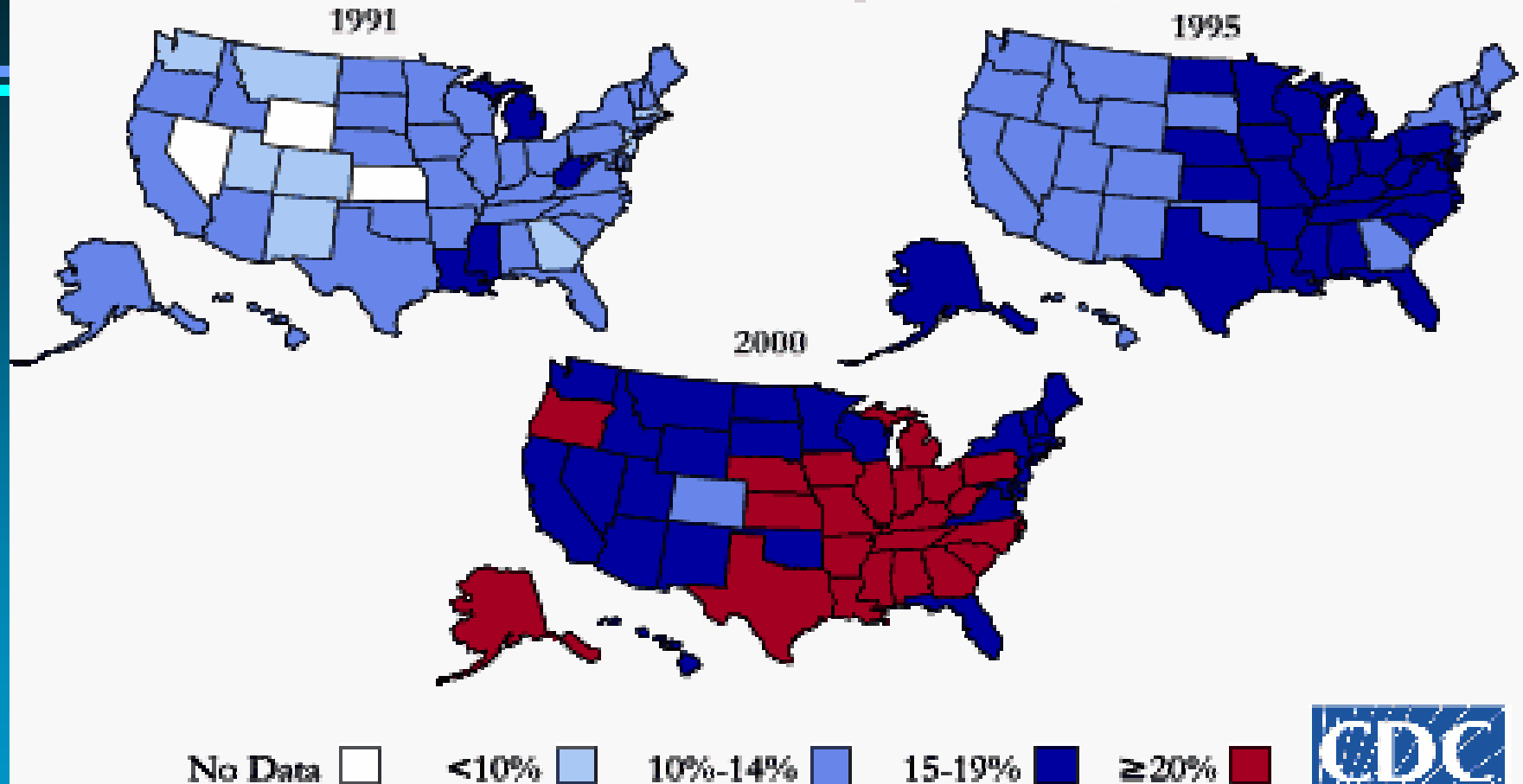
HealthierUS

- **President Bush's very simple formula:**
Every little bit of effort counts!!
- **4 keys to a Healthier America:**
 - ***Be Physically Active Every Day***
 - ***Eat a Nutritious Diet***
 - ***Get Preventive Screenings***
 - ***Make Healthy Choices***

Obesity Trends* Among U.S. Adults

BRFSS, 1991, 1995 and 2000

(*BMI ≥ 30 , or ~ 30 lbs overweight for 5'4" woman)



Source: Mokdad A H, et al. *J Am Med Assoc* 1999;282:16, 2001;286:10.

US Trends in Obesity

- **Overweight: BMI >25**
 - **Adults: 55%; 97M (>20 yrs)**
 - **F: 50%; 47M**
 - **M: 59%; 50M**
- **Obese: BMI >29**
 - **Adults: 22%; 39.8M**
 - **F: 25%; 23M**
 - **M: 19%; 17M**
- **14%: children & adolescents**

% Overweight & Obese by Age Groups

BMI >25	20-29	30-39	40-49	50-59
Men	43.1	58.1	65.5	73.0
Women	33.1	47.0	52.7	64.4
Total	38.3	52.6	59.0	68.5
BMI >30				
Men	12.5	17.2	23.1	28.9
Women	14.6	25.9	26.9	35.6
Total	13.5	21.5	25.0	32.3

% Overweight & Obese by Age Groups

BMI >25	60-69	70-79	80+
Men	70.3	63.1	50.6
Women	64.0	57.9	50.1
Total	66.9	60.1	50.3
BMI >30			
Men	24.8	20.0	8.0
Women	29.8	25.0	15.1
Total	27.5	22.9	12.6

Overweight & Obesity

INCREASED HEALTH RISKS

- **Highest concerns: Cardiovascular diseases (CVD) & diabetes mellitus**
- **Hypertension, dyslipidemia, respiratory problems, sleep apnea, osteoarthritis, gallbladder disease**

Diabetes & Older Adults

- **~Half occur in people >55 yrs**
- **Risk for Type 2 increases w/ age**
 - **~18.4% (6.3 M) age 65+**
- **18% all nursing home residents**
 - **tend to be younger than non-diabetic residents**

Costs of Obesity

- **\$70B of health care cost attributed to obesity**
- **\$33B on “quick fix” weight loss products and services by 65M adult Americans**

Costs of Sedentary Lifestyle

- **Physical inactivity accounts for ~15% of US health care budget**
- **CVD: \$298.2B**
- **Type 2 Diabetes: \$98B**
 - **30% reduction was achieved by those walking 2.5 hr/wk**
 - **15 lb. weight loss reduces risk by 60% & saves US health system \$58B / yr**

How physically active is the U.S. population?

- **22% US adults are regularly physically active**
 - 5 times / wk for at least 30 minutes
- **15% get the recommended amount of vigorous activity**
 - 3 times / wk for at least 20 minutes
- **25% do no physical activity at all in their leisure time**

U.S. DHHS, Physical Activity and Health: A Report of the Surgeon General.
Centers for Disease Control & Prevention, 1996

USA On the MOVE

- **Part of President's *HealthierUS* Initiative**
- **2 part project sponsored by AoA & Nat'l Policy & Resource Ctr on Nutrition & Aging**
- **Part 1: Eating Better**
- **Part 2: Moving More**
- **Addresses health, nutrition, physical activity**

www.fiu.edu/~nutreldr/STEPS_Program/USAontheMove/USA_on_the_Move_Factsheet.pdf

NATIONAL BLUEPRINT: Increasing Physical Activity Among Adults Age 50 & Older

SPONSORS (March 2001)

- **AARP**
- **American College of Sports Medicine**
- **American Geriatrics Society**
- **Centers for Disease Control & Prevention**
- **National Institute on Aging**
- **Robert Wood Johnson Foundation**

NATIONAL BLUEPRINT: Increasing Physical Activity Among Adults Age 50 & Older

VISION:

- **“We envision a society in which all people age 50 & older enjoy health & quality of life which is enhanced through regular physical activity.**
- **We will inspire an approach to aging that encourages physical activity in all aspects of people’s lives.”**

NATIONAL BLUEPRINT: Increasing Physical Activity Among Adults Age 50 & Older

- **Barriers to discussing physical activity w/ patients**
 - **Lack of time, reimbursement, resources, protocols, etc.**
- **Physical activity counseling leads to increases in physical activity through**
 - **Training**
 - **Development of materials & programs**
 - **Coordination between health care & community programs, such as Senior Centers**

NATIONAL BLUEPRINT: Increasing Physical Activity Among Adults Age 50 & Older

- **Aligned with USDHHS *Healthy People 2010* Objectives**
- **Noted that no national organization systemically addresses physical activity & older Americans**
- **Based effective strategies on collaborations, coalitions, partnerships**

CDC MMWR: Prevalence of Health-Care Providers Asking Older Adults about their Physical Activity Levels: US 1998

NHIS Data 1998

- **Only 52% reported being asked about physical activity during routine check-ups.**
- **Those asked about physical activity were 1.7x more likely to engage in recommended levels of physical activity than those not asked.**

www.cdc.gov/mmwr/preview/mmsrhtml/mm5119a2.htm

AARP: Beyond 50: A Report to the Nation on Trends in Health Security. May 2002

- **“Fewer people age 50 & older smoke, more are using preventive services & are trying to exercise.**
- **At the same time, however, a much larger portion ... is obese than in previous years, and only some ... are eating a healthy diet as recommended.”**

AARP: Beyond 50: A Report to the Nation on Trends in Health Security. May 2002

- **“The epidemic of obesity—which nearly doubled between 1992 & 1999—could cancel out many of the gains achieved in other areas of prevention & treatment of diseases associated with aging.**
- **Possibly as a result of rising obesity rates, diabetes has been increasing among older men & women, particularly 50-64 year olds.”**

Institute of Medicine

- ***Dietary Reference Intakes (DRIs) for Macronutrients***
 - ***Energy, Carbohydrates, Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids***
 - **New Eating & Exercise Targets to Reduce Chronic Disease Risk**
 - **Released September 5, 2002**

Institute of Medicine

EXERCISE TARGET

- To maintain cardiovascular health at a maximal level, regardless of weight, spend a total of at least 1 hour each day in *moderately intense physical activity*
- Double the daily goal set by *1996 Surgeon General's Report*

Institute of Medicine

1-HR-A-DAY EXERCISE GOAL

- **Average amount of daily energy expended by individuals who maintain a healthy weight**
- **Energy expenditure: cumulative, includes**
 - **Low-intensity activities of daily life**
 - Stair climbing, housecleaning, etc.
 - **Moderate intensity activities**
 - Walking at 4 miles per hour
 - **High-intensity activities**
 - Swimming, cycling, etc.

Institute of Medicine

1-HR-A-DAY EXERCISE GOAL

- **Based on intensity**
 - **Moderate = 1 hr / day**
 - **High = 20-30 min 4-7 times / wk**

American Academy of Sports Medicine

“In the past, exercise generally has been considered inappropriate for frail or very aged older individuals. The past decade has seen an accumulation of data that **DISPELS the **MYTHS** of futility & and provides reassurance of the safety of exercise.”**

ACSM: Exercise & Physical Activity for Older Adults

- **Benefits of regular exercise**
 - **↑ Health status**
 - **↑ Quality of life & life expectancy**
 - **Maintains/improves cardiac function**
 - **Improves bone health; ↓ risk osteoporosis**
 - **↑ Postural stability; ↓ risk of falling**
 - **Preserves cognitive function; alleviates depression symptoms**
 - **Protective effect on total body mineral content**

American Dietetic Association:

Fitness from 50 Forward

- **Manual to help nutritionists establish exercise programs for men & women over 50 years old**
- **Program is safe & effective**
- **Resistance exercise is safe & appropriate for older adults**
- **Research shows that older adults have remarkable ability to increase strength, fitness & health when they adhere to a regular fitness program**



EATING BETTER

&

MOVING MORE

EATING BETTER: THE GUIDE

PURPOSE

- To celebrate 30 years of Older Americans Act Nutrition Programs & Older Americans Month (May).
- To start older adults on the *steps to healthy aging* path.
- To encourage older adults to eat healthier.
- To showcase local programs & their participants.

EATING BETTER: THE GUIDE

Selection Criteria

RECIPES

- Ease of preparation
- Low cost
- Taste
- Familiar favorites
- New foods
- Ethnic favorites
- Healthful = nutrient dense

TIPS

- Science-based
- Applicable to needs of healthy older adults
- Applicable to older adults with chronic illnesses/conditions
- Easy to understand
- Simple to apply, do-able behavior change

EATING BETTER: THE GUIDE Selection Criteria

Who Can Submit

- **Anyone (program participant or program staff) affiliated with the Aging Network may submit up to 3 recipes and/or tips via a local program to the State Expert Panel.**
- **The local program selects 1 recipe in each category and 10 tips for submission to their State Expert Panel.**



EATING BETTER: THE GUIDE

TIMELINE

FALL 2002 (Deadline TBA)

Recipes & tips submitted to Center

JANUARY 2003

Materials sent to AoA for review

MAY 2003

Release in OLDER AMERICANS MONTH



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Steps to Healthy Aging: **MOVING MORE**

- Modeled after *Colorado on the Move*TM
 - Statewide lifestyle initiative to improve health and prevent obesity through physical activity
 - [Coloradoonthemove.com](http://coloradoonthemove.com)
- **Moving More** focuses on increasing physical activity
- **Moving More** aims to add steps throughout the day to achieve a step goal
- **Moving More** helps older adults recognize the value of physical activity

Steps to Healthy Aging: **MOVING MORE**

- **MOVING MORE** uses electronic step counters to monitor & increase physical activity in older adults
- Easy to increase walking using step counters
- **MOVING MORE** is **FUN!**

About the Step Counters



- Easy to use
- One button reset
- Large display
- Accuracy tested
- Safety leash
- Alligator clip
- Order online:
www.fiu.edu/~nutreldr
- Sold at cost: \$11 + S/H

Wearing your Step Counter



- **Wear it directly above your knee.**
- **Make sure it's close & flat to your body.**
- **Attach safety leash to belt loop or button hole; use alligator clip to secure counter.**
- **It must be vertical with cover closed for accurate counts.**
- **At end of each day, write down the displayed number — your total steps for the day.**
- **To start a new day, press yellow reset button to set counter to zero.**
- **Start wearing your counter at anytime during the day. Wearing it for even part of a day motivates you to walk more.**

Moving More

**at any age enhances physical,
emotional, psychological &
social
well-being.**

Moving More: **MEASURING OUTCOMES**

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National Policy & Resource Center On
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Moving More

WHY COLLECT DATA?

- **Share successes & challenges**
- **Document effectiveness of interventions**
- **Justify increased funding for more services**
- **Standardize program methods**
- **Identify problems needing intervention**
- **Quality/performance improvement**

Moving More

RESEARCH: WHAT IS NEEDED?

- **Practical, reliable methods & measures**
- **Effect of physical activity/exercise on**
 - **Functional status**
 - **Physical fitness, muscle strength, flexibility, balance**
 - **Body mass**
 - **Risk for obesity, cardiovascular disease, diabetes**
 - **Psychological health**
 - **Quality of life**
- **Coordinated efforts with other programs**

Moving More

INSTRUMENTS to measure outcomes

- **Physical Activity Questionnaires**
 - **Modified Baecke Questionnaire for Older Adults**
 - **Physical Activity Scale for the Elderly**
 - **YALE Physical Activity Survey**
 - **Zutphen Physical Activity Questionnaire**
- **Functionality**
 - **ADLs, IADLS**
- **Health-related Quality of Life**
 - **CDC Healthy Days Measures**
 - **MOSF-36**

Moving More:

FUTURE RESEARCH PROJECTS

- **Miami pilot –establish a model using step counters to increase physical activity in older Americans who participate in community Nutrition Programs**
- **Other models needed**
 - **State, Area, Local**
- **Contact the Center for assistance with measuring outcomes**



**Online at
www.fiu.edu/~nutreldr**