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USDA CSREES' Role in Broadening Support for an Aging Nation

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USDA CSREES' Role in Broadening Support for an Aging Nation

Abstract

The aging of America is of major public concern and has far-reaching implications for the nation and for rural communities. In particular, older Americans in rural areas face a wide array of challenges that negatively affect their health and quality of life. Working with its land-grant university and the Cooperative Extension System partners, USDA CSREES is strategically directed and uniquely positioned to address many of these challenges through effective research, education, and Extension activities.

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Introduction

The aging of America is a major public concern and has far reaching implications for the nation and for rural communities (U.S. Census Bureau, 2003). With one-quarter of Americans living in rural settings, rural communities generally have a higher proportion of older persons in their total population than urban areas. This is largely due to aging-in-place, out-migration of young adults, and in-migration of older persons from metro areas and other regions of the world (ERS, 2005; U.S. Census Bureau, 2003). Additionally, older Americans living in these communities face a greater likelihood of poverty and food insecurity, geographic isolation, inadequate housing, and often inaccessible or costly health and social services (ERS, 2005).

Non-farm rural elderly account for the majority of rural elderly and suffer from a disproportionate number of chronic health conditions and health problems and have more restrictions on their lives than any other group of older people (ERS, 2005). Of particular concern is the increase in overweight and obesity, the high incidence of hypertension and diagnosed arthritis, and incidences of cancer, diabetes, and arthritis (AOA, 2006). Many rural elderly do not participate in health promotion programs and services, resulting in undiagnosed conditions and higher rates of chronic disease (Wilcox, Bopp, Oberrecht, Kammermann, & McElmurray, 2003).

Although the challenges facing rural communities are formidable, opportunities for improving health and health care services of older adults do exist. For example, the recent growth of the ethanol industry in rural areas may be advantageous to some rural families through employment and increased income (ERS, 2007). Older persons as members of these families may benefit indirectly through family resources and the potential for improved community infrastructure associated with economic development.

The federal government as well as states and local communities can play a critical role in providing resources and supports to rural people and communities to improve health. This role and the coordination of services and educational outreach can be effectively supported through the U.S. Department of Agriculture's Cooperative State Research, Education, and Extension Service (USDA

CSREES) in partnership with the land-grant university system.

What Is the Role of USDA CSREES?

USDA CSREES is strategically directed to address many of the problems faced by older populations. Two of its six strategic goals align with the needs of rural aging populations:

- Improving the Nation's nutrition and health
- Supporting increased economic opportunities and improved quality of life in rural America

Within each of these two goals are specific objectives that expand on CSREES' role to achieve these goals. Working with its land-grant university and Cooperative Extension System (CES) partners, CSREES promotes the well-being of Americans through effective research, education, and Extension to better understand the socioeconomic and environmental factors affecting rural communities and the people who live there. Cross-cutting programs within these two goals effectively align and bring together a number of content areas focused on rural aging issues to include; health; nutrition; financial security; housing; rural caregiving and community development.

Improving the Nation's Nutrition and Health

Environmental barriers, geographic isolation, lower income, and lower education levels are common to the rural elderly (Vitolins, Quandt, Bell, Arcury, & Case, 2002) and may compromise health. Limited access to a nutritious diet or a diet of poor quality has the potential for inadequate energy and essential nutrient intake leading to malnutrition and dehydration (ADA, 2000, 2005) and may be a factor in the development of a number of chronic and debilitating diseases.

In addition, a sedentary lifestyle is a significant health risk to aging individuals. Regular physical activity is associated with many physical and mental health benefits (NCHS, DHHS & USDA, 2005; Stepnick, 2006), but older people are often discouraged from doing physical activity, and regular leisure physical activity decreases with advancing age. Poorer adults are less likely to engage in physical activity than those with higher incomes (NCHS, 2005). Also, older rural residents, especially women, face a number of barriers to being physically active, including lack of family support, the fear of injury, caregiving duties, and unsafe or isolated physical environments (Wilcox, Bopp, Oberrecht, Kammermann, & McElmurray, 2003).

USDA uses its nutrition and assistance programs and broader nutrition education efforts to promote healthier eating and more physical activity across the nation. CSREES sponsors research to improve scientific knowledge concerning nutrition and health and supports education and Extension to promote healthy diets, ensure access to healthy food, and encourage healthy living. CES' educational and outreach efforts strive to improve nutritional well-being and quality of life of older adults using a variety of effective strategies and research-based interventions and establishing community-based healthcare partnerships.

Supporting Increased Economic Opportunities and Improved Quality of Life in Rural America

Rural areas struggle with many forces that can negatively affect health and the well-being of older adults. To help meet the economic and quality of life needs of this population in rural areas, family members, neighbors, and friends often fill the service gap, providing both direct and indirect caregiving services.

Finding resources to help with caregiving can be difficult. Rural caregivers are isolated from social support, resources, financial assistance, training, respite options, community programs, and information on caregiving (Rural Assistance Center, 2005). Additionally, caregiving demands often interfere with job responsibilities and workplace productivity. Unmet family needs, including access to accurate information and support among diverse populations, leave communities and employers unprepared to meet growing caregiving responsibilities. These factors can have a significant impact on the health and wellness of older family members.

Rural communities should be able to provide basic services to families, including access to clean water, adequate housing, and reliable electricity and telecommunications, and such essential needs as quality education, health care, day care, public safety services, and cultural activities. To assist with these needs and services, CSREES and its nationwide partnership promote the well-being of rural communities through research, education, and Extension to better understand the economic, demographic, and environmental forces affecting older adults and use this knowledge to develop strategies that make maximum use of local assets.

What Does CSREES Need to Do to Engage Individuals and Communities on Rural Aging Issues?

Enhanced educational efforts and outreach to rural communities are needed to increase public awareness and community engagement on aging issues. Over the past decade CSREES and other

USDA agencies have addressed population aging both as individual agencies and through coordination and collaboration in a variety of ways. Interagency working groups, task forces, multi-state initiatives, and local, state, and national communities of educators and social service professionals have joined forces to share and exchange resources, services, and educational materials to support for interventions to promote healthy aging.

Partnerships between state and community agencies, as well as with private partners, facilitate coordination and expansion of nutrition, health, and housing information and supportive services for older adults living in rural areas. The need for these services and for education and outreach at the state, regional, and community level will continue to grow as the vast Baby Boomer generation ages over the coming decades.

CSREES and its land-grant partners are uniquely positioned to reach out to older adults and their families in rural communities to inform and educate them about the many issues, challenges, and opportunities related to healthy aging. In 2007, CSREES supported research on healthy aging in rural communities through the Rural Health and Food Safety Education Program, and many other research and educational efforts are underway to serve this audience, including the emerging Family Caregiving Community of Practice sponsored by the eXtension Initiative. Through higher education programs, CSREES builds and strengthens the capacity for training the next generation of scientists and educators to care about the well-being and quality of life of older adults. More information about these age-related activities can be accessed at http://www.csrees.usda.gov/nea/family/in_focus/family_if_adultdevelopment.html

Conclusion

CES' Family and Consumer Sciences and Nutrition educators in the land-grant university system are ideal conduits to improve access for older adults, their families, and communities to high-quality educational resources and support services. However, to ensure program sustainability and effective educational programs serving rural communities, CES must document local program effectiveness and timeliness to meet current and future needs related to aging and caregiving.

In particular, it is important that CES educators keep older adults and their families interested and participating in educational programming by making programs culturally and ethnically relevant and suited to an aging rural population in a safe environment with trained staff. CES can and should lead the way in the interpretation of relevant research, government policy, advocacy of nutrition programs, and promoting accurate health information to rural communities to strengthen families and improve quality of life for generations to come.

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 **Discussion**