

Reframing Aging: Do you need an attitude adjustment?

Presented by:
Frameworks Institute
Minnesota
Vermont
New York

American Society on Aging
Conference – April 2019

The Reframing Aging Project was sponsored by these generous funders



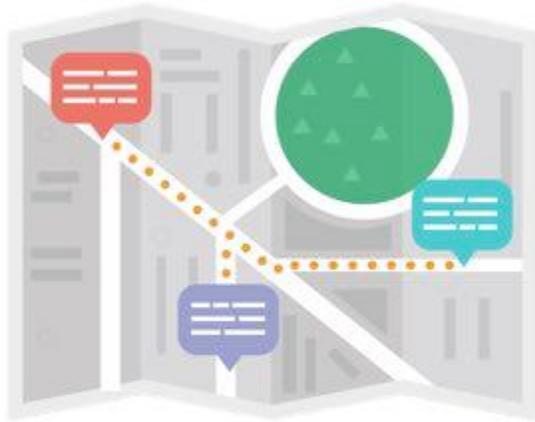
This effort has a robust evidence base

Sample Size: 12,185

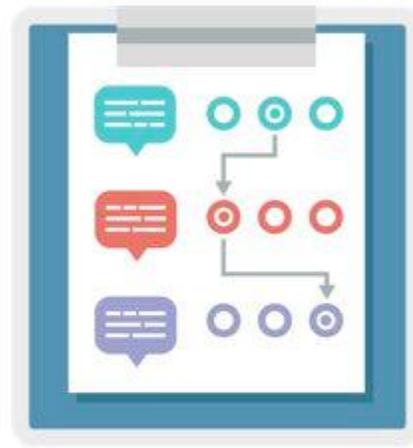
The Reframing Aging Project was sponsored by organizations who recognized a shared challenge:



What does it take to reframe an issue?



Map the terrain



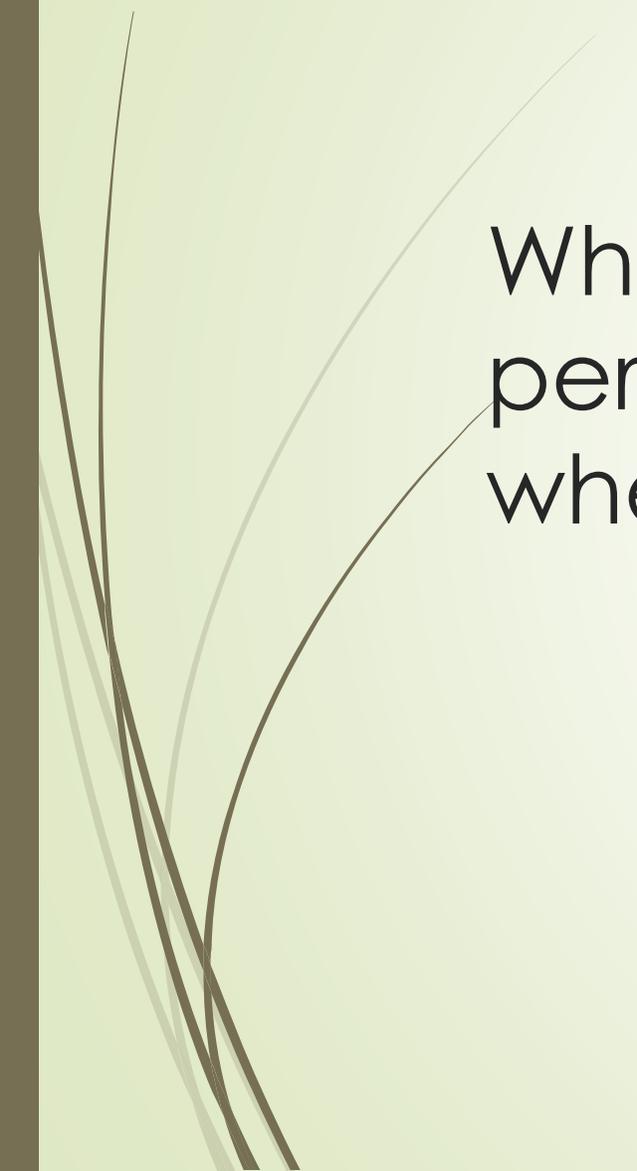
Develop a strategy to
navigate to higher ground



Build a caravan,
equip the travelers,
and start moving



What do you think the average person in your state thinks about when someone talks about aging?



Do they think of this?



Or do they think of this?





Although both of those representations can be true, the majority of the population tends to believe that aging means that individuals:

- become a drain on finite resources
- have less to contribute
- are weak and frail
- Do not contribute to the economy

The language we use can unintentionally lead us to those negative conclusions.....

Reframing Aging

- ▶ **What's the problem?** Aging is not the problem, but the way we talk about aging is. Most people, without even thinking of it, use language that describes aging as a negative experience. Unfortunately, this language contributes to “Ageism” in our culture, which is a stereotyping or discrimination of a person or group of people because of their age. This is a serious challenge in our culture and communities, manifesting in the unconscious thoughts we have, the actions we take, and the social policies, institutions and systems we create.
- ▶ **What's the solution?** To change the way our society thinks and acts about aging, we must begin to change the way we talk. Reframing aging using common language that celebrates our collective experience as we all age helps contribute to solutions. The language we use truly matters.

From the [Vermont Re-framing Aging](#) document



And Now for the Facts about Aging: 50+ Longevity Economy

- ▶ 83 percent of US household wealth is held by people over 50.
- ▶ Access to credit and assets allows the group to spend more on goods, services and investments than their younger counterparts.
- ▶ direct spending on consumer goods and services, including health care, by those aged 50 and over amounted to \$5.6 trillion in 2015. The under-50 population spent \$4.9 trillion during the same period.
- ▶ When summed together, approximately \$1.8 trillion in federal, state and local taxes were attributable to the Longevity Economy in 2015—
 - ▶ about 34 percent of federal tax revenue and 41 percent of state and local tax revenue collected in the US.

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- 50-plus cohort
 - spends more overall than their under- 50 counterparts,
 - accounts for a majority of the spending in several categories of goods and services, including:
 - **healthcare,**
 - **nondurable goods,**
 - **durable goods, utilities,**
 - **motor vehicles and parts,**
 - **financial services and**
 - **household goods.**
 - 50+ also account for the majority of:
 - **volunteering,**
 - **philanthropy, and**
 - **donation activities** in the US.

- 
- ▶ As people in the 50-plus cohort make purchases at grocery stores, retail outlets, restaurants, healthcare centers, and so on, money ripples through these providers' supply chains.
 - ▶ And the longer people remain in the labor market, the more they earn and have to spend.
 - ▶ spending by people aged 50 and over in the US in 2015 supported:
 - ▶ more than 89.4 million jobs
 - ▶ over \$4.7 trillion in labor income.
 - ▶ 61 percent of all US jobs and 43 percent of labor income was related to spending by the 50-plus cohort.

REMI Retirement Migration Scenario

13

What if more retirees move to Metro Atlanta???

\$40 Billion
More in
Personal Income
\$7.8 Billion
In Additional GDP

- FOR THE 20-COUNTY AREA; ARC TRANSIGHT MODEL
- Assumptions
 - Annual increase of 1,000 65+ retired migrants per year to 20-county economy from 2015-2040
 - Distribution weighted on 65+ population in each county
 - No explicit costs considered
- Potential Impacts (DRAFT; not “net” benefits)
 - Increase of \$40B in Personal Income 2015-2040
 - Increase of \$7.8B in GDP 2015-2040
 - Almost 100,000 more job-years for the economy ‘15-’40
 - Population increase of 16,000 by 2040 (LOSS across some other cohorts)

REMI Working Age Migration Scenario

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What if more working age₍₁₈₋₆₄₎ people move to Metro Atlanta?

\$4 Billion
More in
Personal Income
\$2.6 Billion
In Additional GDP

- FOR THE 20-COUNTY AREA; ARC TRANSIGHT MODEL
- Assumptions
 - Annual increase of 1,000 migrants aged 18-64 per year to 20-county economy from 2015-2040
 - Distribution weighted on population aged 18-64 in each county
 - No explicit costs considered
- Potential Impacts (DRAFT; not “net” benefits)
 - Increase of \$4B in Personal Income 2015-2040
 - Increase of \$2.6 in GDP 2015-2040
 - Almost 29,400 more job-years for the economy ‘15-’40
 - Population increase of 8,000 by 2040

What You Need to know!

- The New Economy is increasingly dependent on the work of our 65+ population
- These workers are already earning close to a BILLION dollars a year in wages
- In the future, these workers will add billions to our regional economy in the future.
- Attracting additional retirees to Metro Atlanta would have strong positive impact to our Economy
- **Seniors are a critical part of our economic competitiveness**

Retaining more older adults produces a cumulative effect on the region's economy, resulting in a region with nearly 7,000 more people and 2,600 more jobs, if the increased retention of 600 older adults per year continues for 10 years.

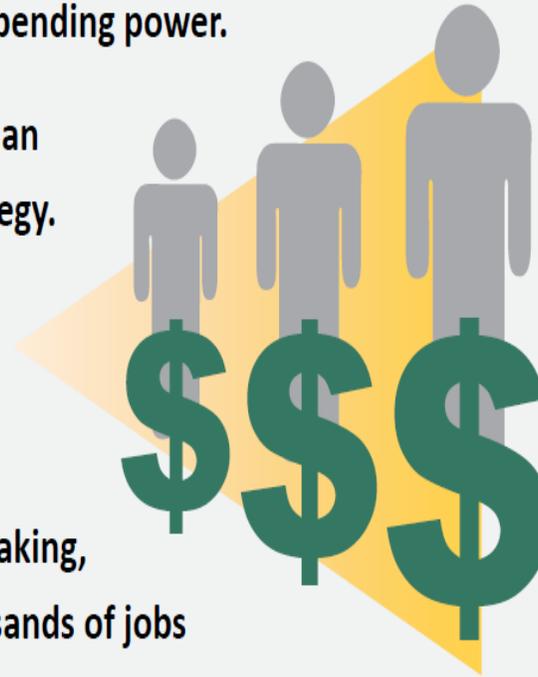


Source: Regional Economic Models, Inc. (REMI)

As jobs increase, so does the value of goods and services produced by the regional economy — its economic output or gross domestic product. Income rises faster than output, since older adults bring with them retirement income for which they don't have to work at local firms. In addition, some of their

Conclusions

- Older adults are increasingly important to the Kansas City area economy.
- This is the result of both growing numbers and growing spending power.
- Retaining older adults who might otherwise leave can be an important part of an overall economic development strategy.
- Strategies to make the region more attractive to older adults — such as providing age-friendly homes and public spaces, improving transportation options, including residents of all ages in activities and decision making, and offering a range of health services — could add thousands of jobs and millions of dollars to the region's economy, over time.
- We are increasingly a community OF all ages, so we need to invest to become a community FOR all ages.



KC Communities for All Ages provides information about how communities can become more age friendly at www.KCCommunitiesForAllAges.org.



Passed in 1965, along with Medicare and Medicaid



Calls for creation of a comprehensive and coordinated system of services and supports for older Americans



Goal is to focus on services and supports which promote and sustain healthy aging. Services targeted to those 60+ in “greatest economic and social need”



One important way to support healthy aging is to change the narrative around aging and what it really means – how do we do that?



How do we balance the messaging about necessary services and supports with messaging about the opportunities inherent in aging?



How can we highlight the contributions of older Americans to their communities and our reliance on a multi-generational population to make communities work?

Vermont Demographics

- ▶ In **2017**, Vermont had the **second highest median age (42.8) in the United States**. Only Maine had a higher median age (44.3).
- ▶ Vermont is on track to be the **oldest state in the nation (65+) by 2032**
- ▶ The **number of individuals under age 18 is projected to decrease** by between 10,200 and 12,200 individuals by 2020, and by between 12,900 and 18,900 by 2030, compared to 2010.
- ▶ The **number of individuals aged 18-64 is projected to decrease** by between 13,100 and 24,600 individuals by 2020, and by between 45,700 and 62,200 by 2030, compared to 2010.
- ▶ The **number of individuals aged 65 and older is projected to increase** by **between 39,800 and 51,100 individuals by 2020, and by between 75,900 and 103,000 by 2030**, compared to 2010.

▶ *Note: figures have been rounded to the nearest hundred (100).*

Vermont Demographics



A recent AARP report predicts that the number of Vermonters over the age of 85 will increase dramatically from about 15,000 in 2015 to over 50,000 in 2050...6.66% of the population, the highest in the US.



The Alzheimer's Association estimates that in 2017, 12,000 Vermonters over the age of 65 had Alzheimer's disease and that this number will increase about 42% to 17,000 Vermonters by 2025.



The Vermont Department of Labor suggests that while the labor force has decreased, the demand for workers has increased. This is particularly acute in health and human services. Some of the fastest growing areas of need:

Registered nurses

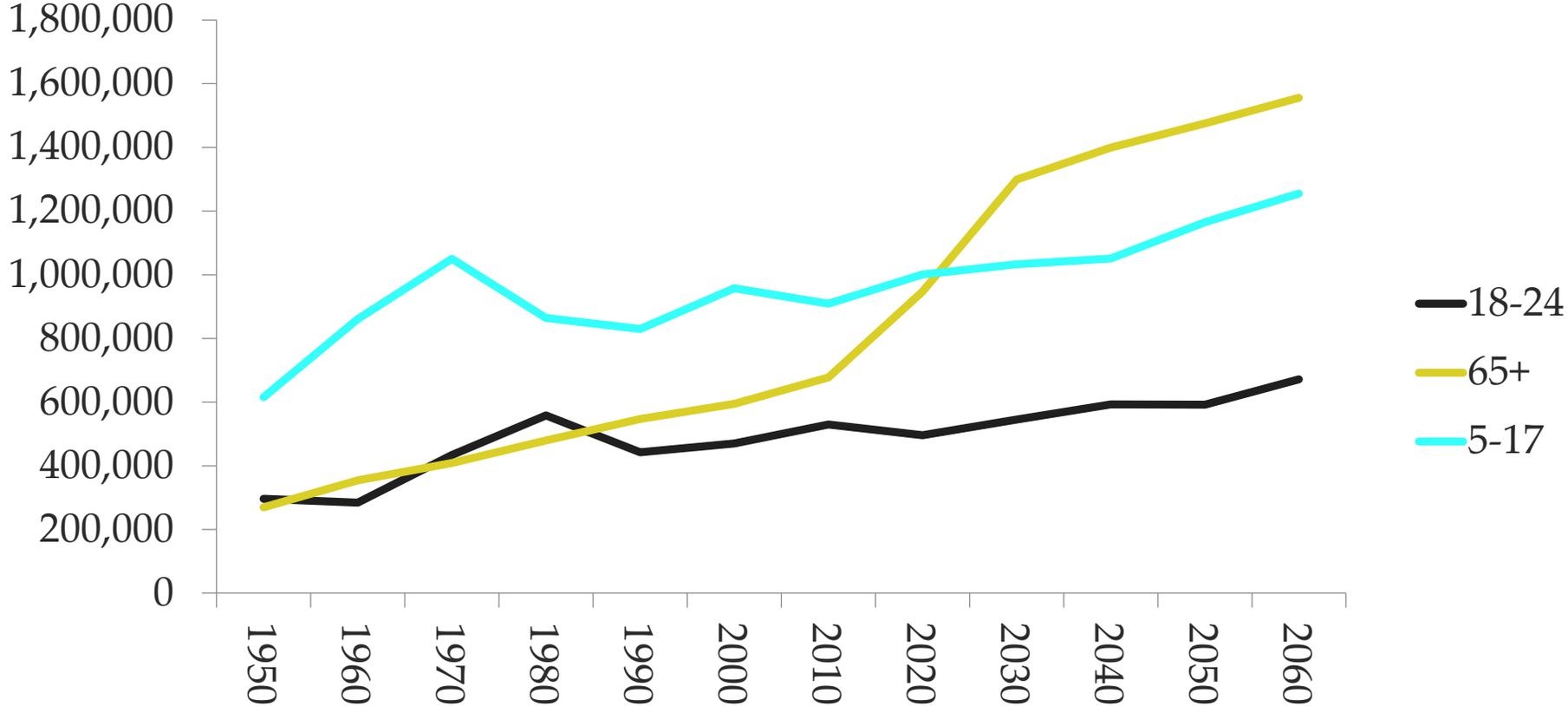
Personal care aides

Nursing assistants

Social and human service assistants

Minnesota Demographics

By 2020 more people 65+ than school-age children



New York Demographics- Aging in NYS

- New York's total population is over 19 million individuals, and the State **ranks fourth** in the nation in the number of adults age 60 and over – 4.38 million.
 - 4.2 million between 45-59
- In 2015, 12 counties in the state had more than 25% of their population over 60 years of age; by 2025, 33 counties are projected to have more than 25% of their population over 60.

New York State Trends Demographics

| Population Trends | 2000 | 2008 | 2010 | 2015 | 2020 | 2025 | 2030 |
|--------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Total Population | 19,000,135 | 19,460,969 | 19,566,610 | 19,892,438 | 20,266,341 | 20,693,354 | 21,195,944 |
| Ages 5 and over | 17,763,021 | 18,216,035 | 18,314,451 | 18,619,147 | 18,985,160 | 19,398,722 | 19,874,195 |
| Ages 60 and over | 3,211,738 | 3,558,460 | 3,677,891 | 4,027,480 | 4,499,549 | 4,962,734 | 5,302,667 |
| Ages 65 and over | 2,452,931 | 2,559,826 | 2,588,024 | 2,851,524 | 3,191,141 | 3,615,695 | 4,020,308 |
| Ages 75 and over | 1,180,878 | 1,281,459 | 1,259,873 | 1,242,577 | 1,332,145 | 1,561,652 | 1,815,879 |
| Ages 85 and over | 314,771 | 403,129 | 417,164 | 442,958 | 454,298 | 486,682 | 566,423 |
| Ages 60-74 | 2,030,860 | 2,277,001 | 2,418,018 | 2,784,903 | 3,167,404 | 3,401,082 | 3,486,788 |
| Ages 75-84 | 866,107 | 878,330 | 842,709 | 799,619 | 877,847 | 1,074,970 | 1,249,456 |
| Minority Elderly, 60 and over | 736,742 | 981,360 | 1,062,919 | 1,277,197 | 1,552,380 | 1,865,871 | 2,180,775 |
| Ages 65 and over | 506,282 | 674,022 | 716,078 | 872,889 | 1,058,974 | 1,296,349 | 1,574,537 |
| Ages 75 and over | 198,537 | 285,885 | 303,764 | 357,680 | 426,448 | 537,061 | 672,261 |
| Disabled (ages 5 and over) | 3,606,192 | 3,784,789 | 3,831,083 | 3,952,167 | 4,096,932 | 4,253,653 | 4,400,598 |
| Ages 5 to 17 | 257,194 | 246,675 | 244,978 | 246,999 | 252,089 | 255,876 | 260,507 |
| Ages 18 to 59 | 2,206,913 | 2,206,913 | 2,210,226 | 2,198,510 | 2,161,587 | 2,141,246 | 2,156,392 |
| Ages 60 and over | 1,201,431 | 1,331,201 | 1,375,879 | 1,506,658 | 1,683,257 | 1,856,532 | 1,983,699 |
| Poverty,(1) Age 60+ | 352,835 | | | | | | |
| Below 150% | 652,365 | | | | | | |
| Below 250% | 1,201,110 | | | | | | |
| Housing (Own/Rent), 60+,(2) | 158,860/92,900 | | | | | | |

Source: NYS Data Book, 2010, © NYSUT

The reality of Older New Yorkers, Vermonters and Minnesotans

- ▶ They are:
 - ▶ Volunteers
 - ▶ Contributors to the tax base
 - ▶ Civically engaged
 - ▶ Caretakers

New York Social, Economic & Intellectual Capital of Older Population

- ➔ **935,000 individuals age 60+** contribute **495 million hours** of service at economic value of **\$13.8 billion**
- ➔ **64% of individuals** age 60+ who own their own homes = **no mortgage**
- ➔ **4.1 million caregivers** at any time in a year – economic value if paid for at market rate is **\$32 billion, average age is 64**

Vermont Social, Economic & Intellectual Capital of Older Population

- ▶ VT Legislative Joint Fiscal Office: Between **2005-2015** the share of jobs held by people **age 55 to 64 rose from 14% to almost 20%** and for people **age 65 or older it almost doubled from 3.5% to almost 7%**
- ▶ Older people in Vermont are more active in the labor force than older people in other states. **The US Census estimates that in 2017 32% of Vermonters age 65-74, and 8.1% age 75+, participated in the labor force.** This compares to national estimates of 25.6% for age 65-74 and 7.4% for age 75+
- ▶ **64,300 Family Caregivers** (unpaid)
- ▶ Contribute **69 million hours of caregiving at a value of \$683 million**

Minnesota Social, Economic & Intellectual Capital of Older Population

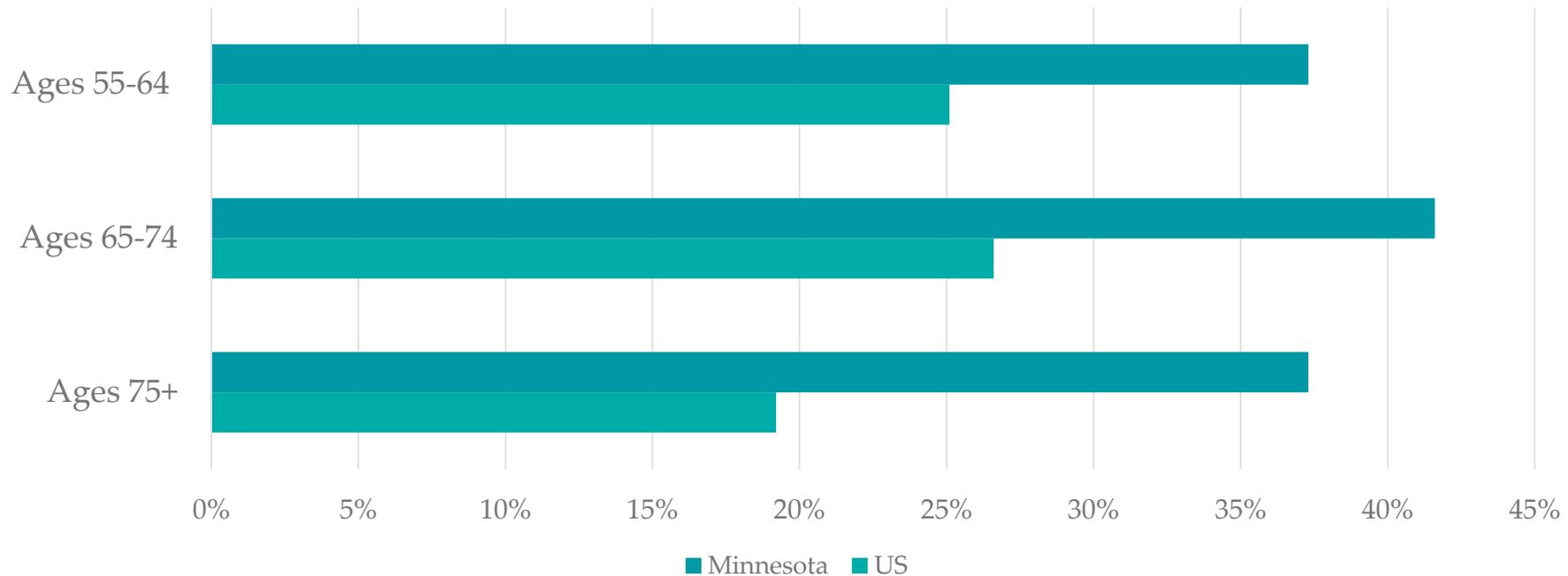
- About 25% of Minnesotans between 65-74 are still in the workforce.
- Minnesota median income for people 65+ is \$46,203 while the, US median income is \$43,735*
- In Minnesota, the unpaid help provided by family and friends who are caregiving is valued at \$7.9 billion a year and exceeds state Medicaid expenditures.**

*mncompass.org – retrieved March, 2019

***Valuing the Invaluable 2015 Update: Undeniable Progress, but Big Gaps Remain.* AARP Public Policy Institute.

Minnesota Social, Economic & Intellectual Capital of Older Population

Older adults who volunteered in the past year by age
(Minnesota and U.S., 2015)



Source: Current Population Survey, Volunteer Supplement, conducted by the U.S. Census Bureau for the Bureau of Labor Statistics.

Minnesota Social, Economic & Intellectual Capital of Older Population

State Plan Goal: Leverage the experience, expertise and energy of older Minnesotans

- Facilitate opportunities to connect older people to their communities and engage them in the activities that offer them social connections.
- Work with employers to increase the number of older people (those 50+) who are actively recruited and retained as part of an overall workforce strategy.

Policy to Practice.....

In order to keep us moving forward, we must address our language and work across three key arenas:

- Policy
- Planning
- Funding
- Practice/Programs

MN
2030



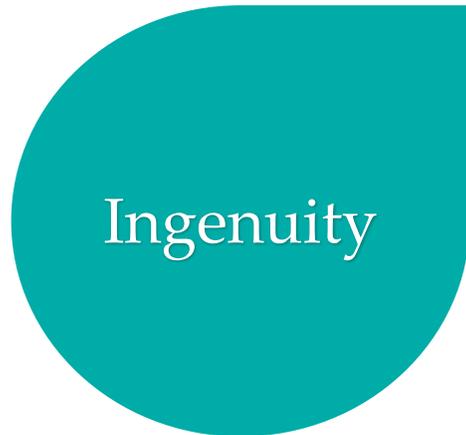
The Minnesota Board on Aging, in partnership with the Minnesota Department of Human Services, is looking forward to 2030. Across all Minnesota communities, sectors and generations, we aim to refresh and refocus our efforts. We will celebrate our successes and spark a new conversation about what our future can be so all older adults and families are supported in an age-friendly community.

MN2030 Looking Forward

Vision

Minnesota is a great place to grow up and grow old, where all Minnesotans are treated with dignity and respect, regardless of age.

Values



MN2030 Looking Forward Integrated Strategy

Reframing Aging

Vision and Values

Address ageism

Challenge mistaken beliefs

Avoid themes from the past

Homogenous group

Gaps between experts and public

8 Domains for Age Friendly State

Community

Conversations

Online Survey

Categorize common themes

MN2030 Looking Forward

Measure with previous state efforts

Status Checks

Policy Briefs

Communities of color

Pledge for a livable state

MN2030: Looking Forward Upcoming Initiatives

Rapid Screen Reframed

STEP ONE

UNDERSTAND YOUR RESOURCES



Finding Community

Even if you live alone, it's important to pursue every avenue for social interaction. Engaging others helps keep your support options open if you find yourself in need of assistance.



Caregiver Support

Whether this role is filled by trained professionals or caring family members, the caregiver is able to thrive when they clearly understand the needed services and related time investment.



Access to Help

Whether it's providing a ride or picking up groceries, some individuals can help you with day-to-day tasks. Identifying your network of helpers is how you can be prepared when needs arise.



Supported Living

Some care facilities offer supportive services while still ensuring an independent living experience. Understanding your needs will help inform decision-making.



Daily Tasks

While physical mobility may limit some activities for older adults, innovative solutions are available to help individuals manage daily activities and continue pursuing hobbies.



Preventing Injuries

From the bathroom to the kitchen to the bedroom, installing stability hardware and maintaining walking areas will keep you safer and prevent falls.



Active Memory

Improving mind health can significantly improve day-to-day enjoyment. Participating in memory exercises or learning something new are both ways to keep your mind engaged.



ACTIVE AGING. LIVING WELL.

For so many Minnesotans, living well is not a factor of age, but a sense of vitality we feel – in our communities, with our favorite activities and among friends and loved ones. Live Well at Home helps aging Minnesotans experience that vitality by connecting them to the people and services that enable them to thrive at home.

LIVE WELL



As we grow older, our health, routines and priorities will change, but the comforts of home should remain constant. The longer we support older adults in their desire to live at home, the longer they thrive.

[LEARN MORE](#)

GET INSPIRED



Growing up in Fairbairn, Roxanne Cornell always felt a duty to take care of older folks. Now in her 60s, Roxanne finds herself running a home near Lake Nokomis where women care for each other as part of a community.

[LEARN MORE](#)

BE BOLD



Living Well at Home is a bold vision, but it can't be realized without a plan for how to achieve that vision. Take stock of the resources in your life and learn how you can improve your independent living with a little planning.

[LEARN MORE](#)



MAKING A SUCCESSFUL PLAN

Live Well at Home supports successful aging at home. This process begins when we bring together the right services, support and housing at the community level for our aging populations. It involves the active participation of families, caregivers, communities and the state of Minnesota – all working together to find new, innovative ways to deliver quality care. This page details some ways you can prepare for aging at home.

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My pledge for an age-friendly Minnesota
<https://mn.gov/dhs/mn2030/>

New York: Policy, Practice, Funding

Governor Cuomo's Vision

- ▶ Advance a Health Across All Policies approach to incorporate health considerations into policies, programs and initiatives led by non-health agencies.
- ▶ Consider how all of our policies, programs and initiatives support us to achieve the Governor's goal of becoming an age friendly state.
- ▶ Long term goal is to embed Health in all Policies and Healthy Aging into all aspects of our government work.

This initiative builds on the NYS Prevention Agenda, a catalyst for action and a blueprint for improving health outcomes

- The Prevention Agenda is NYS's public health improvement plan for improving health and reducing health disparities across the state through an increased emphasis on prevention
- Since 2014, the Prevention Agenda has made substantial progress across 96 measures of public health and prevention – meeting and exceeding goals ahead of schedule in several areas.
- To achieve our most challenging health goals, we need a broader approach.

https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/

Initial Focus: support NY to become the first Age Friendly state for people of all ages

- Age friendly communities are healthy communities, making healthy lifestyle choices easy and accessible for all community members.
- Age friendly communities address 8 domains of livability defined by the WHO and AARP
- Why Focus on Age Friendly/Livable Communities
 - Quality of Life
 - Strong Communities
 - Economic Development
 - Competition



2018 SOS Items Supporting Age Friendly

Launch a Long Term Care Planning Council: To understand the projected and desired needs of older adults in New York, Governor Cuomo will launch a Long Term Care Planning Council that will be charged with examining New York's long-term care system. The Council will analyze, evaluate, and identify the existing service gaps in New York's long-term care system, determine the most cost-effective evidence based interventions, and prepare a strategic plan to meet the emerging needs of New York's aging population over the next decade. The Council will be jointly-led by the Commissioner of Health and the Director of the Office for the Aging, with participation from external stakeholders.

Issue an Age Friendly Executive Order: As a continued commitment to creating age-friendly communities, the Governor will issue an executive order that directs agencies to consider the impact of their policies and procurements on health and healthy aging, aligned with the eight domains of an Age-Friendly Community. To support the State's commitment in creating age friendly communities, the State will set a goal of making fifty-percent of all health systems age friendly within the next five years, which will include the establishment of age-friendly Emergency Rooms that will be better equipped to provide care to aging New Yorkers with cognitive and other physical disabilities.

Moving Forward

- 12 State Agencies working on HAAP initiative and Healthy Aging
- Agencies identified existing and proposed state level initiatives that support HAAP and Healthy Aging
- Increase local level participation to realize added impact of collaborative local agency actions that support Health across all Policies, Healthy Aging and Smart Growth principles.
- RFA – provide funding to each of 10 REDC regions to sign on to become certified age friendly, replicate age friendly executive order, or both
 - Develop statewide learning collaborative to provide technical assistance and training to regional grantees and to regional age friendly centers of excellence.
 - Additional opportunity to create regional age friendly centers of excellence to gain the skill and knowledge to provide TA and training to regional municipalities interested in pursuing age friendly designation.

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- ▶ piloting home sharing based on the successful Home Share Vermont model;
 - ▶ Implementing the Aging Mastery Program (AMP) evidence-based intervention to develop sustainable behaviors across many dimensions that lead to improved health, stronger economic security, enhanced well-being, and increased societal participation:
 - ▶ Expanding access to evidenced based interventions such as chronic disease self-management, diabetes self-management, fall and injury prevention, etc.;
 - ▶ Entering a two-year business acumen contract with the National Association of Area Agencies on Aging (N4A) to help the area agencies on aging and community based organizations better coordinate, partner and contract with health systems, hospitals, managed care and Medicare to meet mutual goals and expand access to services in the home and community that address the social determinants of health;
 - ▶ Working with the Department of Health to design a clear pathway for inclusion of aging network service contracting in the states efforts around payment reform through value based payments,
 - ▶ Partnering with NYSERDA to target low-and moderate-income households to improve energy efficiency and saving money that could be used for other needs and reducing risk from old and outdated equipment and products,
 - ▶ Piloting volunteer transportation programs in rural areas to support dialysis treatments, cancer screenings, and physician visits;

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- ▶ Expanding volunteer recruitment innovations to expand pool of certified HIICAP counselors and other volunteers;
 - ▶ Piloting the use of tablets with isolated older adults in rural counties to utilize technology, but may not be able to visit physical locations. The free, five-week program pilots one-hour, in-home sessions on the basics of using an iPad to connect with loved ones, engage in interests, and master new skills;
 - ▶ Partnering with Older Adult Technology Services (OATS) to enhance older adults' use of technology to enrich their lives, make positive behavior changes, start businesses, and be more socially engaged;
 - ▶ Partnering with the NYS Bar Association to offer pro bono legal services and advice through their on-line tool,
 - ▶ Working with the village to village network and the Albany Guardian Society to seed local village movements that organize neighbors helping neighbors,
 - ▶ Working with the Governor's office of faith based community development services to expand SNAP outreach, caregiver supports and other benefits and application assistance through faith communities statewide,
 - ▶ Working to expand respite options for caregivers through partnership to expand the REST respite model statewide,

Vermont: Policy, Practice, Funding

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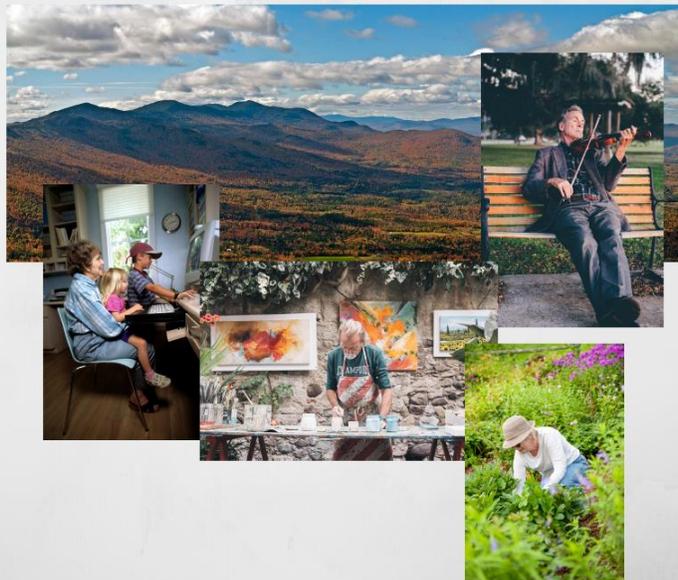
- Changing the Conversation
- Visioning Our Values into Law
- Driving the Strategies Forward



Vermont Work – Changing the Conversation

VERMONT STATE PLAN ON AGING

FFY 2019 - 2022



Submitted to ACL for Approval 6/29/18



DEPARTMENT OF DISABILITIES,
AGING & INDEPENDENT LIVING

Let's Talk About Aging in Vermont

What's the problem? Aging is not the problem, but the way we talk about aging is. Most people, without even thinking of it, use language that describes aging as a negative experience. Unfortunately, this language contributes to "Ageism" in our culture, which is a stereotyping or discrimination of a person or group of people because of their age. This is a serious challenge in our culture and communities, manifesting in the unconscious thoughts we have, the actions we take, and the social policies, institutions and systems we create.

Reframing Aging in Vermont ~

As Vermonters live longer, healthier lives, we are building momentum towards strong and vibrant communities by contributing time, talents and accumulated wisdom in so many ways - through work, artistic creation, civic engagement, and volunteering to name a few. Older Vermonters are our small business owners and workers, citizen legislators, Meals on Wheels drivers, educators and mentors, and so much more. Our state is enriched by the incredible value older people bring to every community. There is much to consider as we envision a Vermont that embraces aging at a systems level, and with growing demand for services and supports amid limited resources, the challenges are very real. But Vermonters are not daunted by challenge. We are a community of problem-solvers. Young and old, we will roll up our sleeves, tackling any challenges our changing demographics may bring with enthusiasm, skill and collaborative spirit. Let's work together to create the kind of Vermont where we all, regardless of age, feel welcomed, valued, supported, and able to thrive. Let's start right now.

Learn more about what you can do to change the conversation on aging ~

<https://www.frameworksinstitute.org/reframing-aging/>
<https://www.aarp.org/disrupt-aging/>
<https://www.thischairrocks.com> Follow the reframing work in Vermont at <https://www.asd.vermont.gov>.

What's the solution? To change the way our society thinks and acts about aging, we must begin to change the way we talk. Reframing aging using common language that celebrates our collective experience as we all age helps contribute to solutions. The language we use truly matters.

| Encourage These Words / Phrases | Avoid These Words / Phrases |
|---|---|
| Older Vermonter / older person or people | Elderly / Senior / Senior citizen |
| We / all of us (inclusive) | They / them (othering) |
| Accumulation of wisdom / knowledge / experience | Decline / deterioration / loss |
| Problem solving (sense of ingenuity) | Nothing can be done (sense of fatalism) |
| Changing demographics | Silver tsunami |
| Building momentum | Getting old / battling aging |





Media in Vermont, one example...

“The aging of Vermont is the **biggest problem** the state faces today and it will be for the next decade and beyond. It will be **hard enough to deal with** the impacts of that change — on employers looking for workers, homeowners trying to sell their houses, on health care, assisted living facilities, voting patterns, and more — and **even harder to try to reverse or limit the aging** of Vermont.”

-- Economist Art Wolff, “Vermont Aging Faster Than Rest of U.S.,” *Burlington Free Press*, 7/21/16



...Our Reframing Response

“...Rather than feeling discouraged by the demographic shift, I have great hope for our future. I believe that Vermonters, young and old, are **creative problem solvers and will embrace the positive attributes of Vermont’s new demographics**, while tackling any challenges this may bring with enthusiasm, skill and collaborative spirit. The real story, beyond the numbers of births, deaths and taxes, is about **creating the kind of Vermont where we all, regardless of age, feel welcomed, valued, supported, and able to thrive**. I have no doubt that Vermonters can build this kind of world, and I look forward to doing it together.”

--Angela Smith-Dieng, Letter to the Editor, Burlington Free Press, 7/5/17

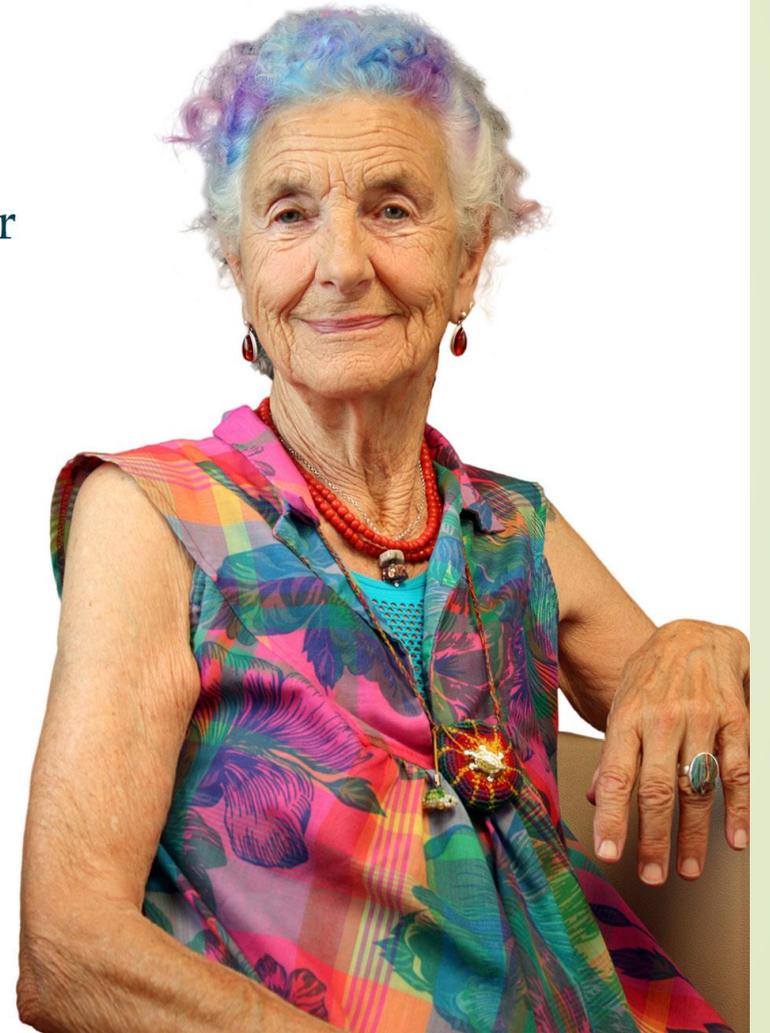
Changing the Conversation - Our Partners Are Reframing With Us

“Last year I heard someone say, ‘Oh my God, Rainbow lost her spunk — she went into senior housing.’ Well, I didn’t lose my spunk. It took a hell of a lot of spunk for me to decide to embark on this next adventure. I’m so grateful that I gave it a chance. I’m having a blast.”

— *Rainbow Cornelia,
Cathedral Square resident
since 2016*



Cathedral
Square



Vermont Work – Visioning our Values

Overarching Rights/Values:

Self-Determination: All older Vermonters have the right to autonomy, to direct our own lives as we age. As older Vermonters from diverse cultures and backgrounds, we should be able to age with intention, so that aging is not something that just happens to us but something that we actively participate in. Whatever services, supports and protections are offered, older Vermonters deserve dignity and respect, must be at the core of all decisions, and have the right to accept or refuse.

Safety and Protection: All older Vermonters have the right to live in communities, whether urban or rural, that are safe and secure. Older Vermonters have the right to be free from abuse, neglect and exploitation, including financial exploitation. As we age, our civil and legal rights should be protected even if our capacity is diminished. Safety and stability should be sought, balanced with our right to self-determination.

Coordinated and Efficient Systems of Services: All older Vermonters should benefit from a system of services and supports that is coordinated, equitable and efficient, includes public and private cross-sector collaboration at the state, regional and local level, and avoids duplication while promoting choice, flexibility and creativity. Such a service system, including key transitions of care, should be easy for individuals and families to access and navigate.

Goals/Principles:

Financial Security: All older Vermonters have the right to an adequate income and the opportunity to maintain assets for a quality of life as we age. If we want to work, older Vermonters have the right to seek and maintain employment without fear of discrimination and with any needed accommodations, but also retire after a lifetime of work if we choose, without fear of poverty and isolation.

Optimal Health and Wellness: All older Vermonters have the right, without discrimination, to optimal physical, dental, mental, emotional and spiritual health through end of life. Holistic options for health, exercise, counseling and good nutrition should be both affordable and accessible. Access to coordinated, competent and high-quality care should be provided at all levels and in all

Social Connection and Engagement: All older Vermonters have the right to be free from isolation and loneliness, with affordable and accessible opportunities in community for social connectedness, including work, volunteering, lifelong learning, civic engagement, arts, culture and technology. Older Vermonters are critical to our local economies and their contributions should be

Housing, Transportation and Community Design: Vermont communities should be designed, zoned and built to support the health and independence of older Vermonters, with affordable, accessible and appropriate housing, transportation and community support options that allow us to age in a variety of settings along a continuum of care, and that foster engagement in community life.

Family Caregiver Support: Family caregivers are fundamental to supporting the health and well-being of older Vermonters, and their hard work and contributions should be respected, valued, and supported. Family caregivers of all ages should have affordable access to education, training, counseling, respite and support that is both coordinated and efficient.



Work begins towards an
Older Vermonters Act
<https://dail.vermont.gov/resources/legislative/older-vermonters-working-group>

In Practice – Example of Falls

Vermont has a high rate of falls among older adults.

The Dominant Public Narrative on Falls:

- ▶ Falls are the #1 cause of injury-related death for those age 65+; *crisis language*.
- ▶ Everyone falls as they age, it's part of getting older; *fatalism*.
- ▶ If people made better choices, they wouldn't fall so much; individualism drives outcomes; *othering*.
- ▶ Falls cost a lot of money – more hospitalizations, nursing home stays and deaths; *fixed/finite resources*.
- ▶ Frailty, deterioration, dependence, incompetence; *aging = declining*.

Reframing Falls / Moving Strategies Forward



Tai Chi at Long Wind Farm

Strategy: We have reinvigorated our [Falls Free Vermont Coalition](#), which is expanding programs across VT and planning Tai Chi on the Statehouse Lawn in May during a Healthy Aging/Falls Prevention Awareness Day.

- ▶ We/us/all of us want to stay strong and independent as we age. We don't have to fall and be injured as we age. We don't have to be afraid of falling (inclusive language).
- ▶ The causes of falls are complex, but Vermonters are problem solvers. We know there are proven preventions, and we can work together to make them happen across our state (value of ingenuity).
- ▶ Let us empower each other to stay healthy and strong as we age, because we all have more to contribute – more skill, wisdom and experience. Let us create a Vermont community that fosters health and well-being and prevents falls for all of us (building momentum metaphor).