

Summit on  
**Aging and  
Longevity**

**Envisioning the Future of Aging &  
Longevity in Washington State**

**WELCOME**

**7:45 a.m. – 8:25 a.m.**

Registration & Continental Breakfast.

*Share a piece of Tacoma trivia with someone  
in the room or stop by the photo booth.*



# WELCOME / SUMMIT VISION

Care  
Courage  
Collaboration  
Commitment  
**Community**



**Ana Pinto da Silva**  
**Facilitator**

# WELCOME / SUMMIT GOALS

Highlight advances in Aging and Longevity



Create a vision for a Longevity mindset



Lean-in to powerful partnerships across all sectors



Identify areas for innovation



Explore strategic actions

# WHAT IS NOW?

## Celebrating Washington's Achievements Supporting Healthy Aging & Longevity



**Jilma Meneses**  
Secretary, DSHS

# WHAT IS NOW?

## Commendation for Outstanding Leadership



# WHAT IS NOW? WHAT COULD BE?

Envisioning the Future of  
Aging & Longevity for all  
Washingtonians



**Governor Jay Inslee**



**AGING.**  
so cool,  
everyone's  
doing it!

# Activity 1: Values Challenge Question

**What do you envision will matter most to you as you age?**



# WHAT IS NOW? WHAT COULD BE?

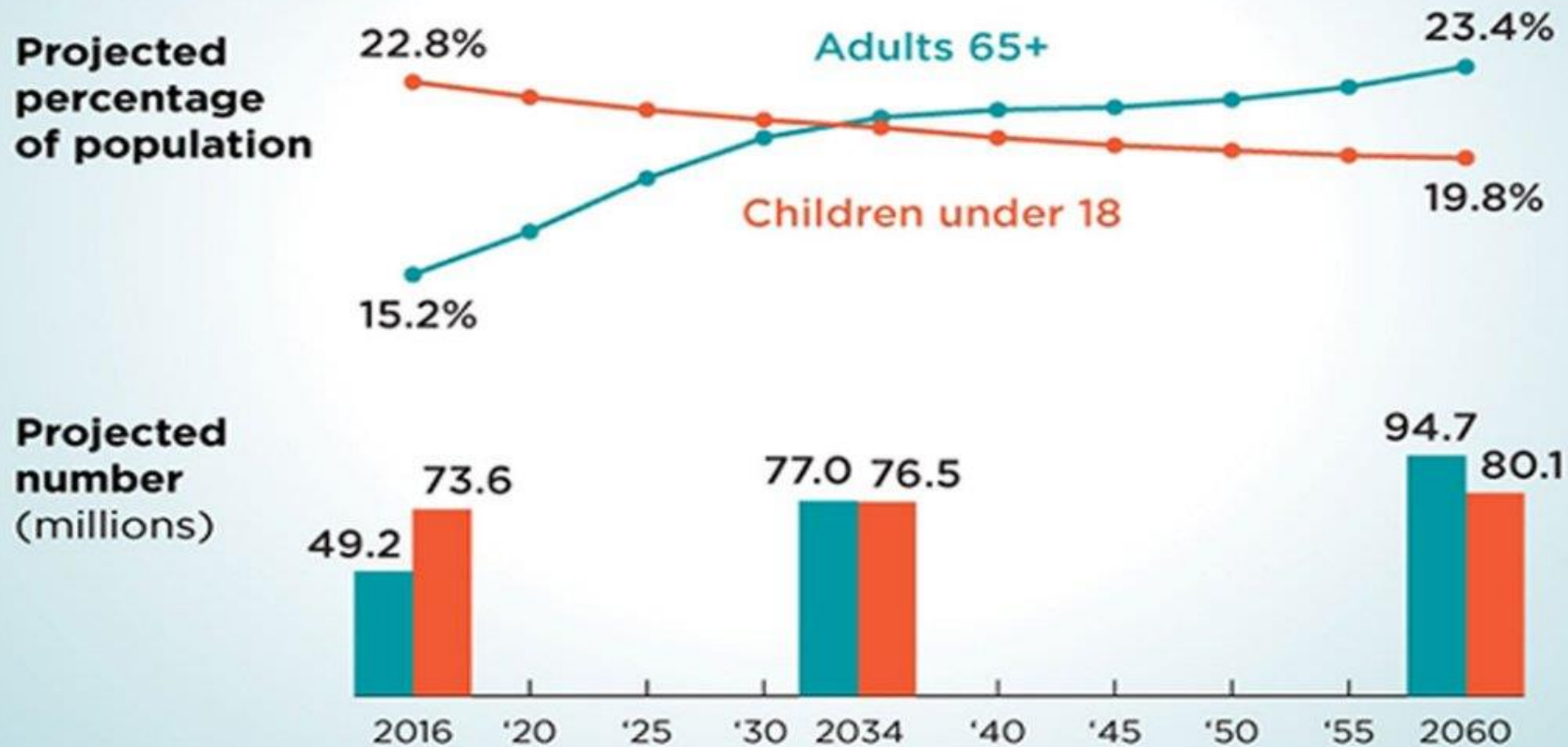
## Fostering a Longevity Mindset



**Diane Ty**  
**Milken Institute**

# The Need for a Longevity Mindset

For the First Time in U.S. History Older Adults Are Projected to Outnumber Children by 2034



# **Longevity Mindset: What Is Now? & What Could Be?**

# Fostering a Longevity Mindset

## What is Now?

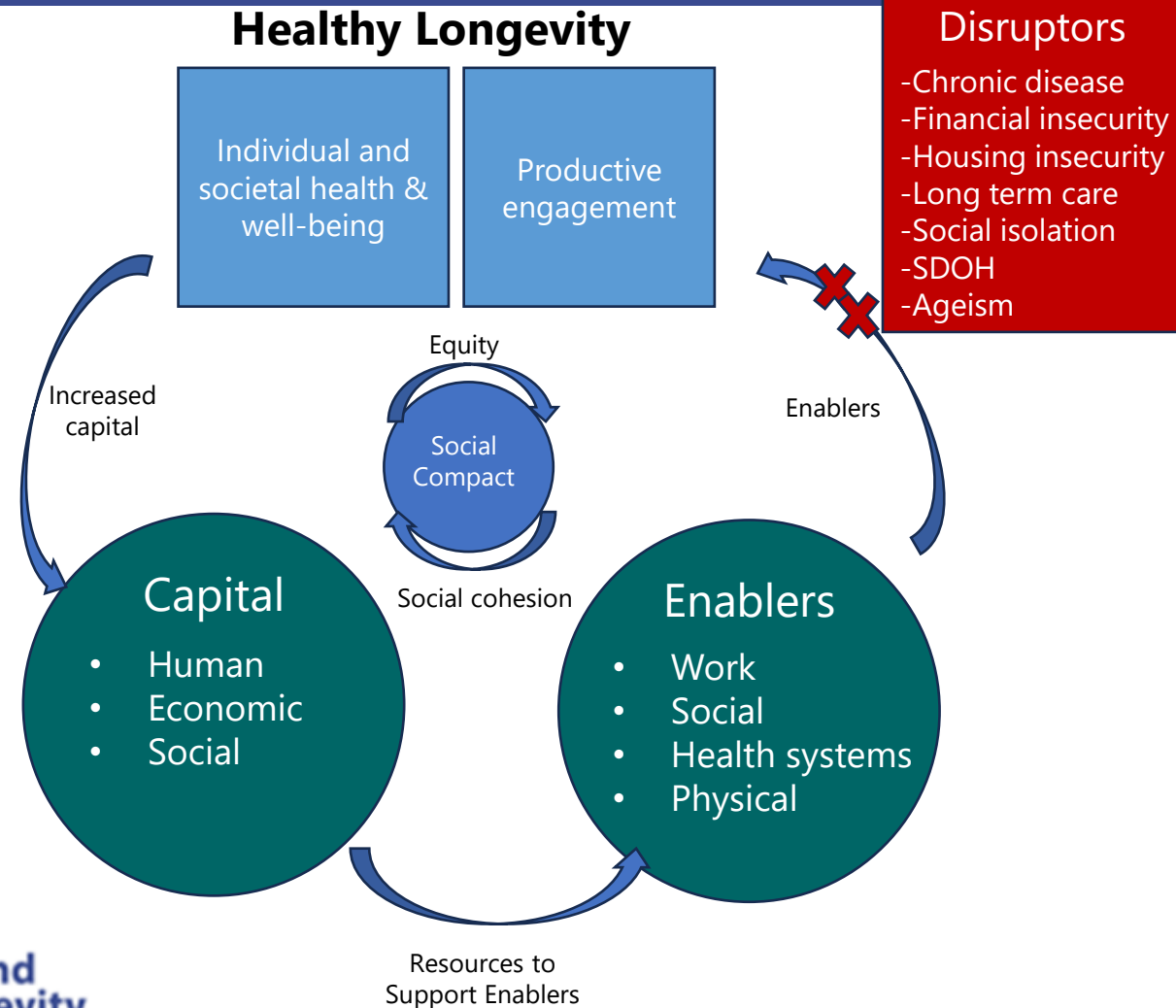
- **Three-stage process** of school, work, and retirement
- **3-legged stool of retirement:** Social Security, personal savings, employer-enabled savings
- **Ageism:** a socially acceptable form of discrimination that includes **deficit language** and media portrayals that perpetuates negative societal norms and perceptions
- **Media** and advertising that is youth-focused

## What Could Be?

- **Agile life stages:** on and off ramps and transitions among school, work, and care responsibilities, longer working lives, the need to save early and invest in social connections and relationships, and much more
- **Asset language:** older adults as a precious and vital resource; a spectrum of experience, wisdom, and vibrant potential
- **Positive self-perceptions** of aging lead older adults to live 7.5 years longer on average
- In the next two decades, **spending by Americans over 50 is projected to increase by 58%**, whereas spending by Americans 25-50 will grow by 24%

# Fostering a Longevity Mindset

- How can we better leverage the economic contributions of older adults?
- How can we address the barriers of inequity that inhibit people from living longer, healthier and more productive lives?
- What can be done to help older workers navigate unprecedented labor market conditions and new expectations for longer working lives?
- How can public and private sectors provide support and value across the life course?

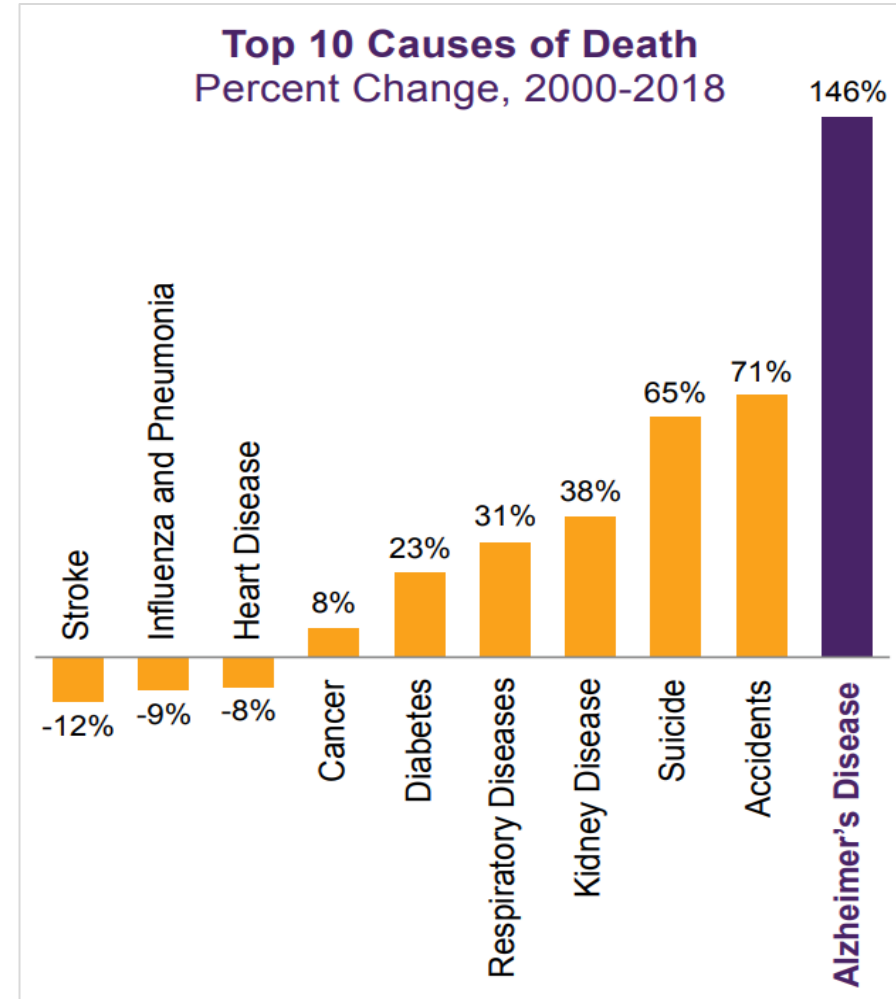


- Chronic disease
- Financial insecurity
- Housing insecurity
- Long term care
- Social isolation
- SDOH
- Ageism

# Chronic Disease Increases with Age

## Alzheimer's Disease

- Alzheimer's disease is the **6<sup>th</sup>** leading cause of death in the United States
- An estimated **7 million** Americans are living with Alzheimer's and related dementias  
**127,000** people in WA
- **16 million** Americans provide unpaid care for people with Alzheimer's disease or other dementias  
**247,000** family caregivers in WA
- **\$600B** value of unpaid care  
**\$9.4B** in value of unpaid care in WA



## Disruptors

- Chronic disease
- Financial insecurity
- Housing insecurity
- Long term care
- Social isolation
- SDOH
- Ageism

# Chronic Disease Increases with Age

## Alzheimer's Disease

### WA State

W



Dr. Barak Gaster

Guiding an Improved Dementia Experience (GUIDE) Model



### National

Healthy Brain Initiative (HBI)



HEALTHYBRAIN INITIATIVE  
State and Local Road Map  
for Public Health, 2023–2027



### Leading States

CA



WI



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Aging and  
Longevity



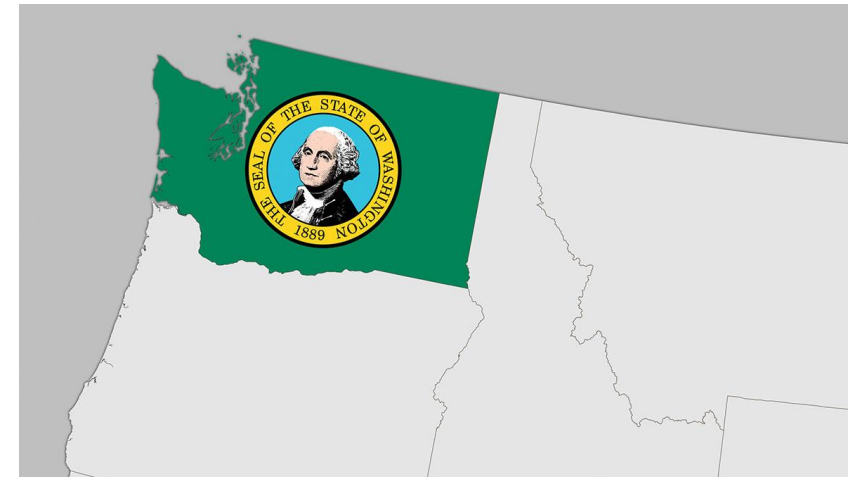
georgia  
memory net

- Chronic disease
- Financial insecurity**
- Housing insecurity
- Long term care
- Social Isolation
- SDOH
- Ageism

# Financial **In**security: Retirement Savings

- Nearly half of Americans do not have access to an employer-sponsored retirement plan
- A typical American with savings and home equity, aged 65–74, has median financial assets of just \$109,750 and only \$86,800 in home equity.
- Roughly 1 in 7 Social Security recipients age 65+ rely on Social Security for 90% of their income

## Washington Saves Program





# Housing Insecurity + Long-Term Care

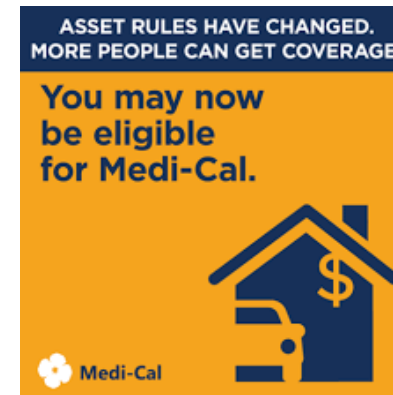
## Disruptors

- Chronic disease
- Financial insecurity
- Housing insecurity
- Long term care
- Social Isolation
- SDOH
- Ageism

- **72%** of middle-income older adults will be unable to afford the health, personal care, and housing services they need by 2033
- **76%** of US. adults aged 50+ want to remain in their community.
- **< 4%** of homes in the US offer 3 foundational features of accessible housing



state-run long-term care benefit program



Starting January 1, 2024, assets, such as bank accounts, cash, a second vehicle, and homes, will no longer be counted when determining Medi-Cal eligibility

## Disruptors

- Chronic disease
- Financial insecurity
- Housing insecurity
- Long term care
- Social Isolation**
- SDOH
- Ageism

# Social Isolation & Loneliness

## National Landscape



the same impact on health as smoking **15** cigarettes a day



**24%** of aging Americans affected†



**32%\*** increase in risk of stroke



**>\$6.7B** spent by Medicare per year



**50%\*\*** increase in risk of dementia

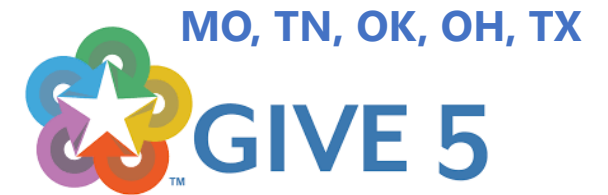


additional skilled nursing facility spending and costly hospital stays‡

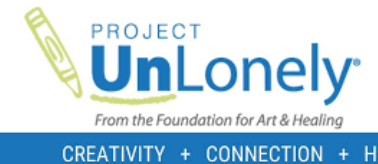
Summit on Aging and Longevity

## State & Local Solutions

- Volunteerism



- Creative & Cultural Arts



- Technology

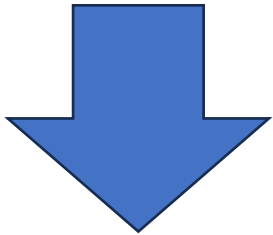


# SDOH: Transportation

## Disruptors

- Chronic disease
- Financial insecurity
- Housing insecurity
- Long term care
- Social Isolation
- SDOH
- Ageism

More than **1 in 5** with limited public transit access forego because of transportation barriers



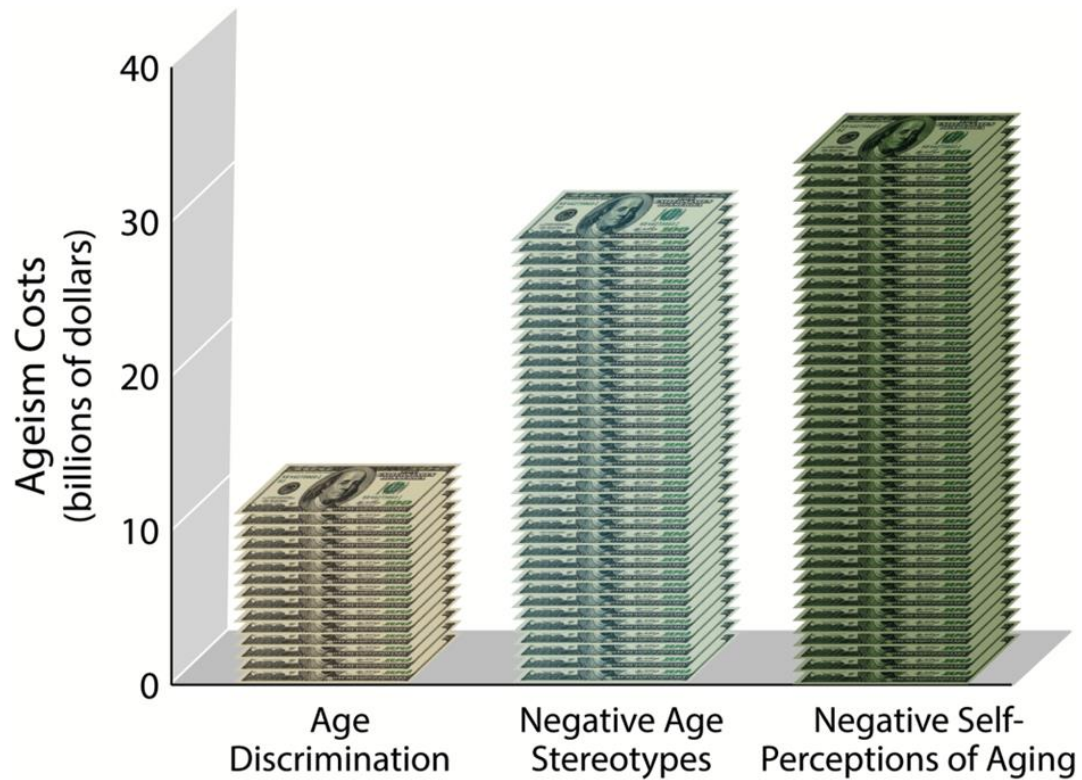
Use of 1115 Medicaid waivers for non-emergency medical transport

Uber  
Health

lyft healthcare

# Ageism

Ageism accounts for approximately \$63 billion in annual healthcare costs



# WHAT IS NOW? WHAT COULD BE?

Public Health  
Initiatives Adding  
Years to Life

*What is needed to  
improve the quality of  
those years?*



**Rita Noonan**  
**Centers for Disease Control  
and Prevention**

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# **Adding Years to Life and Life to Years: A Public Health Approach to Healthy Aging**



Rita K. Noonan, PhD

Division of Population Health

National Center for Chronic Disease  
Prevention and Health Promotion

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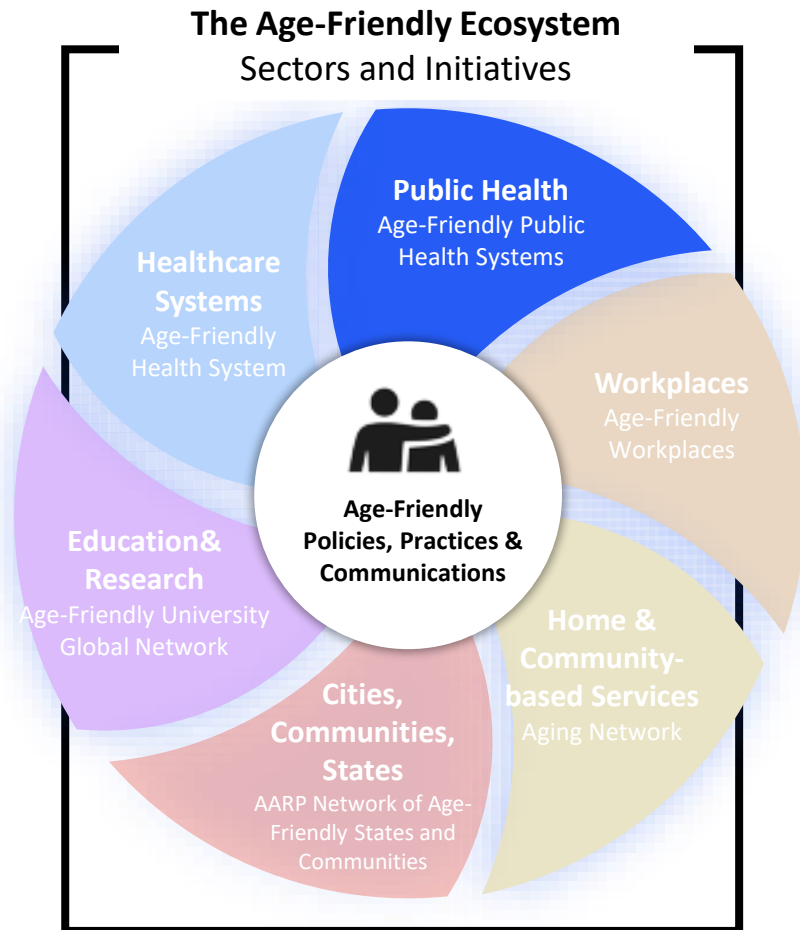
Graphic adapted from de Beaumont Foundation and Trust for America's Health. (January 2019)  
 "Social Determinants and Social Needs: Moving Beyond Midstream"



**POWER**  
**OF PUBLIC**  
**HEALTH**

Summit on  
**Aging and  
Longevity**





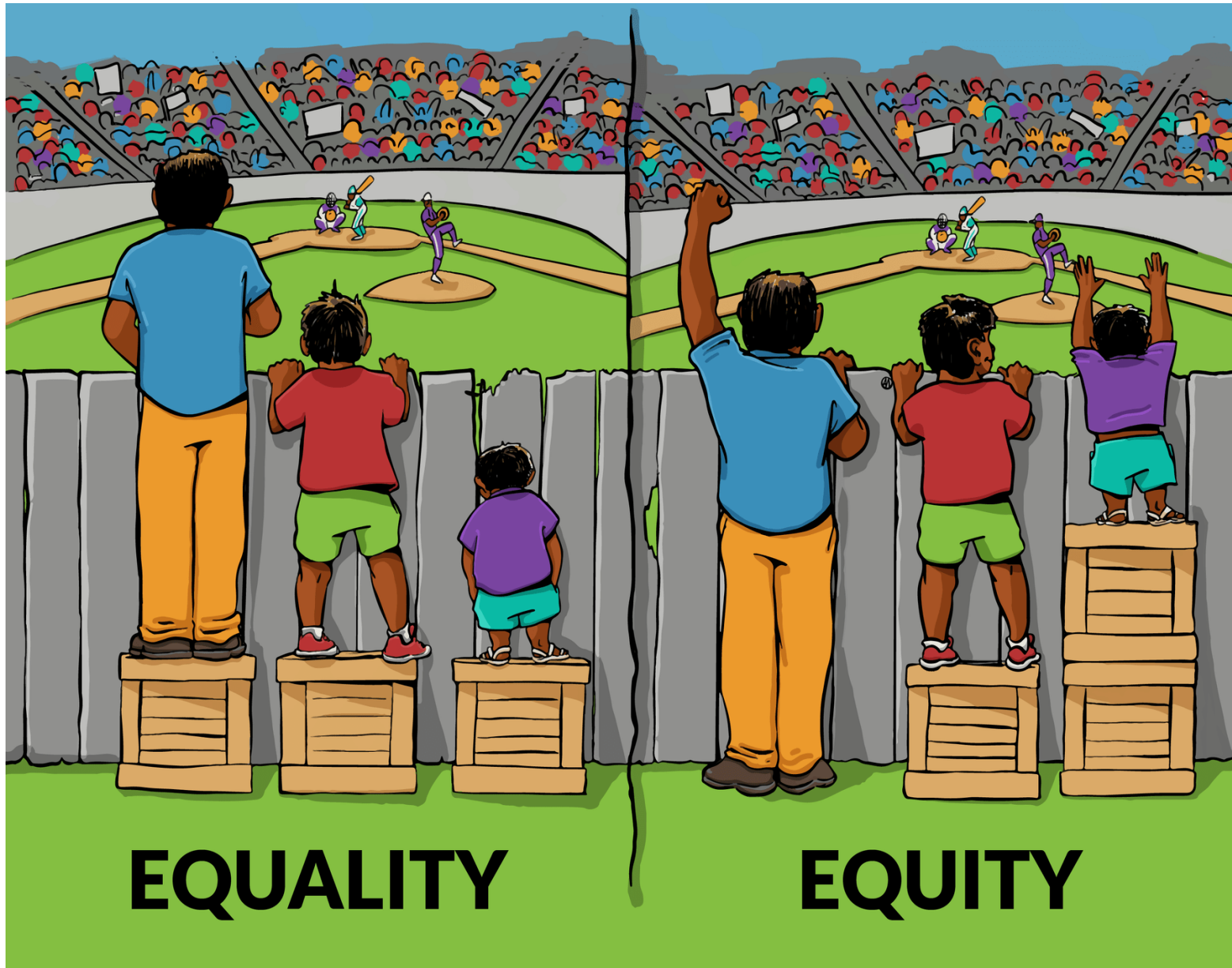
## Trust for America's Health (TFAH)

TFAH envisions integrating public health into the broader age-friendly ecosystem through the Age-Friendly Public Health Systems (AFPHS) movement. The AFPHS 6Cs Framework is the foundation for expanding public health practice in healthy aging through policy change, enhanced data collection, multi-sector collaboration, and effective communication. TFAH also awards permanent recognition to individuals, health departments, and other organizations that demonstrate leadership in these areas.

- 6Cs Framework: Creating & Leading, Convening, Coordinating, Collecting, Communicating, Completing
- Individual, departmental, and organizational recognitions

### Links:

- [Age-Friendly Public Health Systems - Trust for America's Health \(afphs.org\)](https://afphs.org)
- [AFPHS Recognition Program - Age-Friendly Public Health Systems](#)




**EQUALITY**

**EQUITY**

# Health Impact Pyramid



Frieden T. American Journal of Public Health | April 2010, Vol 100, No. 4



What can your organization do in the next 6 months to move upstream, focusing on equity and health impact?

# WHAT IS NOW? WHAT COULD BE?

Promoting Healthy  
Aging Through the  
Life Course

*WA State Initiatives  
Moving Us Forward*



**Dr. Umair Shah**  
**Director, Washington**  
**Department of Health**



# *Health*

*Where **Equity,**  
**Innovation** and  
**Engagement** meet*

# What is Public Health?

“What we as a society do *collectively* to assure the conditions in which people can be healthy.”

- *The future of the Public's Health in the 21<sup>st</sup> Century, Institute of Medicine, 2003*



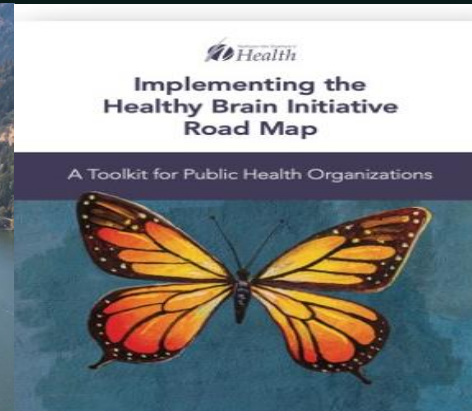
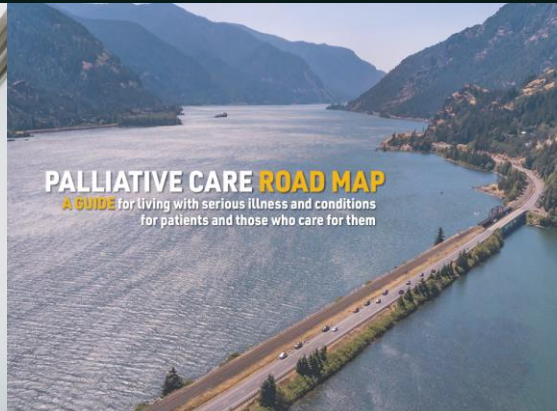
# A Culture of Healthy Aging in Public Health

- Encouraging wellness and preventing disease throughout every stage of life is essential for maintaining health as we advance in age.
  - Healthy aging begins early in life.
  - Improving older adult health and well-being impacts all of society and individuals of all ages.
- Health disparities that are experienced earlier in life are often made worse later in life.



# PH Support from Pre-natal to End-of-life Care

- Heart Disease
- Stroke
- Diabetes
- Injury Prevention
- Palliative Care Road Map
- Health Systems in Rural and Underserved Communities



# DOH Focus on Alzheimer's Disease and Other Dementias

- Gov appointee on WA Dementia Action Collaborative.
- Dedicated to implementing PH recommendations to address Alzheimer's disease and other dementias.
- Digital awareness campaigns focused on dementia early detection and planning, with a specific focus on racial and ethnic communities.
- TFAH Age-Friendly PH Systems-State Expansion
  - DOH led an Age-Friendly Public Health Systems Advisory Committee and Learning & Action Network (This work continues to build in WA).

The screenshot shows the Washington State Department of Health website. The main content area is titled "Dementia" and includes the following text:

As we age, many of us experience some memory loss. Sometimes that's normal — and sometimes it's a sign of a dementia or other health problems.

Dementia is not one specific disease. It's a broad term for an impaired ability to remember, think or make decisions severe enough to interfere with daily life and activities.

For many of us, dementia is a frightening word. When we notice signs of memory loss in ourselves, we might fear losing independence or worry others will see us as less capable. We might wonder how our families will cope. But early detection makes a big difference in improving quality of life and managing symptoms. It also can make it easier for families to get community support and access resources they need.

Below the text is a video player for "Understanding Memory Loss" by the Washington State Department of Health. To the right of the video is a section titled "Early detection helps make life better" with the following bullet points:

- With early detection, you have more options for staying healthy, maintaining independence, and getting support. You can:
  - Access important resources and programs for people with memory loss and their families.
  - Identify, treat or reverse conditions. Memory loss may be caused by factors such as a medication or a health condition that can be treated.
  - Make lifestyle changes or get medications that help manage your symptoms.
  - Get support and guidance from organizations that help people and families living with dementia. This can include help with long term planning.
  - Find out what's going on with you. When you know the cause of your memory loss, you can learn what to expect and how to cope. You can also start building your support network.

The infographic is titled "Signs of dementia vs. normal aging". It lists various signs of dementia and compares them to normal aging. Each sign is accompanied by a small icon.

**Signs of dementia vs. normal aging**

Memory loss that disrupts daily life may be a symptom of dementia. If you notice any of these 9 signs or symptoms, don't ignore them. Have a conversation with your family, and make an appointment with your health care provider.

Sign of Dementia	Normal Aging
<b>Memory loss that disrupts daily life.</b> Forgetting new information or dates or events. Repeating questions. <b>Typical age-related change:</b> Temporarily forgetting names or appointments.	<b>Trouble making or following plans or solving problems.</b> It's harder to work with numbers, follow a recipe or keep track of bills. Difficulty concentrating. <b>Typical age-related change:</b> Occasional errors managing bills.
<b>Difficulty with familiar tasks.</b> Trouble driving to a familiar location, making a grocery list or remembering rules to a game. <b>Typical age-related change:</b> Occasionally needing help recording a TV show.	<b>Confusion about time or place.</b> Losing track of dates and seasons. Forgetting where you are or how you got there. <b>Typical age-related change:</b> Forgetting the day of the week but figuring it out later.
<b>Changes in mood and personality.</b> Confusion, suspicion, depression, fear or anxiety. Easily upset at home, with friends or outside comfort zone. <b>Typical age-related change:</b> Developing specific ways of doing things, and becoming irritable when a routine is disrupted.	<b>Problems with words.</b> Trouble following or joining a conversation or naming familiar objects. Stopping mid-conversation and being unable to continue, or repeating yourself. <b>Typical age-related change:</b> Sometimes having trouble finding the right word.
<b>Losing things without being able to retrace steps to find them.</b> Putting objects in unusual places. <b>Typical age-related change:</b> Misplacing things but retracing steps to find them.	<b>Decreased or poor judgment.</b> Changes in decision-making. Paying less attention to grooming. <b>Typical age-related change:</b> Making a bad decision or mistake once in a while.

# DOH Age-And-Dementia-Friendly State Designation for Washington from AARP and USAging.

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Beginning this fall, this work will help us:

- Build active engagement with older adults in all programming;
- Establish and advocate for policies, systems, and environments that embed aging strategies into statewide and local initiatives
  - Reduce stigma and ageism of older adults, people living with dementia, and their care partners; and
  - Improve Medicaid savings by supporting health at all ages.





**CORNERSTONE VALUES:** EQUITY • INNOVATION • ENGAGEMENT  
**VISION:** EQUITY AND OPTIMAL HEALTH FOR ALL



**OUR PRIORITIES AND VISION FOR TRANSFORMATIONAL HEALTH**



**I. HEALTH AND WELLNESS**

All Washingtonians have the opportunity to attain their full potential of physical, mental, and social health and well-being.



**II. HEALTH SYSTEMS AND WORKFORCE TRANSFORMATION**

All Washingtonians are well served by a health ecosystem that is robust and responsive, while promoting transparency, equity, and trust.



**III. ENVIRONMENTAL HEALTH**

All Washingtonians will thrive in a broad range of healthy environments — natural, built, and social.



**IV. EMERGENCY RESPONSE AND RESILIENCE**

All Washington communities have the information and resources they need to build resilience in the face of myriad public health threats and are well-positioned to prepare for, respond to, and recover from emergencies and natural disasters.



**V. GLOBAL AND ONE HEALTH**

All Washingtonians live in ever-connected environments that recognize and leverage the intersection of both global and domestic health as well as the connections of humans, animals, and the environment.

**TRANSFORMATIONS IN ACTION**



INNOVATION AND TECHNOLOGY



COMMUNITY CENTERED



VISIBILITY AND VALUE



EQUITY DRIVEN



COLLABORATIVE ENGAGEMENT

**CORNERSTONE VALUES:** EQUITY • INNOVATION • ENGAGEMENT  
**VISION:** EQUITY AND OPTIMAL HEALTH FOR ALL

# Key Take Aways

- Continue to educate the health ecosystem about topics relating to health promotion throughout the lifespan.
- Create inclusive communities where people of all backgrounds and ages can be as healthy as possible.
- Coordinate and collaborate across multiple sectors to address the intersecting needs of an aging population.





IN IT TOGETHER!

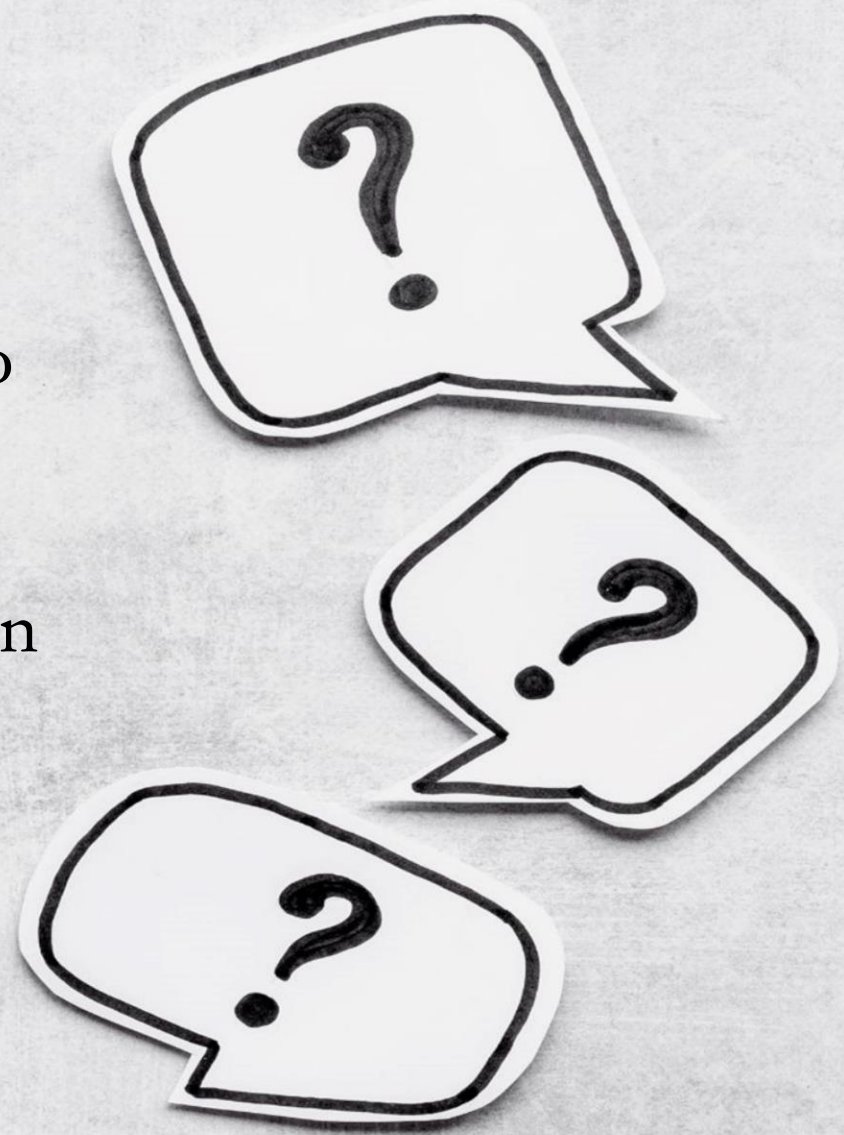
Umair A. Shah, MD, MPH  
360-236-4030  
Secretary@doh.wa.gov

Twitter:  
@WaHealthSec  
@WADeptHealth  
@ushahmd



What can your agency or organization do to become adaptable to address aging?

For example, there is a connection between housing and transportation that can help reduce social isolation.



# WHAT IS NOW? WHAT COULD BE?

Washington State  
Population Data,  
Forecasts & Impacts

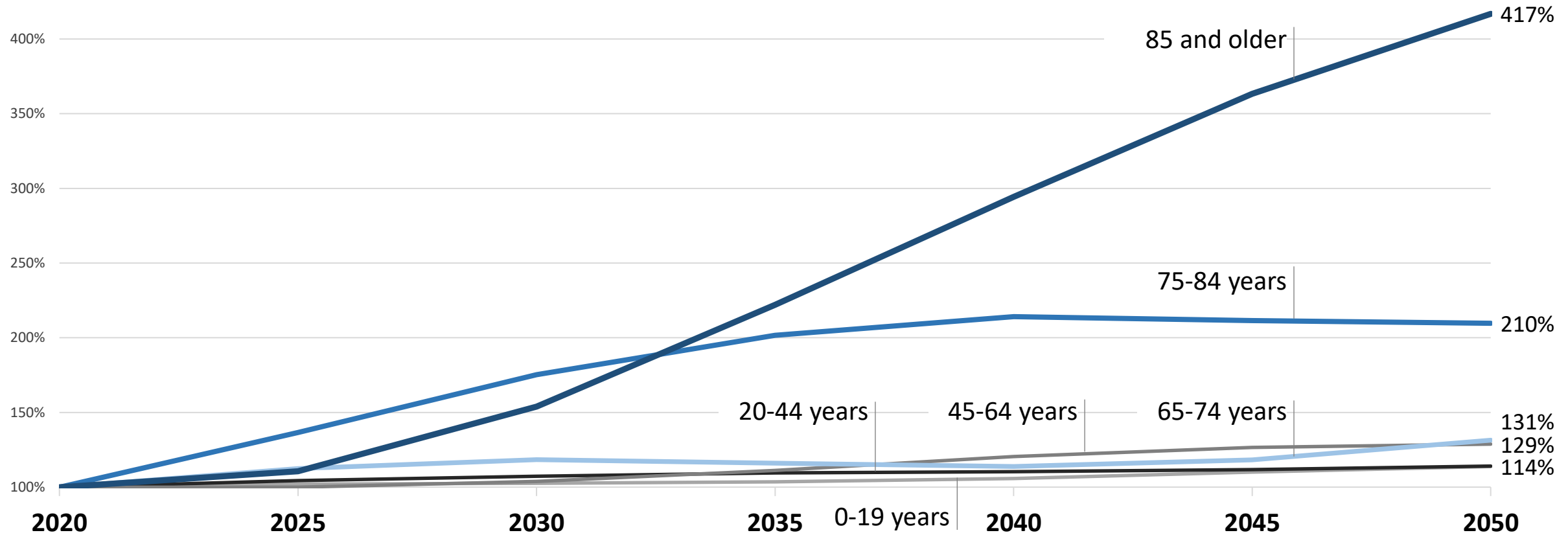


**David Mancuso**  
**Department of Social  
& Health Services**



# The Population of Washingtonians Aged 85+ Will Quadruple from 2025 to 2050

## Growth in Washington State Population by Age Range Relative to 2020

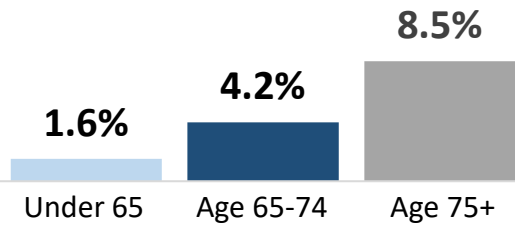


SOURCE: Washington State Office of Financial Management, Statewide Population Forecast, Accessed April 2024.

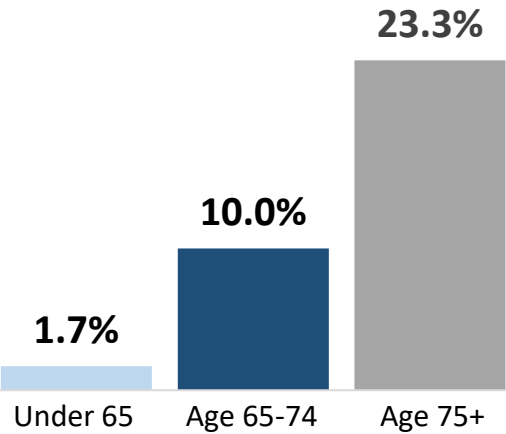
# The Likelihood of Needing Services to Help with Disabilities Increases with Age

Percent of 2022 Washington State population with . . .

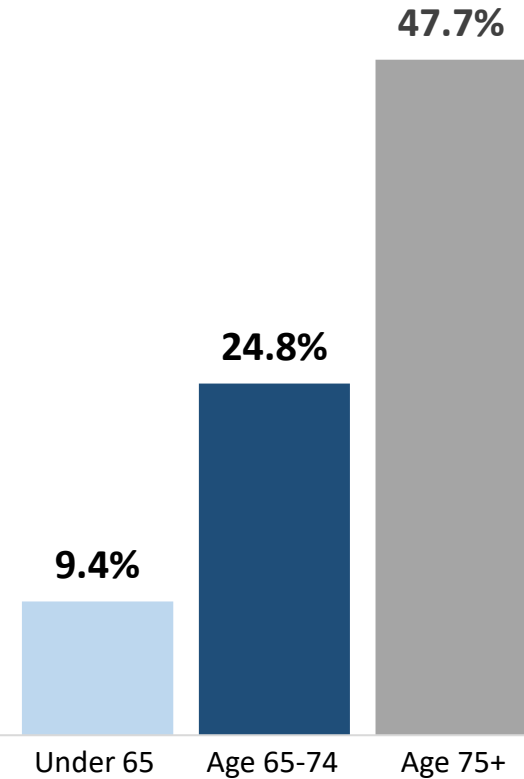
Vision Difficulty



Hearing Difficulty



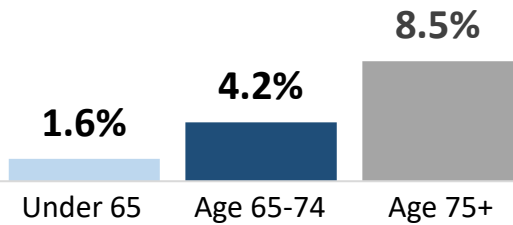
Any Disability



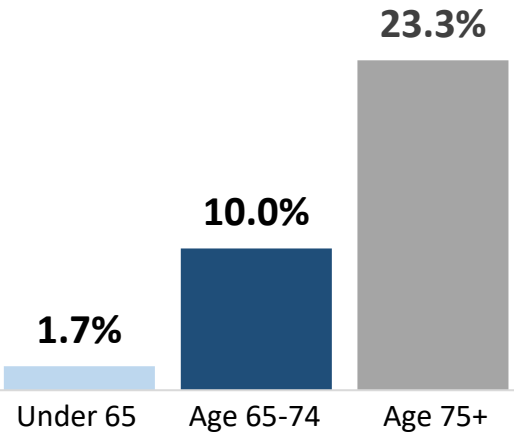
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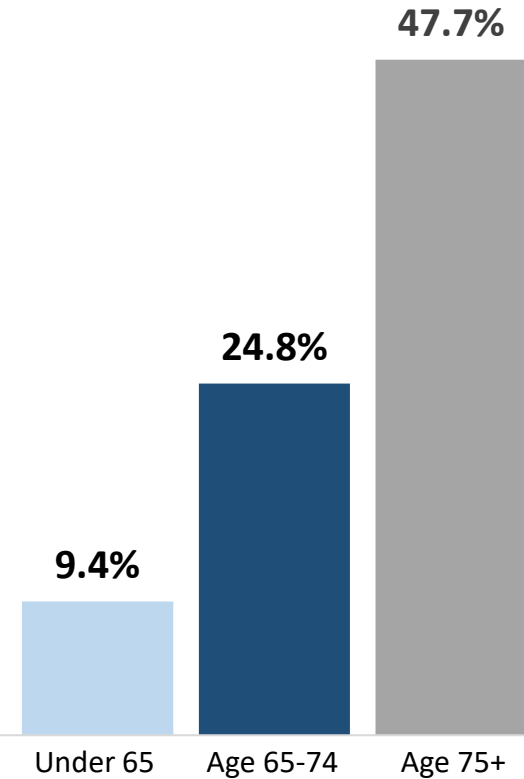
Vision Difficulty



Hearing Difficulty

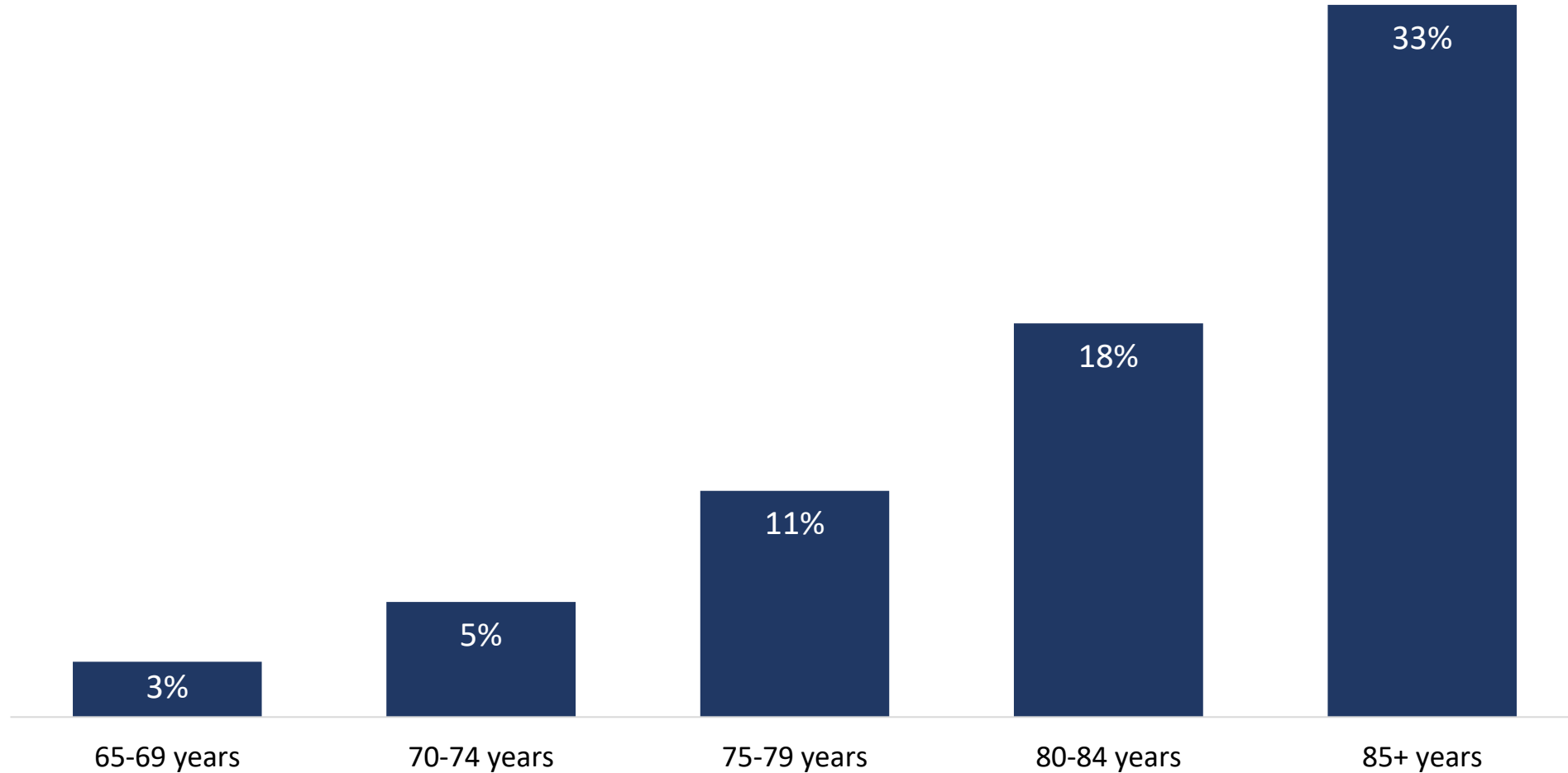


Any Disability



# The Risk of Dementia Increases with Age

Dementia Prevalence Among Washington State Medicare Beneficiaries Ages 65 and Above in 2018



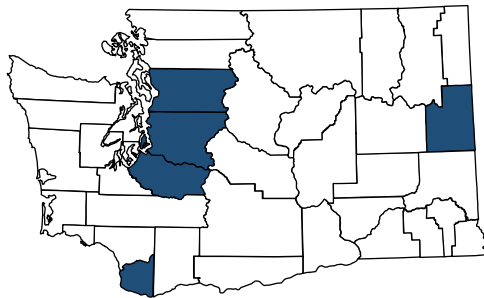
SOURCE: DSHS Research and Data Analysis, Integrated Client Databases.

# Impact of the Age Wave

**Q** *Which areas of the state will feel the greatest impact?*

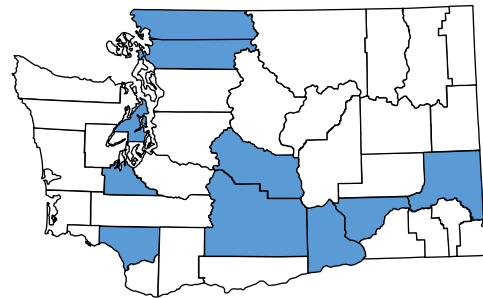
## URBAN

Clark, King, Pierce, Snohomish, Spokane



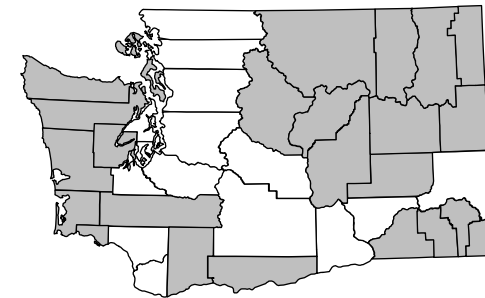
## SUBURBAN

Benton, Cowlitz, Franklin, Kitsap, Kittitas, Skagit,  
Thurston, Whatcom, Whitman, Yakima



## RURAL

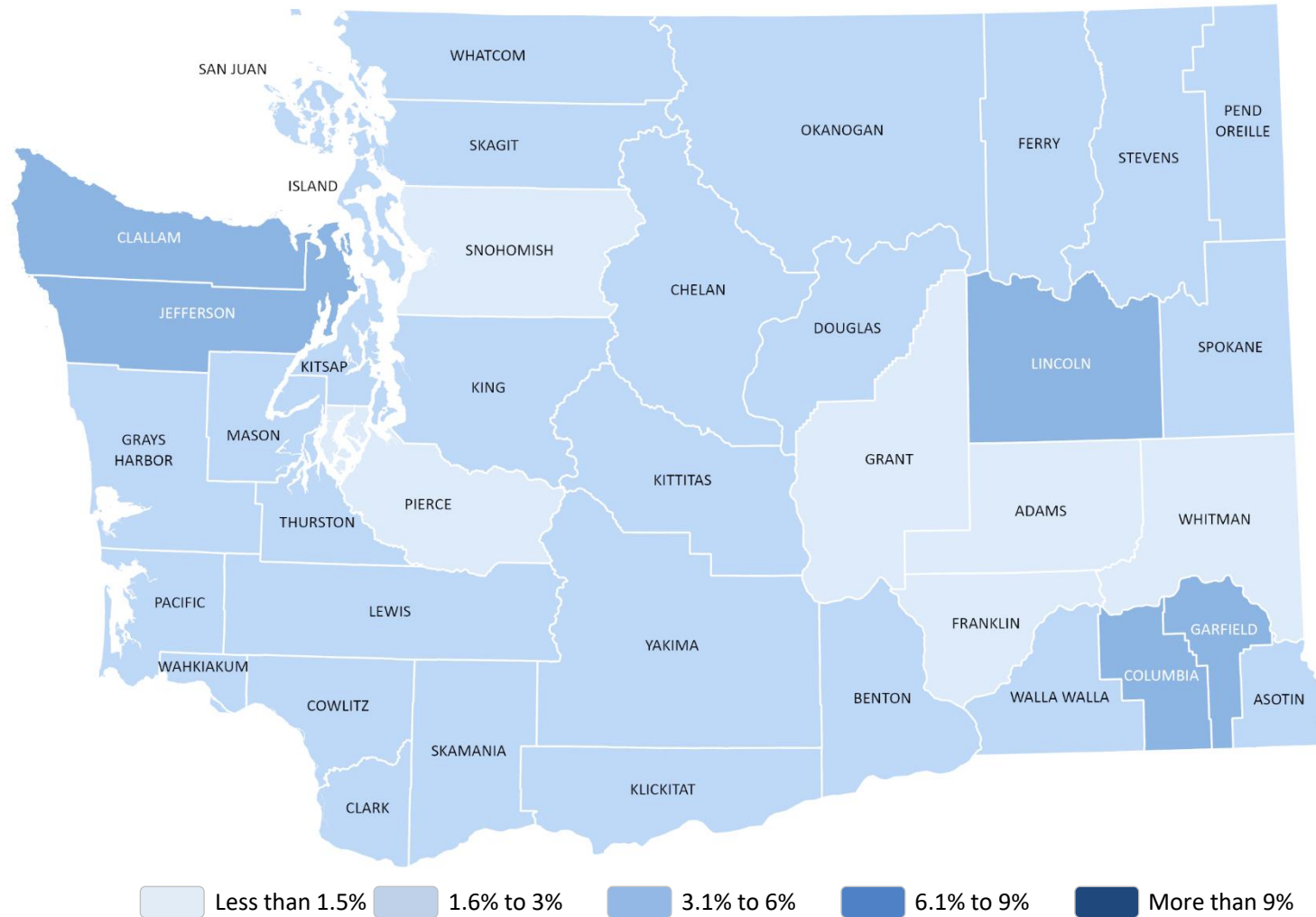
Adams, Asotin, Chelan, Clallam, Columbia, Douglas,  
Ferry, Garfield, Grant, Grays Harbor, Island,  
Jefferson, Klickitat, Lewis, Lincoln, Mason, Okanogan,  
Pacific, Pend Oreille, San Juan, Skamania, Stevens,  
Wahkiakum, Walla Walla



# Persons 85+ as a Percentage of County Population

## 2020

Estimates and Projections by County



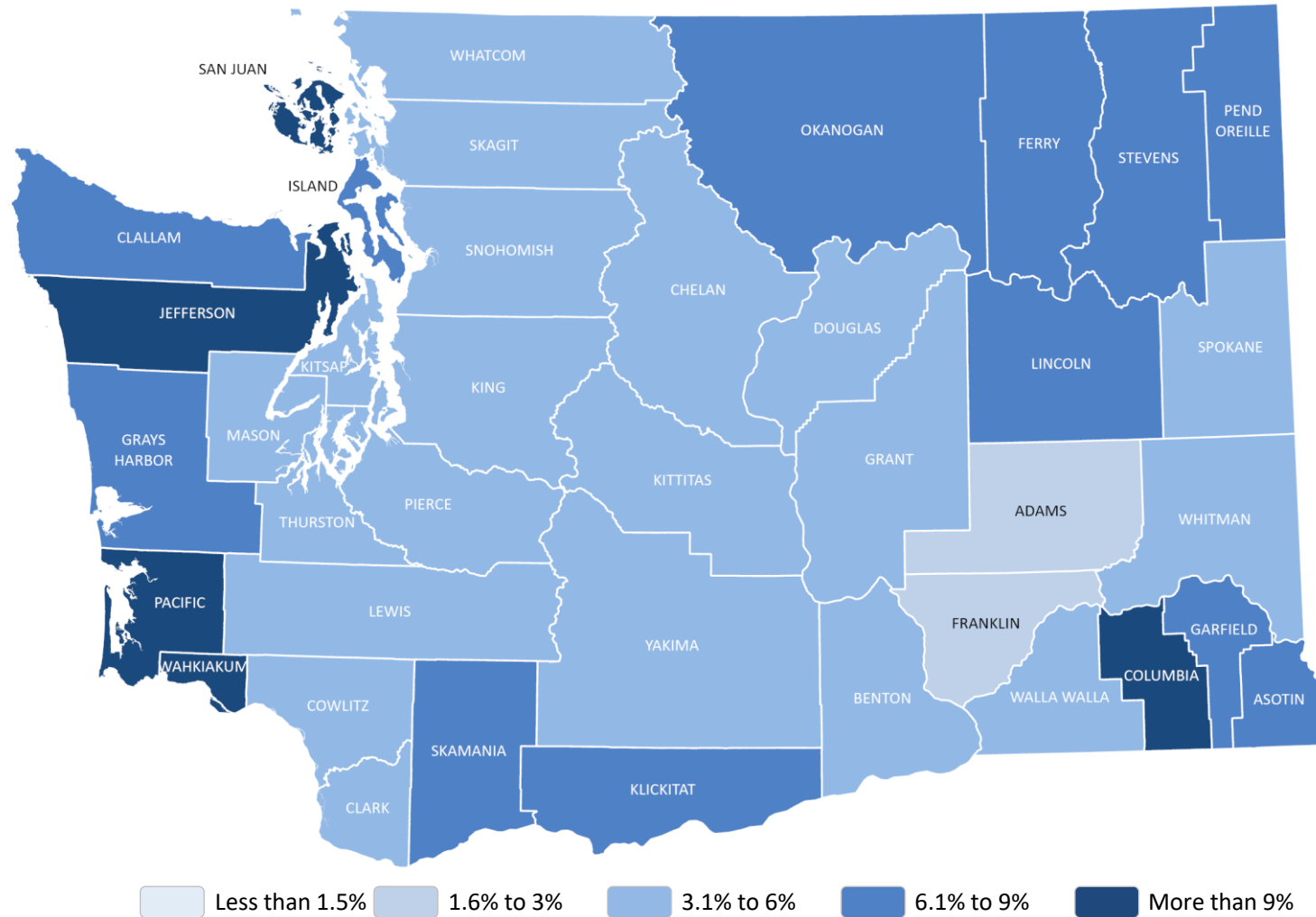
**SOURCES:** Washington State Office of Financial Management, Forecasting and Research Division.  
Growth Management Act Population Projections for Counties: 2020 to 2050, February 2023.



# Persons 85+ as a Percentage of County Population

## 2040

Estimates and Projections by County



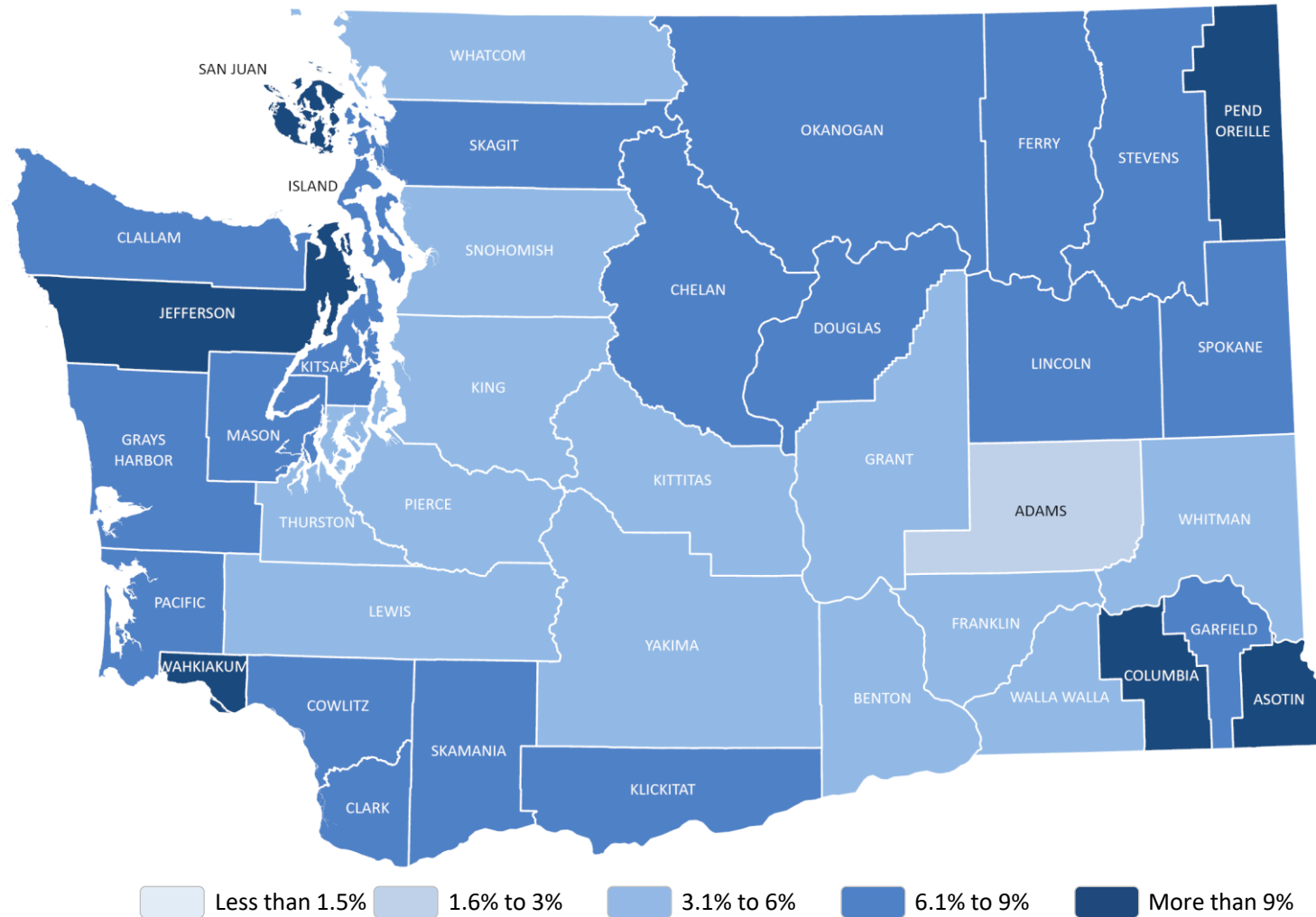
**SOURCES:** Washington State Office of Financial Management, Forecasting and Research Division.  
Growth Management Act Population Projections for Counties: 2020 to 2050, February 2023.



# Persons 85+ as a Percentage of County Population

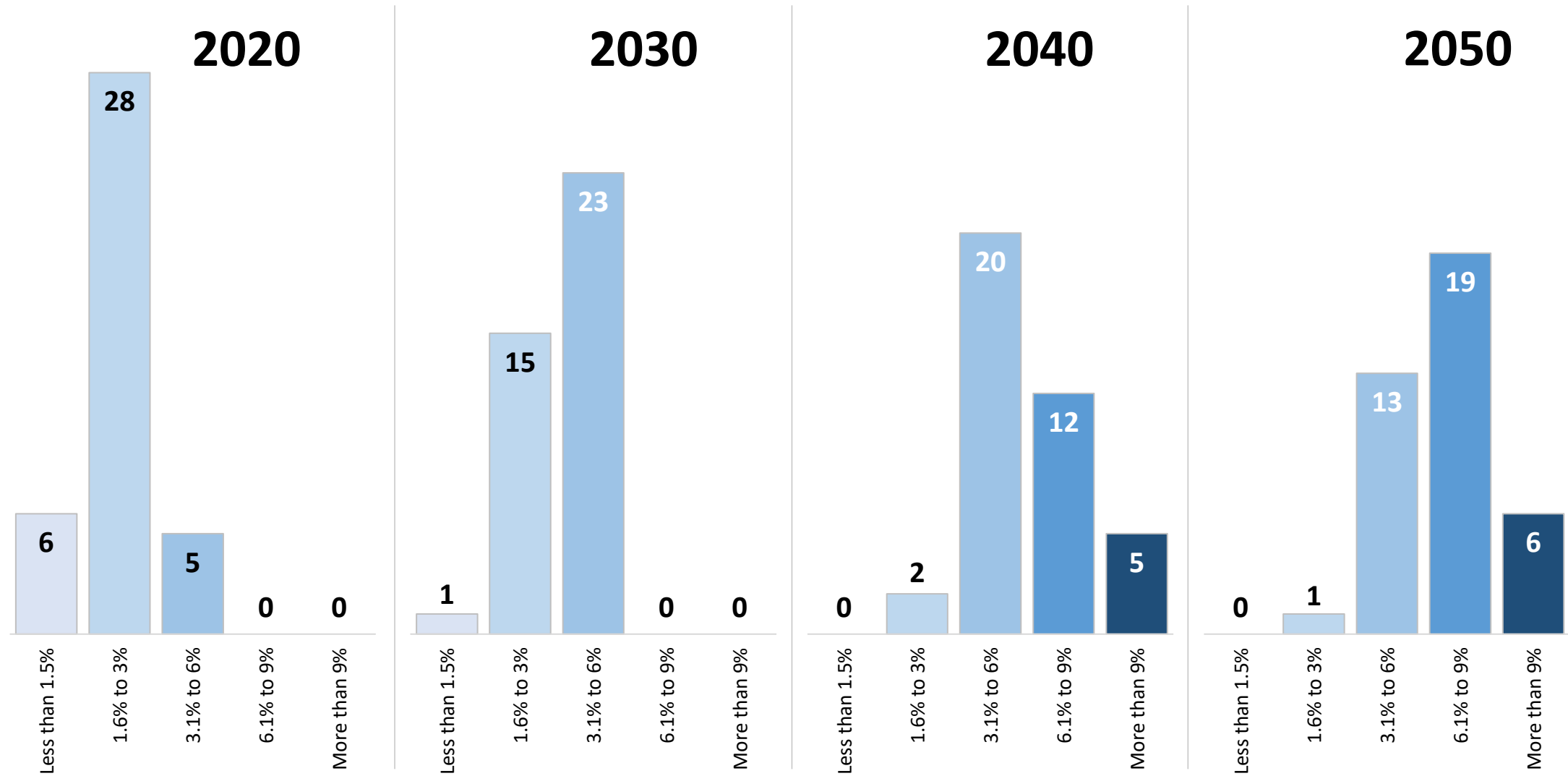
## 2050

Estimates and Projections by County



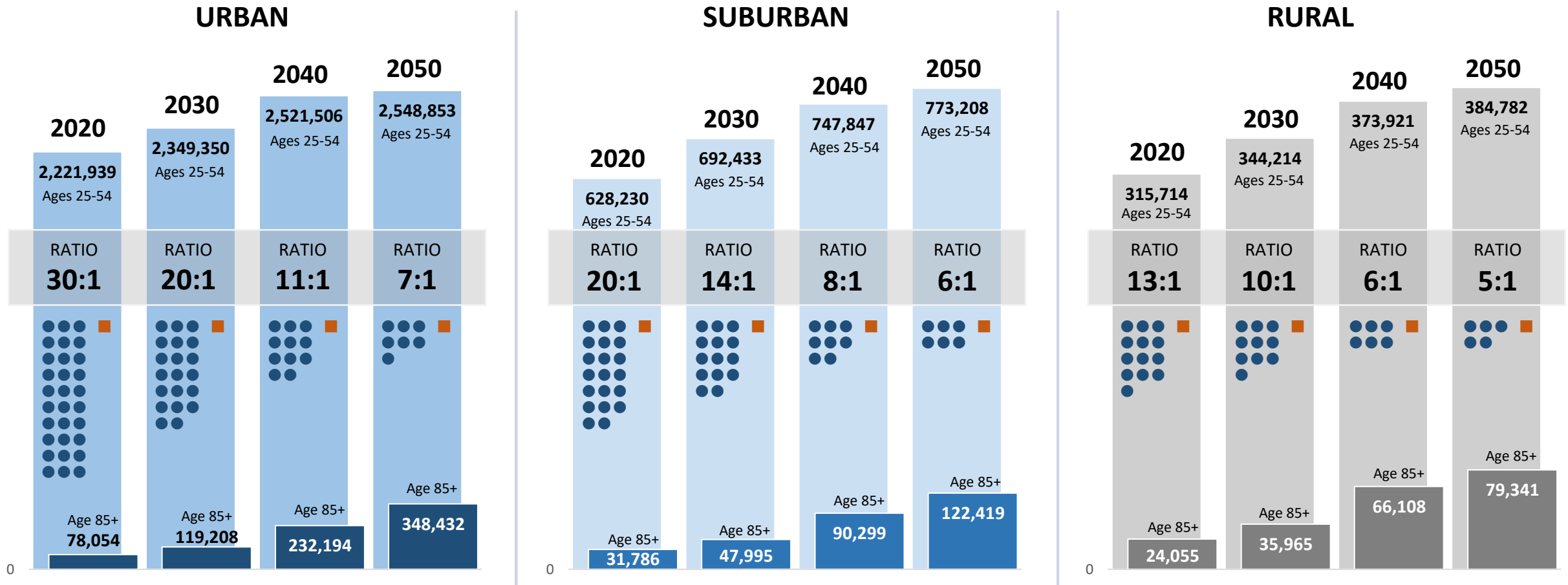
**SOURCES:** Washington State Office of Financial Management, Forecasting and Research Division.  
Growth Management Act Population Projections for Counties: 2020 to 2050, February 2023.

# Distribution of Counties by Persons 85+ as a Percentage of Total Population



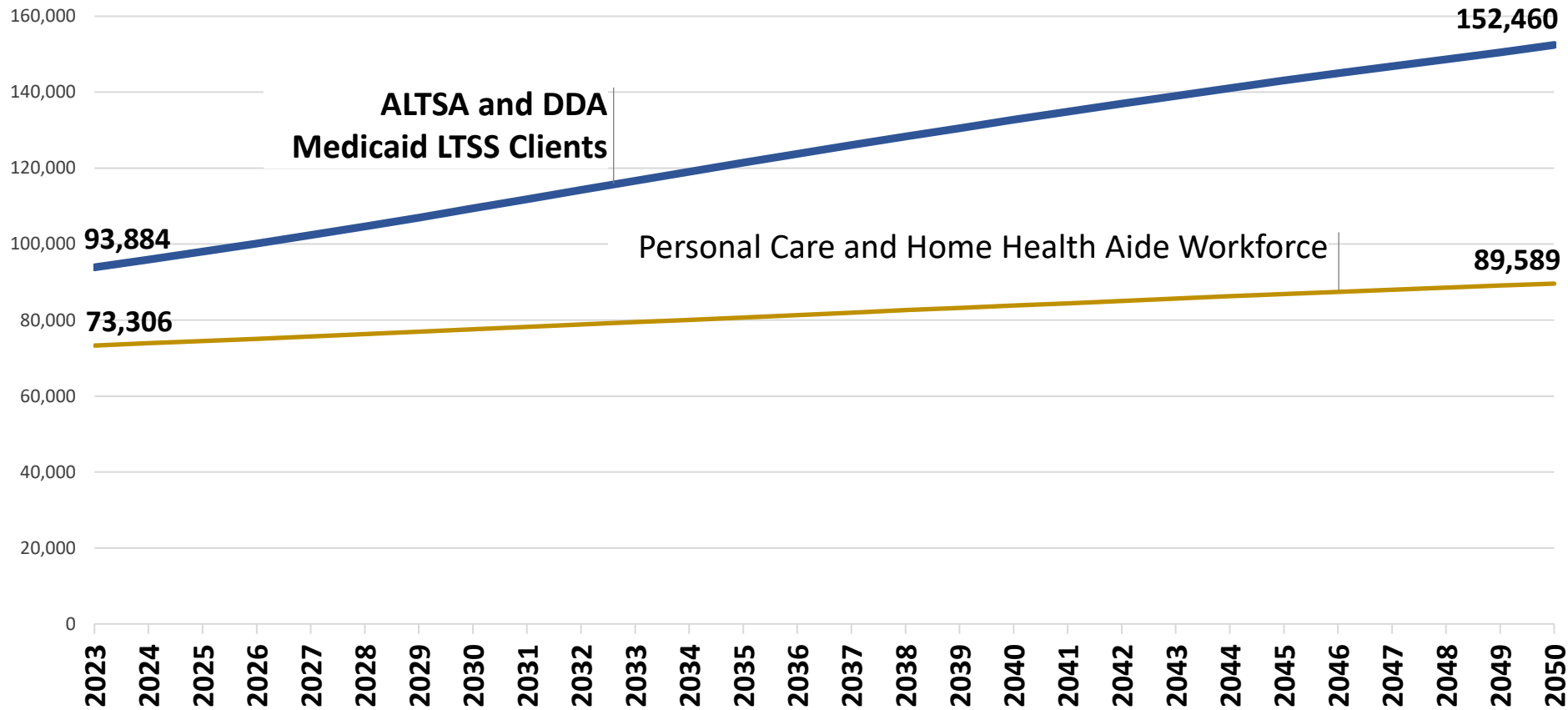
**SOURCES:** Washington State Office of Financial Management, Forecasting and Research Division.  
Growth Management Act Population Projections for Counties: 2020 to 2050, February 2023.

# The ratio of persons ages 25 to 54 relative to persons 85 and older will dramatically decrease

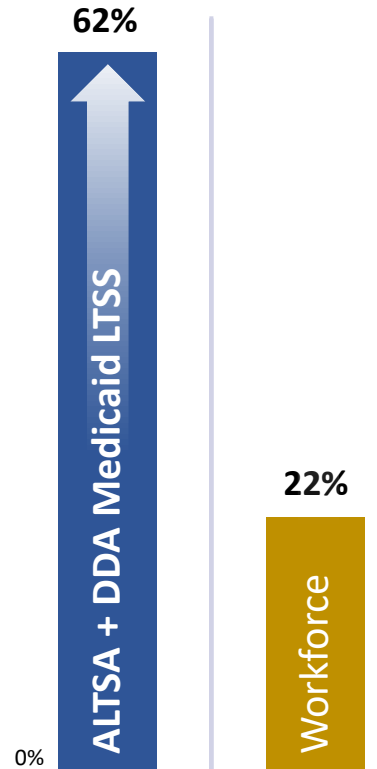


SOURCE: Washington State Office of Financial Management, Forecasting and Research Division. State population forecast

# Medicaid LTSS Caseload and Statewide Workforce Forecasts



Percent Increase in 2050 Relative to 2023



SOURCE: Washington State Department of Social and Health Services, Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, April 2024.

# WHAT IS NOW? WHAT COULD BE?

## Challenge Questions:

1. What could be done to help people plan financially for longer life spans (i.e., life after retirement, long-term care)?
2. What proactive steps can be taken by your organization to improve health and quality of life for all Washingtonians over the life course?
3. What might your agency or organization do to become adaptable to address aging? For example: there is a connection between housing and transportation to help reduce social isolation.
4. What kind of information do you need to start planning for the growth of the older adult population, specific to your sector?

# WHAT COULD BE?

## Re-framing Aging Movement



**Patricia D'Antonio**  
**National Center to**  
**Reframe Aging**

# Are you part of the aging population?

# National Center to Reframe Aging

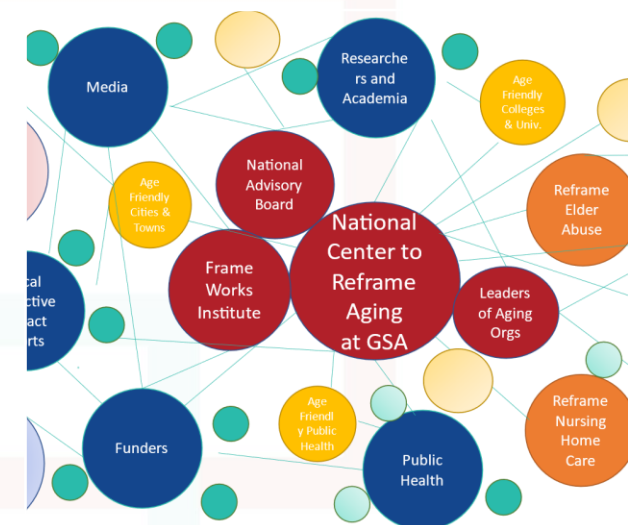


Climb aboard the caravan!  
#ReframeAging

Dedicated to reshaping the conversation about aging

## Core Elements of Reframing Aging Workshop

Trusted source for proven communication strategies



Cultivating a movement

[ReframingAging.org](https://ReframingAging.org)



# Leaders of Aging Organizations



american federation  
for aging research



Leading Change. Improving Care for Older Adults.



# Funding Provided by:



The  
**John A. Hartford**  
Foundation



**RRF** | Foundation  
for Aging



**ARCHSTONE**  
FOUNDATION

# Research Partner



- Nonprofit think tank with the mission to advance the nonprofit sector's capacity to reframe social issues.
- Conducts original, scholarly research on the communications aspects of social and scientific issues.
- Recognized in 2015 with the MacArthur Award for Creative and Effective Institutions.
- Original research conducted by FrameWorks Institute Distributed for educational purposes by the National Center to Reframe Aging

[ReframingAging.org](https://ReframingAging.org)

# Ageism Defined

**Ageism exists in several forms**

- Stereotypes: *How we think*
- Prejudices: *How we feel*
- Discrimination *How we act*

**Ageism exists on multiple levels**

- Interpersonal
- Compassionate
- Systemic/ Institutional
- Self-directed

Health

### Who gets a shot at life if hospitals run short of ventilators?

Pregnant women would get extra priority "points" in most if not all plans, U.S. hospital officials and ethicists say. This is not controversial.

The elderly, people with terminal cancer and those with chronic conditions, on the other hand, fare poorly in many plans, as do people with disabilities.

Issues More Content Submit Purchase Advertise About

Article Contents

Abstract

ACCEPTED MANUSCRIPT

### Culture Linked to Increasing Ageism during Covid-19: Evidence from a 10-billion-word Corpus across 20 Countries

Reuben Ng, PhD, Ting Yu Joanne Chow, BA (Hons. First Class), Wenshu Yang, MSc

USA TODAY COVID-19 Comparing vaccines HERE COME THE CICADAS Tracking Brood X COVID-19 BY STATE Track vaccinations

[ News ] Sports Entertainment Life Money Tech Travel Opinion

NATION

### Texas' lieutenant governor suggests grandparents are willing to die for US economy

Adrianna Rodriguez USA TODAY  
Published 9:14 a.m. ET Mar. 24, 2020 | Updated 11:50 a.m. ET Mar. 24, 2020

Facebook Twitter Email

ADVERTISING

### Older People Are Ignored and Distorted in Ageist Marketing, Report Finds



# Why We Need a New Story

Sign In Search

True Jersey.

OPINION

### The Silver Tsunami is here! Who will care for these aging Baby Boomers?

# OK BOOMER

“What Time  
is That on  
Netflix?”



AND OTHER DAILY STRUGGLES



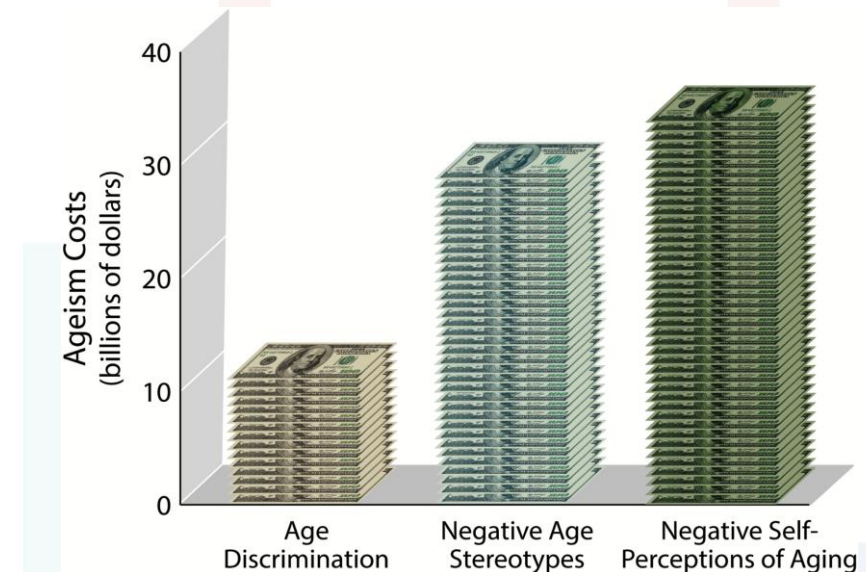
The Getting-Off-The-Couch contest is  
the highlight of any birthday celebration.

## Everyday Messages

# Ageism's Impact on Health

- 1-year cost of ageism \$63 billion
- \$1 in every \$7 spent for 8 most expensive health conditions
- Negative attitudes and beliefs

**Figure 1.** Health care costs of age discrimination, negative age stereotypes, and negative self-perceptions of aging in ...



*Gerontologist*, Volume 60, Issue 1, February 2020, Pages 174–181,  
<https://doi.org/10.1093/geront/gny131>

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UNIVERSITY PRESS

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please see the slide notes for details.

# Implicit Bias Defined

Implicit bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.

The Kirwan Institute for the Study of Race and Ethnicity

**Simply being aware of our implicit bias reduces ageism.**

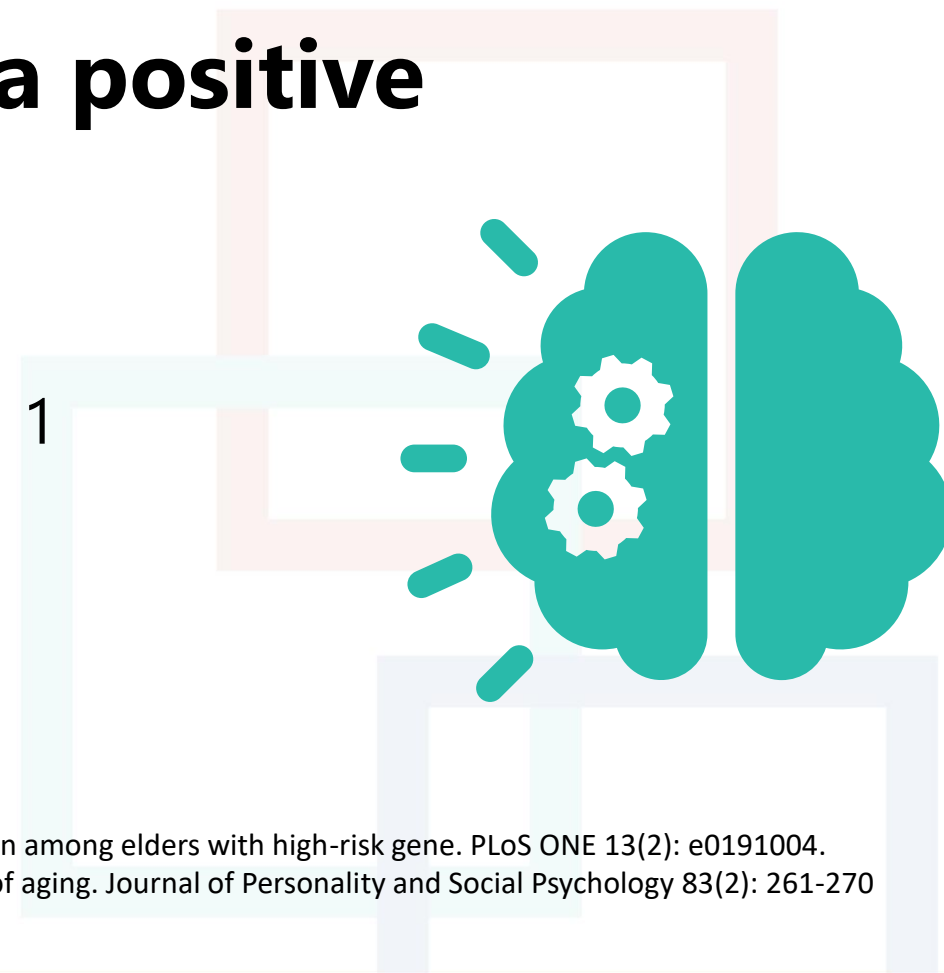
Busso DS, Volmert A, Kendall-Taylor N. "Reframing aging: Effect of a short-term framing intervention on implicit measures of age bias." *The Journals of Gerontology: Series B* 74.4 (2019): 559-564.



# The Power of Positive Thinking

## Positive age beliefs can have a positive impact on health by:

- reducing stress
- protecting against dementia <sup>1</sup>
- increasing longevity <sup>2</sup>



1. Levy BR, Slade MD, Pietrzak RH, Ferrucci L (2018) Positive age beliefs protect against dementia even among elders with high-risk gene. PLoS ONE 13(2): e0191004.

2. Levy BR, Slade MD, Kunkel SR, Stanislav V (2002) Longevity increased by positive self-perceptions of aging. Journal of Personality and Social Psychology 83(2): 261-270

To build awareness about ageism, answer these questions

**Have you seen ageism?**

**Have you experienced ageism?**

**Have you have perpetuated ageism?**

**What do we do about it?**

# Why Framing Matters

# Framing is About Choices!



**What to  
emphasize**



**How to  
explain it**



**What to leave  
unsaid**

# Shared Communications Lead to Systems Change



Communi-  
cations



Discourse



Thinking



Policy





Aging Field



Public



**Embrace**

How should we approach aging?

**Battle**

**Environments**

What determines outcomes and who is responsible?

**Individuals**

**Important concern**

How big of a concern is ageism?

**Absent from thinking**

**Plenty**

What can be done to ensure wellbeing in older age?

**Nothing much**

**Central**

What is the role of public policy?

**Limited role**

Why we need to reframe aging

# Navigating Public Understanding

# Navigating Understanding

## Traps to Avoid

### Individualism

- Lifestyle choices
- Financial Planning

### Ideal vs. Perceived Real

- **Ideal:**
  - Accumulated wisdom
  - Self-sufficiency
  - Staying active
  - Earned leisure
- **Real:**
  - Deterioration
  - Loss of control
  - Dependency
  - Determinism

### Nostalgia & Threat of Modernity

- Family dispersal
- Economic challenges
- Social Security is doomed

### Us vs. Them

- Older as “other”
- Zero Sum thinking
- Digital incompetence

### Solutions

- Fatalism/Crisis— nothing can be done
- Better individual choices and planning
- More education and information

## Strategies to Advance

### What Surrounds Us Shapes Us

- Our environments share our lives

### Collective Responsibility

- We are interconnected
- We can all help improve our communities

### Problems can be Solved

- We know how to effect positive change
- We can do it in on a large scale



# Frame of Mind:

**Frame of Mind:**  
**Starting Strong, Avoiding Traps**



## Traps to Avoid

**Individualism**

**Us vs. Them**

**Ideal vs. Perceived Real**

**Nostalgia & Threat of  
Modernity**

**Solutions**

To help your messages be understood as you intend, avoid these communication traps.

# **Strategies to Advance**

**Talk about the process of aging as building momentum**

**Explain the supports we need to live meaningful lives as we age**

**Talk about frailty without paternalism**

**Talk about ageism as a problem that can be solved**

**Highlight innovative and creative solutions**

To spark a more accurate and complete conversation about aging, **advance** these communication strategies.

# Strategies to ★ Advance

Talk about the process of aging as building momentum

Explain the supports we need to live meaningful lives as we age

Talk about frailty without paternalism

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Highlight innovative and creative solutions



*Before*



*After*

Age Strong Shuttle Redesign

# Strategies to ★ Advance

**Talk about the process of aging as building momentum**

**Explain the supports we need to live meaningful lives as we age**

**Talk about frailty without paternalism**

**Talk about ageism as a problem that can be solved**

**Highlight innovative and creative solutions**

## Framing tips to advance equity:

<b>Do ...</b>	<b>Don't ...</b>
Take an intersectional, inclusive approach.	Compare isms
Define ageism and intersectionality	Assume your reader has the same definition as you
Reframe	Rebut

# Framing Practice



## BEFORE

The population of seniors in the United States is expected to grow, as is the number of seniors who have a chronic disease or functional limitation. The current U.S. housing stock is ill equipped to meet the needs of this population.

By employing strategies such as improving the accessibility of the housing stock, partnering with health service providers to link health care and housing, and matching services and amenities to resident needs, local governments and housing providers can help these seniors meet their needs and age outside of an institutional setting.

# Framing Practice



## BEFORE

The **population of seniors** in the United States is expected to grow, as is the number of seniors who have a chronic disease or functional limitation. The current U.S. housing stock is ill equipped to meet the **needs of this population.**

By employing strategies such as improving the accessibility of the housing stock, partnering with health service providers to link health care and housing, and matching services and amenities to resident needs, local governments and housing providers **can help these seniors meet their needs and age outside of an institutional setting.**

# Framing Practice



## REFRAMED

**As we age, we build momentum -- wisdom, insights, rich experience -- that “power up” our communities.** The current U.S. housing stock is ill equipped to meet the needs of older people and those with chronic disease or functional limitations. **Now is the time to show our resourcefulness to help people thrive and remain rooted in their communities.**

By employing strategies such as improving the accessibility of the housing stock, partnering with health service providers to link health care and housing, and matching services and amenities to resident needs, local governments and housing providers can **address unmet needs while allowing us to remain in our communities for as long as possible.**



When a  
Frame “works,”  
It Shifts  
Thinking in  
Multiple Ways



**Knowledge  
Increases**



**Attitudes  
Improve**



**Policy Support  
Grows**

# National Center Resources



# Frame On!

**Productive perceptions of  
aging are priceless**

Join in the conversation!



 @NationalCentertoReframeAging

 @ReframingAging

 @ReframeAging

 @ReframingAging

 @NationalCentertoReframeAging

 [www.reframingaging.org](http://www.reframingaging.org)

# WHAT COULD BE?

Disrupting  
Aging

The Longevity  
Economy



**Lori Parham**  
**AARP**

Summit on  
**Aging and  
Longevity**

Envisioning the Future of Aging &  
Longevity in Washington State

# Let's Work Together to Change the Image of Aging



Lori Parham, Ph.D.  
AARP Government Affairs

Summit on  
**Aging and  
Longevity**



# The Longevity Economy Outlook & Washington

The 50+ population now includes four generations of Americans.

There is a BIG opportunity to better engage the older population and **tap into the power of the Longevity Economy.**



The American 50+ economic and societal contribution is worth more than

**\$9T**

*And is expected to grow to \$28.2T in 2050\**

Summit on  
Aging and  
Longevity



## Older adults are staying the workforce.

- 71% plan to work in retirement
- More than half plan to launch “encore careers”
- People in their 50s and 60s start businesses at twice the rate of those in their 20s

## Older adults want to give back, make a difference and help people in need.

- Three in four 50+ adults volunteered in the last year.
- Two in three adults feel they have influence when joined by others.





# Let's change the story we are telling about aging!



AARP research found that 62% of the Longevity Economy (\$7.6 trillion in annual economic activity) **would consider switching to a brand that represents people their age**. And 80% of people over 50 say **marketers assume their lifestyle based on stereotypes**.



# The Image of Aging



**We are living longer than ever before, and still, the images we see don't reflect the true image of aging.**



**81%**

**of Boomers don't feel represented in media imagery**

**83%**

**of Millennials said they wish ads had more realistic images of people**

**70%**

**of women say they are more likely to buy from brands whose ads features a mix of ages**





**The 3P's embody a cluster of abilities, attitudes, and resources that help you cope and adapt to what life throws at you:**

***People:*** People who have meaning and purpose in their life *live seven to eight years longer* than people who don't.

***Purpose:*** Individuals with a positive view on aging *are 44% more likely* to recover from a severe disability.

***Possibilities:*** Individuals with a positive outlook on aging also have an *80% reduction* in cardiovascular risk.

**The experiences that have gotten you to  
this moment in life make you who you  
are.**

**Own them.**

# WHAT IS NOW? WHAT COULD BE?

## Reflect & Share:

1. What is an immediate step that you can take to apply the principles to reframe aging?
2. How can you improve the public's understanding of aging and the contributions older adults make?

# WHAT IS NOW? WHAT COULD BE?

## Innovating Care in the Long-Term Service & Support Sector



**Bea Rector**  
Assistant Secretary, Aging and  
Long-Term Support Administration

# Limited Choices for Care in the 1980s



Care focused in institutional settings



No paid family caregiver supports



Medicaid only covers institutional settings

# Reimagining the Future: Charting the Course





# Individuals Demand Change



ADAPT protest (c1980s). Photo by Tom Olin. Smithsonian National Museum of American History.

# Innovations Increase Choice



# Timeline of Innovation

Medicaid Waivers improve choice and access to care

Adult Protective Services created

Family Caregiver Supports created and expanded over time

WA Cares makes Long-Term Care Insurance affordable and accessible to working Washingtonians

2024

1980s

Network of home & community-based providers grows. Ongoing investments to support providers

State staff dedicated to nursing home and hospital transitions. Partnership of AAAs

Nurse Delegation approved to allow individuals more choice in where services occur

**What if we  
did  
nothing?**



# Washington's High- Performing Long-Term Care System



## Is Status Quo Acceptable?



The riskiest  
thing we can  
do is just  
maintain the  
status quo.

– Bob Iger

# Reimagining the Future: Time for Bold Action



# What Could Be? Panel Discussion



**Soumam Debgupta**  
DSHS Assistant Secretary  
Technology Innovation  
Administration and CTIO



**Dr. Tonik Joseph**  
DSHS Assistant Secretary  
Developmental Disabilities  
Administration



**Lori Manning**  
DSHS Chief Administrative Officer  
Office of the Secretary

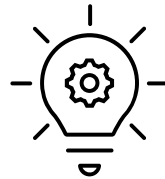


**Bea Rector**  
DSHS Assistant Secretary  
Aging and Long-Term  
Support Administration



# WHAT COULD BE?

Reflect on what you wrote in the morning about what you envision will matter most to you as you age.



Now think about the connection between what matters most and what we can do to bring the ideas to life for ourselves, individuals in our communities, and particularly those who face disparities?

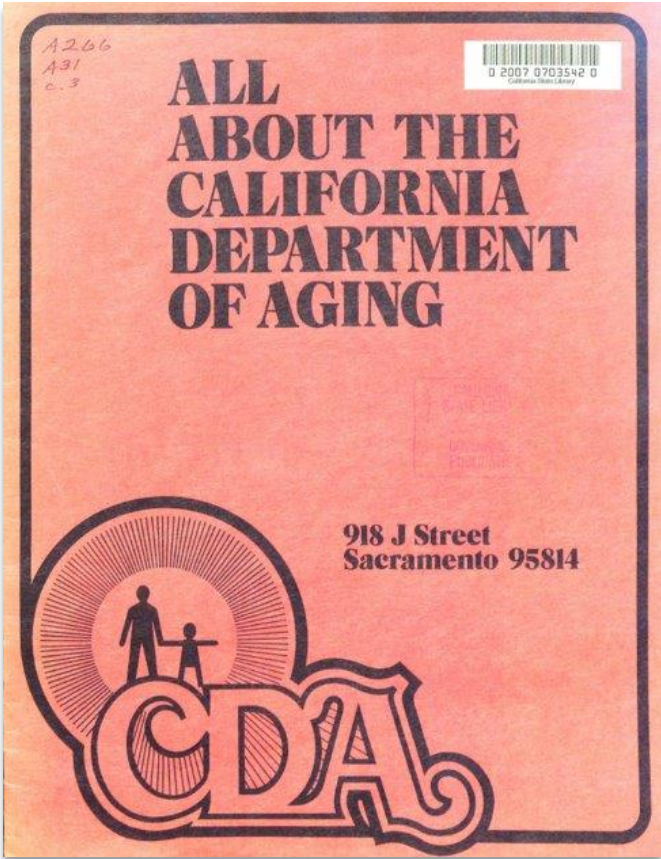
# WHAT COULD BE?

## Multi-Sector Planning



**Susan DeMarois**  
Director, California  
Department of Aging

# California's Master Plan for Aging: Decades in the Making



# Elevating Executive & Legislative Leadership



*CalHHS Agency Secretary  
Dr. Mark Ghaly*



*California Governor  
Gavin Newsom*



*State Senator  
Hannah Beth Jackson*

# Modeling a Whole of Government Approach



Summit on  
**Aging and  
Longevity**

# Adopting a Whole of Society Approach



# Committing to a Report That Doesn't "Sit on the Shelf"



# Challenge Question



**How will you include and engage individuals who aren't receiving state services in a multi-sector plan for aging?**



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Envisioning the Future of Aging &  
Longevity in Washington State

**Thank you!**



Subscribe to receive  
updates on the MPA

[engAGE@aging.ca.gov](mailto:engAGE@aging.ca.gov)

Summit on  
**Aging and  
Longevity**

Envisioning the Future of Aging &  
Longevity in Washington State

# Building an Age-Friendly Washington



Lori Parham, Ph.D.  
AARP Government Affairs



Summit on  
**Aging and  
Longevity**

# People want to stay in their homes and communities...

Source: AARP Home and Community preferences Survey 11/21

Summit on  
Aging and  
Longevity





**83%**  
of Boomers plan  
to stay in their  
current homes  
when they retire.

# The Numbers of Older Adult Head of Households and Renters are Soaring

Households headed by people age 65-plus are expected to grow from 34 million to 48 million in the next 20 years.

Source: *The Urban Institute, The Future of Headship and Homeownership.*

Summit on  
**Aging and  
Longevity**



# Family Caregivers

- 40% care for someone living in their home.
- 38% care for someone living on their own.

*Source: AARP Home and Community preferences Survey*

Summit on  
**Aging and  
Longevity**



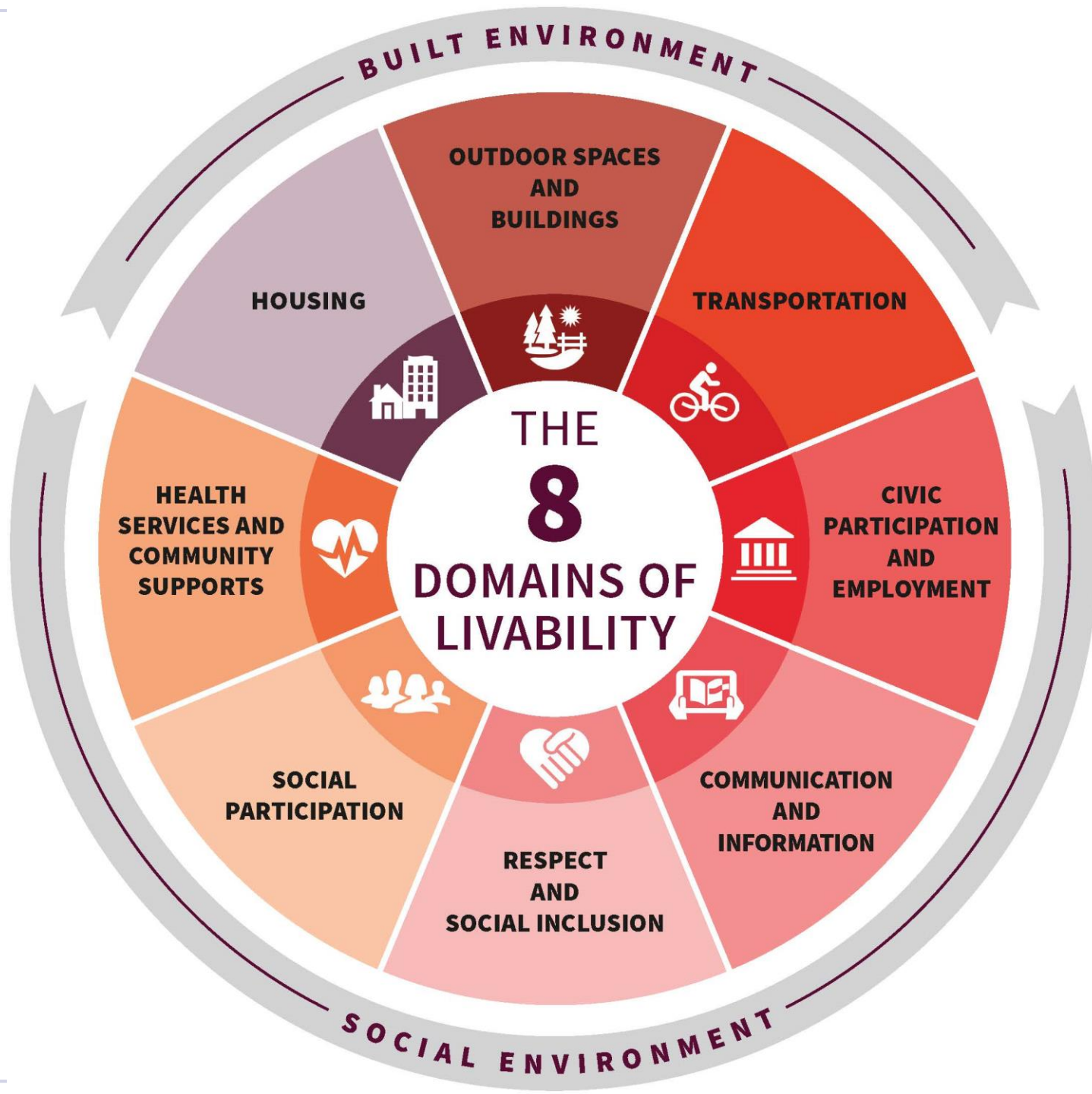
# Building communities where people of all ages can thrive





**71%**  
of Americans  
trust local  
government to  
handle  
problems



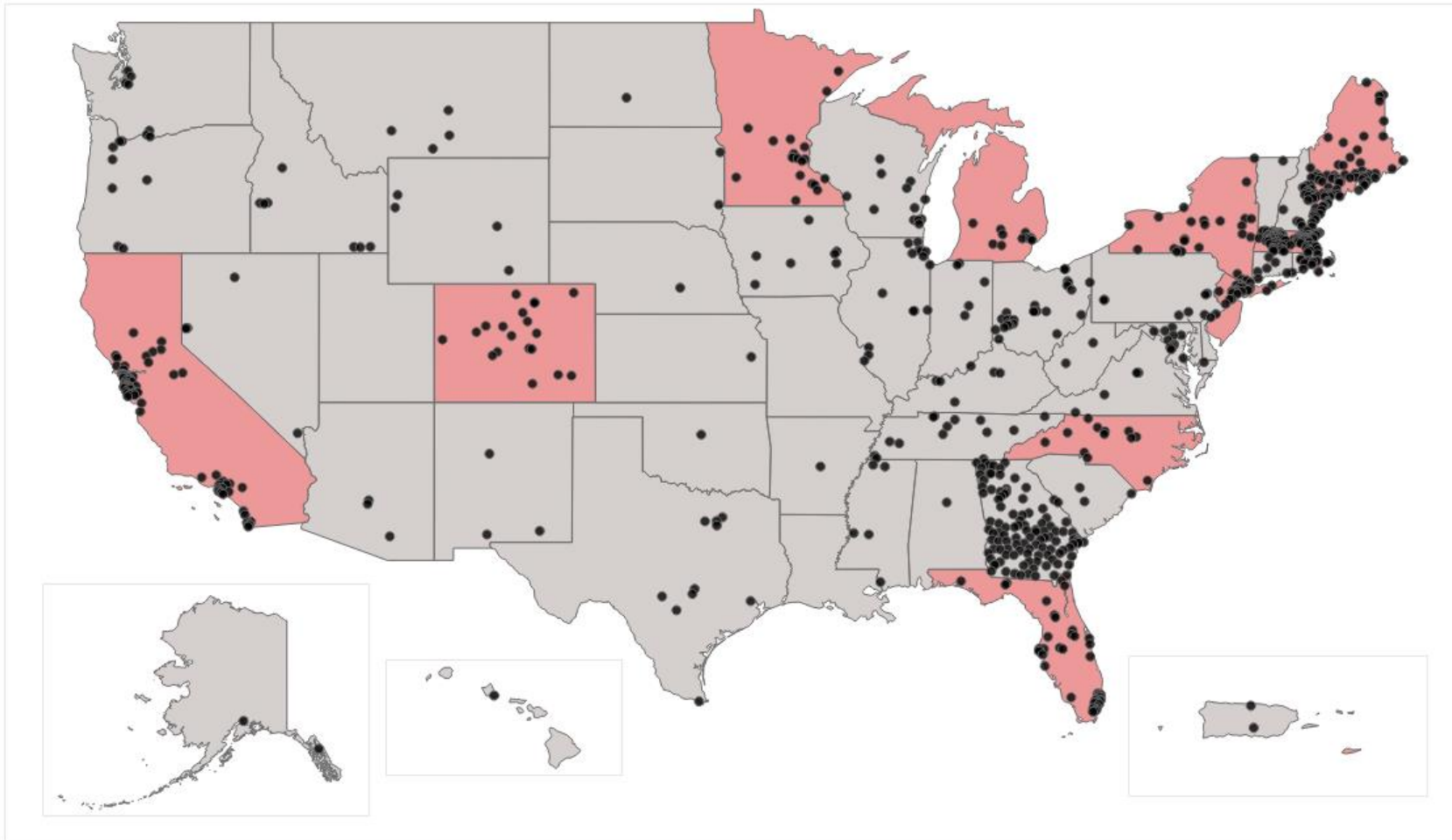


## The 8 Domains of Livability

is the framework used by states and communities enrolled in the network to organize and prioritize their work to become more livable for both older residents and people of all ages.

*The availability and quality of these community features impact the well-being of older adults.*

# AARP Network of Age-Friendly States and Communities (NAFSC)



# Community Characteristics



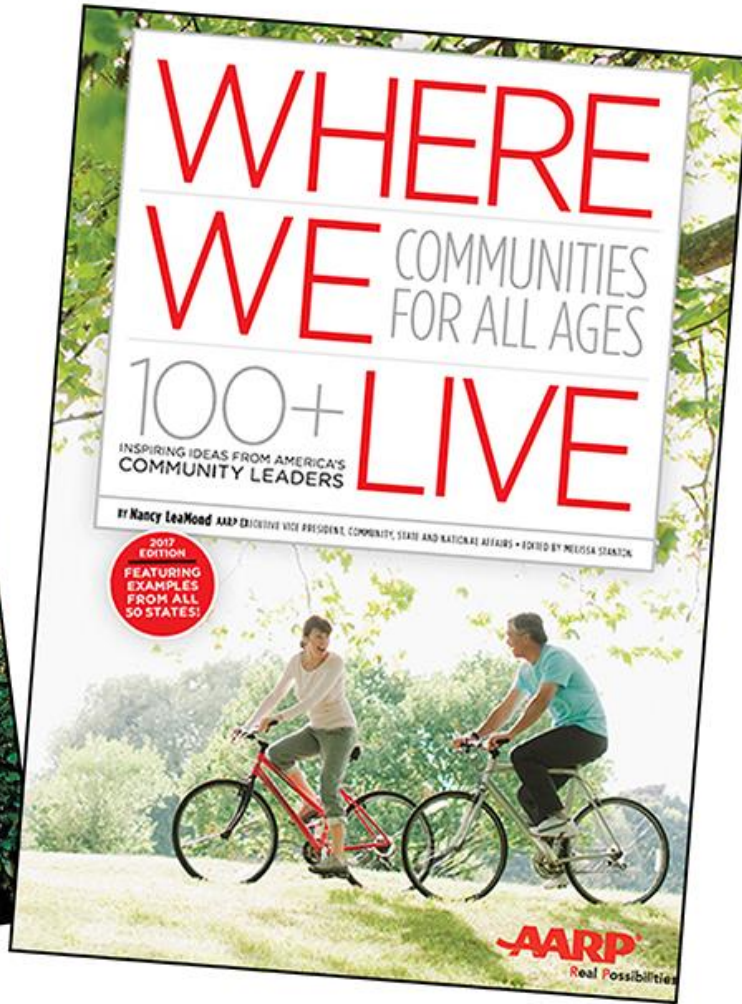
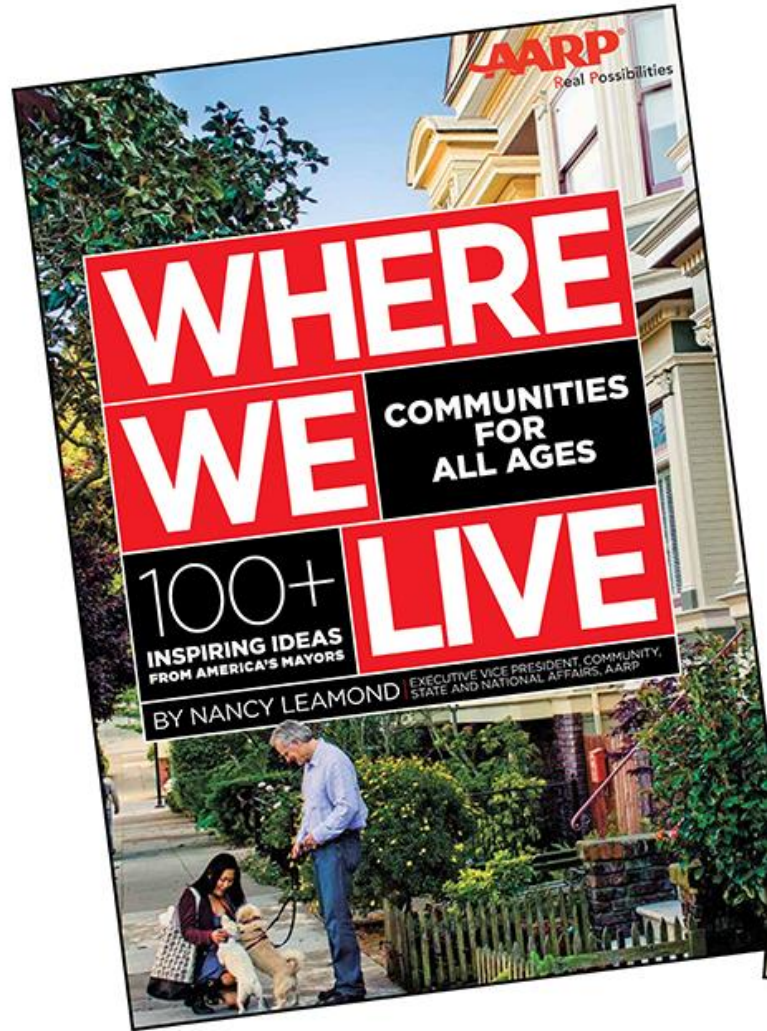
**40%**  
Rural



**52%**  
Suburban



**31%**  
Urban

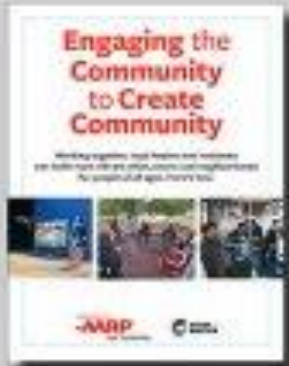
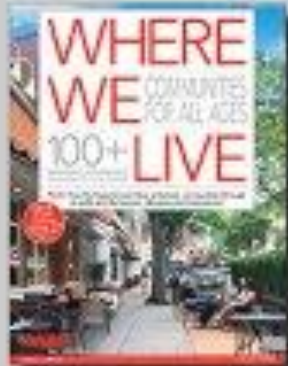
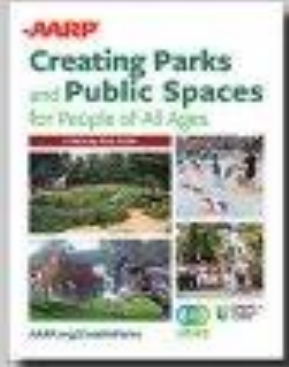
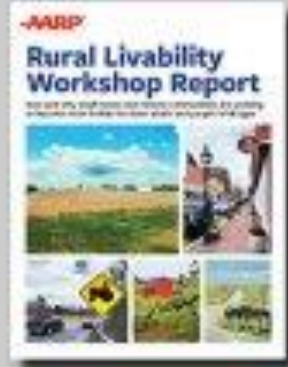
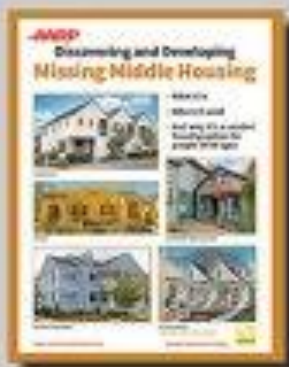
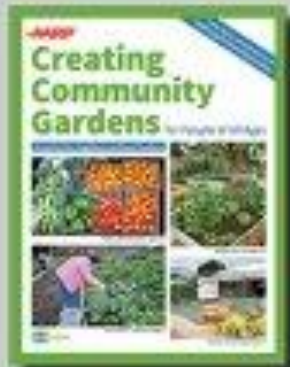


# Interactive Map



Discover where and how AARP is helping communities become more livable and age-friendly so people of all ages can thrive — and make where they live and want to remain a lifelong home.

Search across hundreds of towns, cities and counties throughout the nation that have either enrolled in the AARP Network of Age-Friendly States and Communities or received a "quick-action" AARP Community Challenge grant.



# AARP Livable Communities Newsletter

## Free, Weekly Award-Winning

## Information and inspiration for local leaders

**Subscribe Now!**



## WHAT WILL BE?

How will you include and engage individuals who aren't receiving state services in a multi-sector plan for aging?

How can you contribute to the development of policies and practices that will ensure Washington is a place where all residents can live, work and grow with dignity and purpose?

# WHAT WILL BE?

## Leading Change: Committing to Collaborative Change Across Sectors



**Sue Birch**  
Director,  
Health Care Authority



# LET'S MAKE IT HAPPEN / NEXT STEPS



Designate a point person



Return post-summit assessment



Join cross-agency committee



Commit to Multi-Sector strategy



Document aging initiatives underway



Return to 2025 Summit/Bring partners

# LET'S MAKE IT HAPPEN / NEXT STEPS

## Early/mid-2024

- Socialize concept and raise awareness with partners.
- Establish Age- and Dementia-Friendly State Designation.
- Hold Age & Longevity Summit.
- Explore funding mechanisms to initiate work on MPA.

## Later 2024

- Convene Aging & Longevity Interagency work group to inform next steps.
- Increase understanding of and buy-in for an MPA among key state and agency leaders and community partners.
- Gain momentum and support for MPA.

## 2025-2026

- Convene 2025 Summit.
- Engage administrative and/or legislative support for MPA.
- Involve sector champions in plan development.
- Identify priority goals and strategies across sectors.
- Draft Washington State MPA.

- Implement change, now.
- Set a calendar reminder for June 21<sup>st</sup> to reflect on Summit learning and review and plan next steps.
- Partner with Aging Advocates.
- Identify Ageist practices in your organization / Disrupt Ageism.
- Engage with older adults to build policies / plan programs.
- Build workforce that reflects older adults.
- Keep the conversation going. Weave it into your internal discussions.



# BIG ASKS

- 1. 2025 Summit Budget Request.**
- 2. Legislation elevating Aging and Longevity issues.**
- 3. Make a commitment.**



# **The Powerful Now**

The Extraordinary is  
Possible