

Active Ageing in the Trento Province

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Provincia autonoma di Trento



Provincia Autonoma di Trento

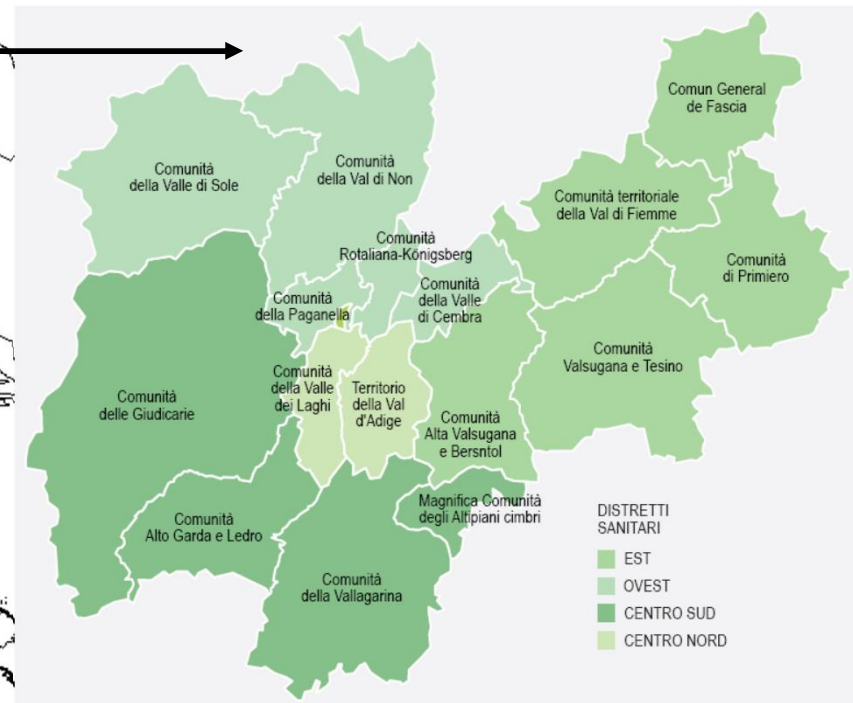


*Azienda Provinciale
per i Servizi Sanitari
Provincia Autonoma di Trento*

Background

- 57 million inhabitants
- 21 regions
- Universal health care and preventive services
 - Local Health Units (LHU)
 - 1 unit per 300,000 residents (100,000 – 1,000,000)
 - Regional health authorities
 - Interpretation/adaptation of national guidelines (national health plans)

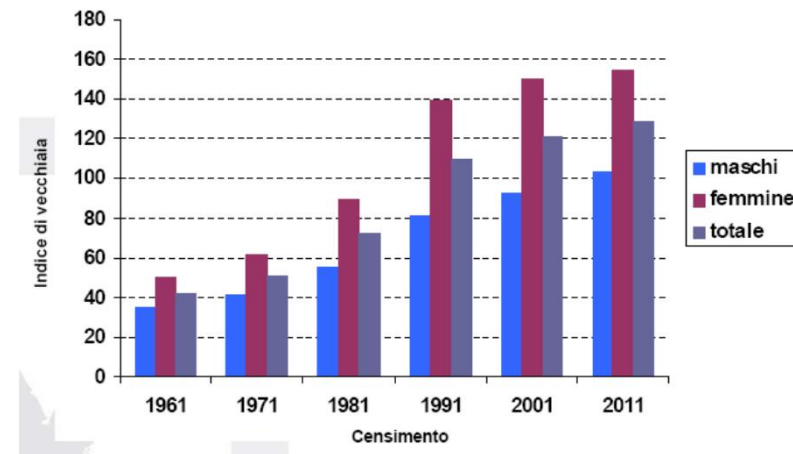
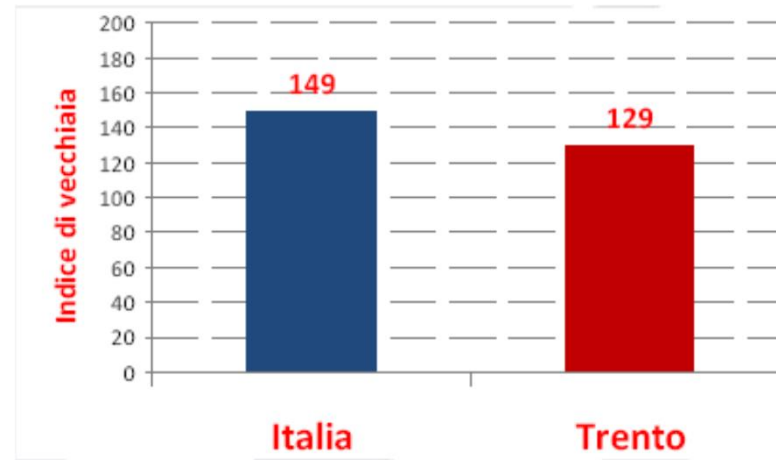




- “ 1 Health Unit . 4 Health districts
- “ 500.000 inhabitants

Demography

- Old age index (census 2011): 129
 - Every 100 kids [0-14 years] there are 129 elderly people [65+]
- Compared to the rest of Italy the Trentino is relatively young
 - only Campagna, Alto Adige and Sicilia have younger populations
- The population is ageing over time
 - Since the birthrate is constant → ageing is caused by the extension of lifetime
 - Life expectancy at birth (e_0): 80 years for men (+7 years compared to '92) and 85,5 years for women (+4 years compared to '92)
 - Life expectancy at 65 years (e_{65}): 18,6 years for men and 22,7 years for women
- A triumph and a challenge



Fonte: Francesca Lanzafame (Servizio statistica), I risultati del 15° censimento popolare in Provincia di Trento, http://www.statistica.provincia.tn.it/binary/pat_statistica/demografia/CensPop2011_Risultati.1369996018.pdf

The challenge

Active ageing

*Add life to the years not
only years to life*

Evitable
mortality

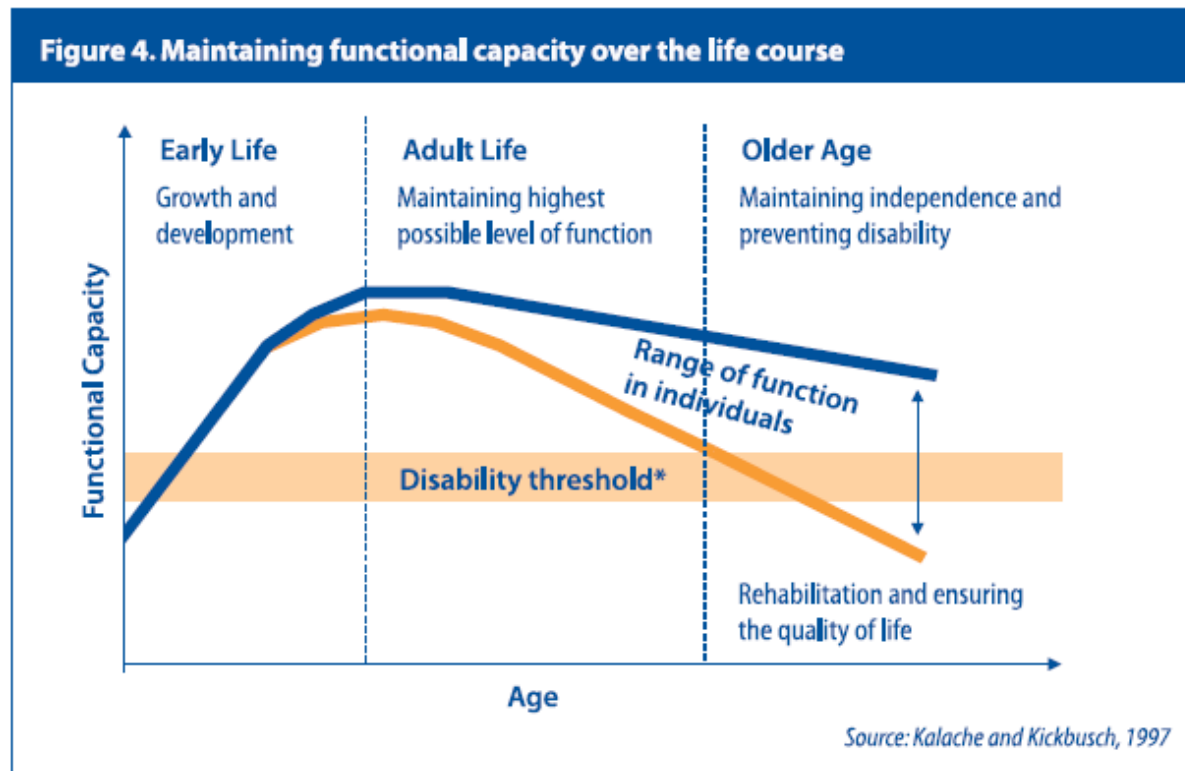
Reduce mortality before age 75

Gaining health – make the healthier
choice the easier choice

Physical activity, healthy diets, reduce
overweight and obesity, no tobacco,
less alcohol

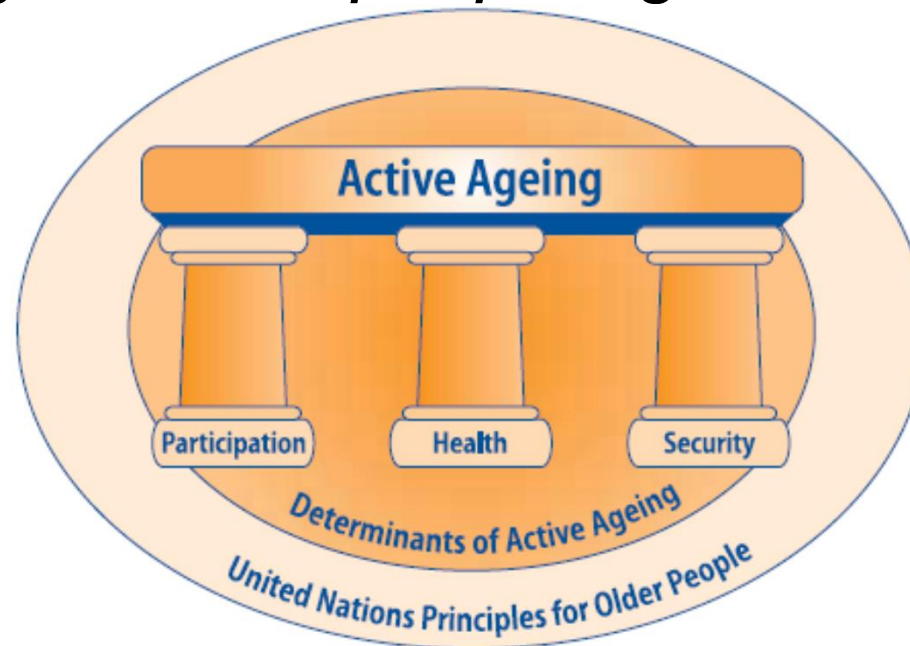
Life course approach

- Active ageing is not a matter of old age only
→ to be effective, interventions for an active ageing have to follow a life course approach



What is active ageing?

“ *WHO: Active ageing is the process of optimizing opportunities for **health**, **participation** and **security** in order to enhance quality of life as people age*



What is the Trentino doing about Active ageing?

- Surveillance and monitoring of the determinants of healthy ageing
- Policies, programmes, and interventions

Surveillance

- Life course approach of health monitoring:
 - **OKkio** (repeated survey)
 - Overweight, obesity and physical activity of school-children (elementary school)
 - **HBSC** (repeated survey)
 - Life style of adolescence (11, 13, 15 years)
 - **PASSI** (ongoing monitoring)
 - Health, Life style and preventive services Adults (18-69)
 - **PASSI d'Argento** (repeated survey)
 - Elderly people (65+)

Criteria for surveillance

- Collect useful and representative data on health behaviors at LHU level
- Provide timely feedback → planning and evaluation of programs/interventions
- Facilitate comparisons between LHU/regions → identify best practices
- Permit comparisons with international data
- Last but not least:
 - Promote the professional development of staff
 - Promote the integration between social and health services
 - Increase the use of epidemiological data at local level

Passi d'Argento

- Based on the Passi experience
- Several pilot studies between 2009 and 2011
- Study carried out on local level but coordinated by the Istituto Superiore di Sanità
- Participants selected from LHU population registers using stratified random sampling (400 interviews)
- Inclusion criteria: age 65+, residence in catchment area, availability of telephone number (mobile or land-line, obtained through various sources), not institutionalized
- Questionnaire administered by social service personnel by phone or vis-a-vis
 - + 80 (or hearing/cognitive problems) → vis-a-vis interview


A CURA DEL COORDINATORE	
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Regione Emilia Romagna

ISTITUTO SUPERIORE DI SANITÀ

ccm

PASSI D'ARGENTO
La qualità della vita vista dalle
persone con 65 e più anni
Questionario



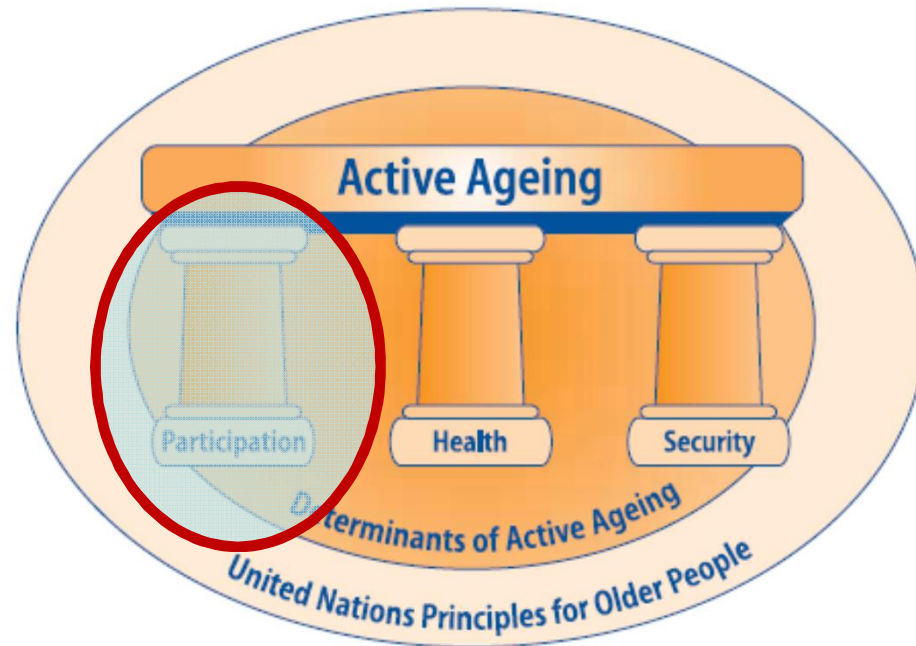
Versione 24/04/2009

A short glimpse into the
results

Subgroups of the elderly population

- About **8%** (more than 8.000 persons) of the elderly population in Trentino can be considered *disabled*
 - not capable of one or more activities of daily living (ADL)
 - dressing, eating, ambulating, toileting, hygiene
- About **20%** (21.000 persons) show *signs of frailty*
 - Capable of all ADLs but not capable of at least 2 IADLs
 - shopping, housekeeping, accounting, food preparation/meds, telephone/transportation
- **72%** of the elderly are in *good conditions* but some have risk factors for chronic disease

Items studied by Passi d'Argento



- Being an asset (family, community)
- Participation in social life/social isolation
- Participation in training courses

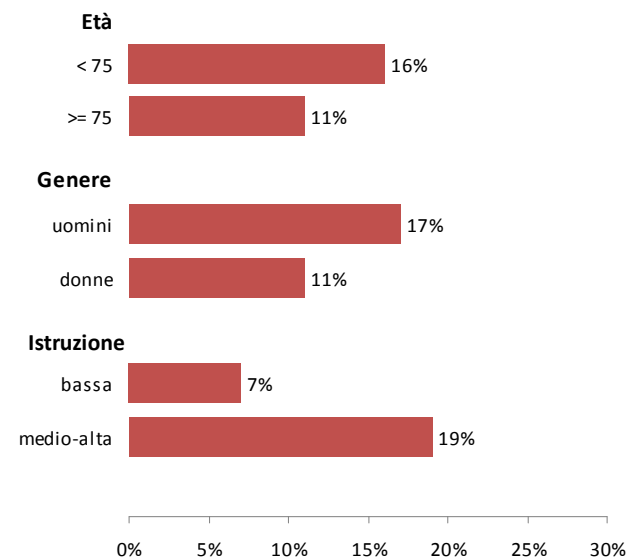
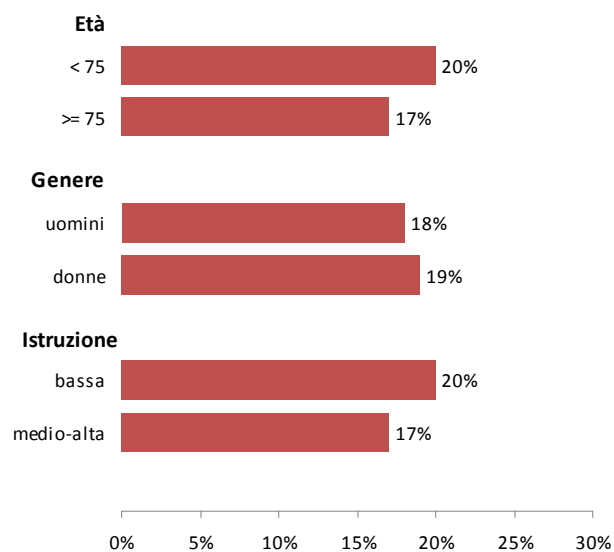
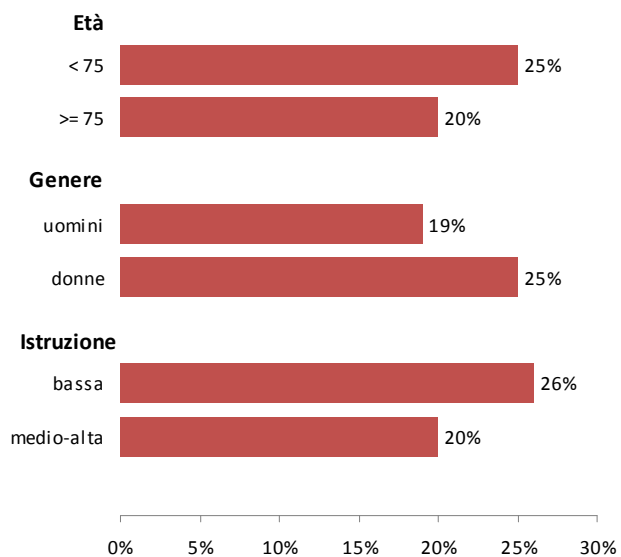
Being an asset

Passi d'argento, Trentino, 2012

- ✓ Being an asset for families and friends
- ✓ Being an asset for the community

39% represents an asset for families and/or for the community:

- 23% for the partner
- 19% for persons other than the partner
- 13% for the community



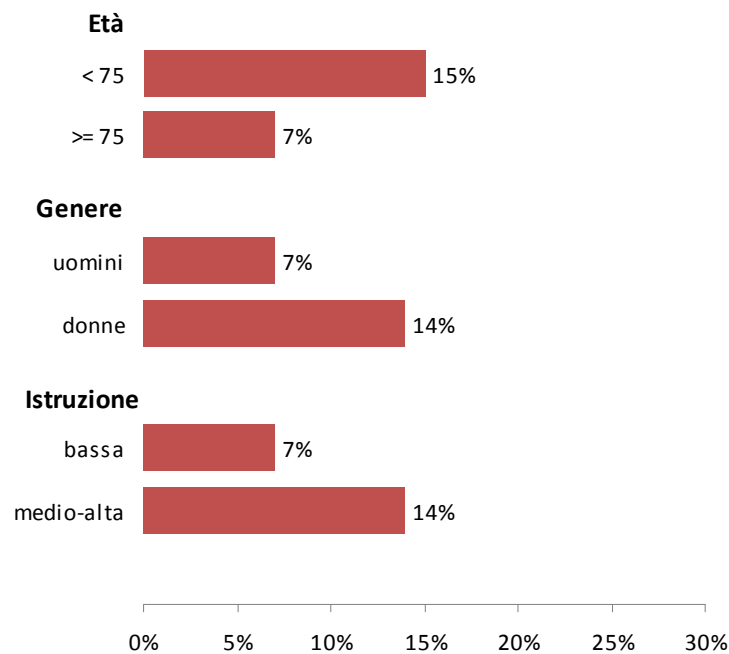
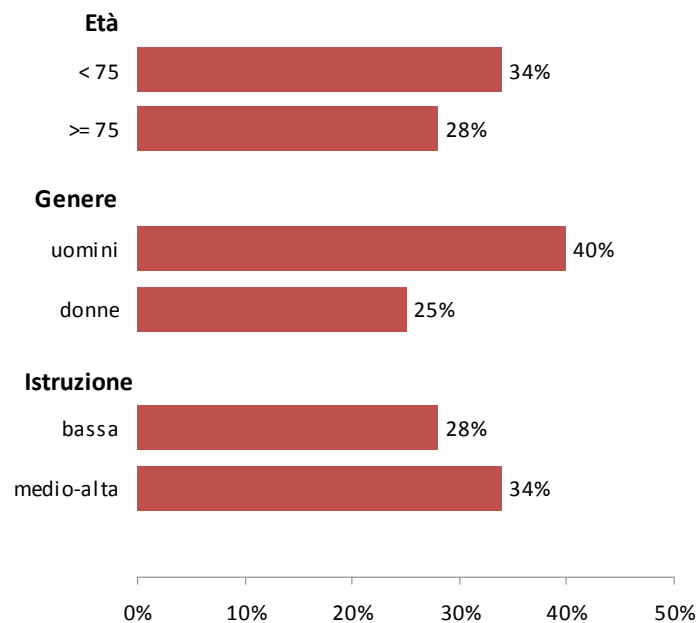
Social life

Passi d'Argento, Trentino, 2012

- ✓ Partecipazione at social life
- ✓ Partecipazione at courses and/or cultural events

31% is conducting a socially active life (center for elderly, parish, clubs,...)

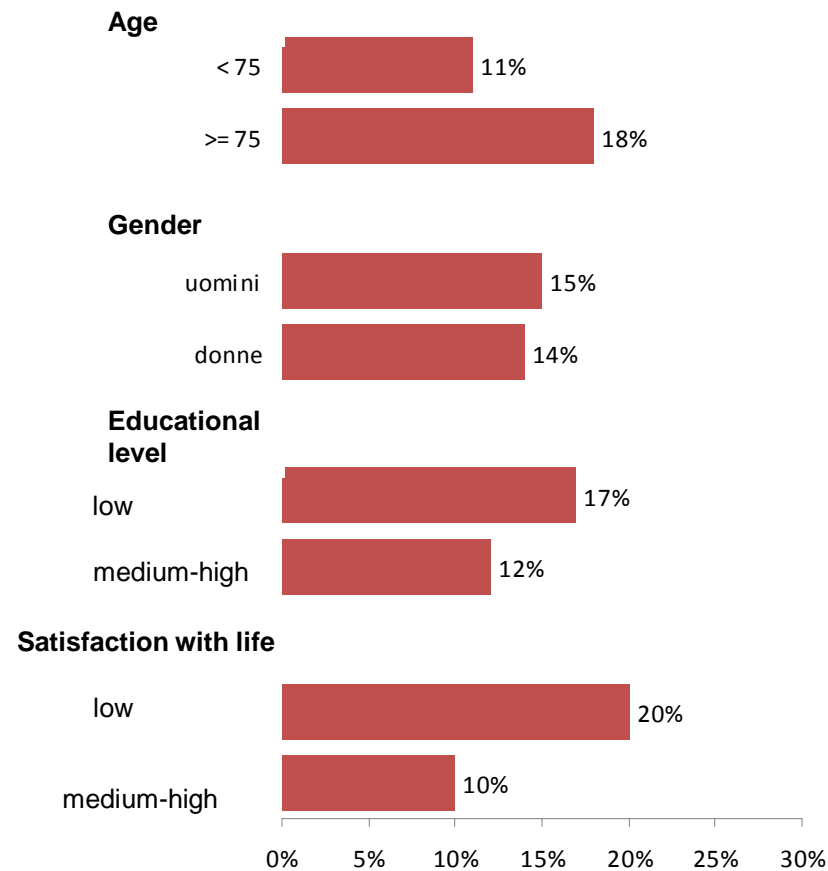
11% participates at courses or cultural events



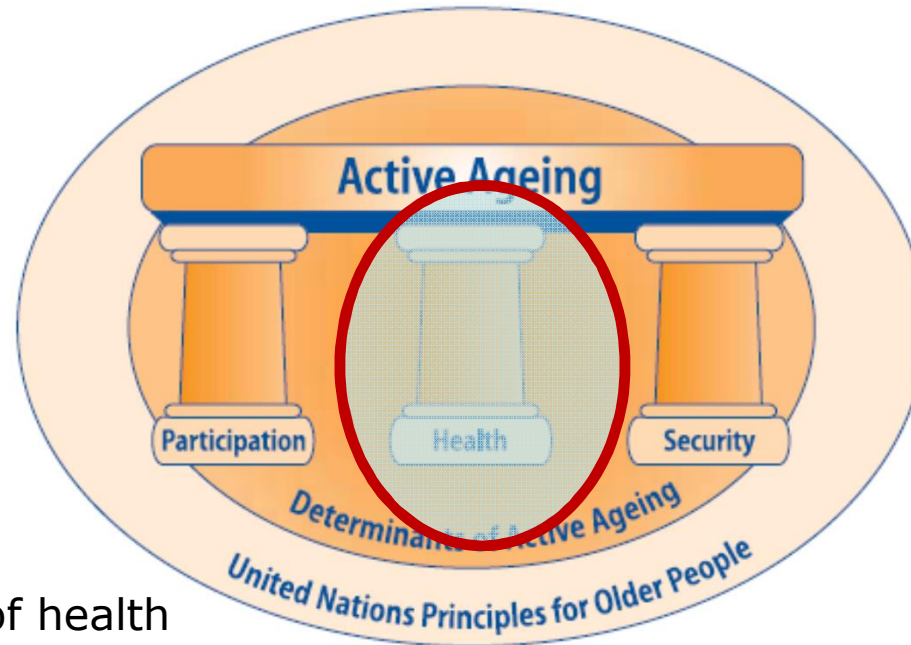
Risk of social isolation

Passi d'Argento, Trentino, 2012

15% can be considered at risk for social isolation: no social encounters or even only chatting with other people in the last 12 months...



Items studied by Passi d'Argento

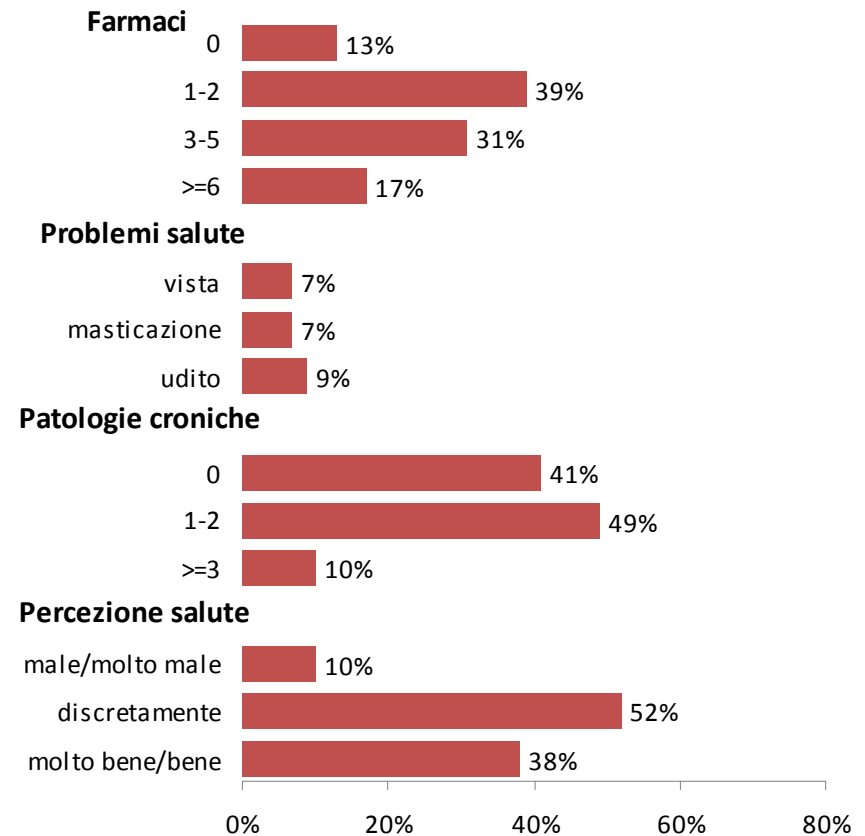


- Self perception of health
- Autonomy and need for assistance
 - ADL (*Activities of Daily Living*)
 - IADL (*Instrumental Activities of Daily Living*)
- Health problems
 - hearing, sight, chewing, fear to fall
- Health behaviour
 - Tobacco, alcohol, physical activity, nutrition, overweight and obesity
- Symptoms of depression

Health

Passi d'argento, Trentino, 2012

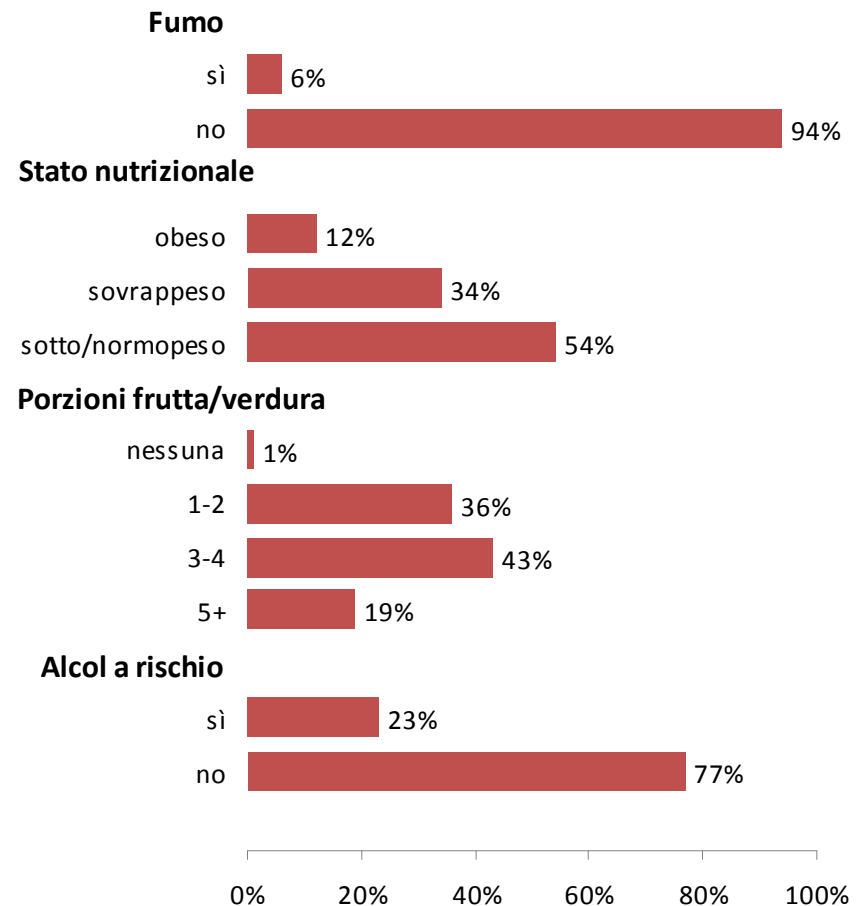
- Almost everybody above 65 years takes at least some medication (87%)
- Prevalence of sight, mastication and hearing problems is between 7% and 9%
- 59% has at least one chronic disease
- Only 10% perceives his/her own health as poor or very poor



Behavioural risk factors

Passi d'argento, Trentino, 2012

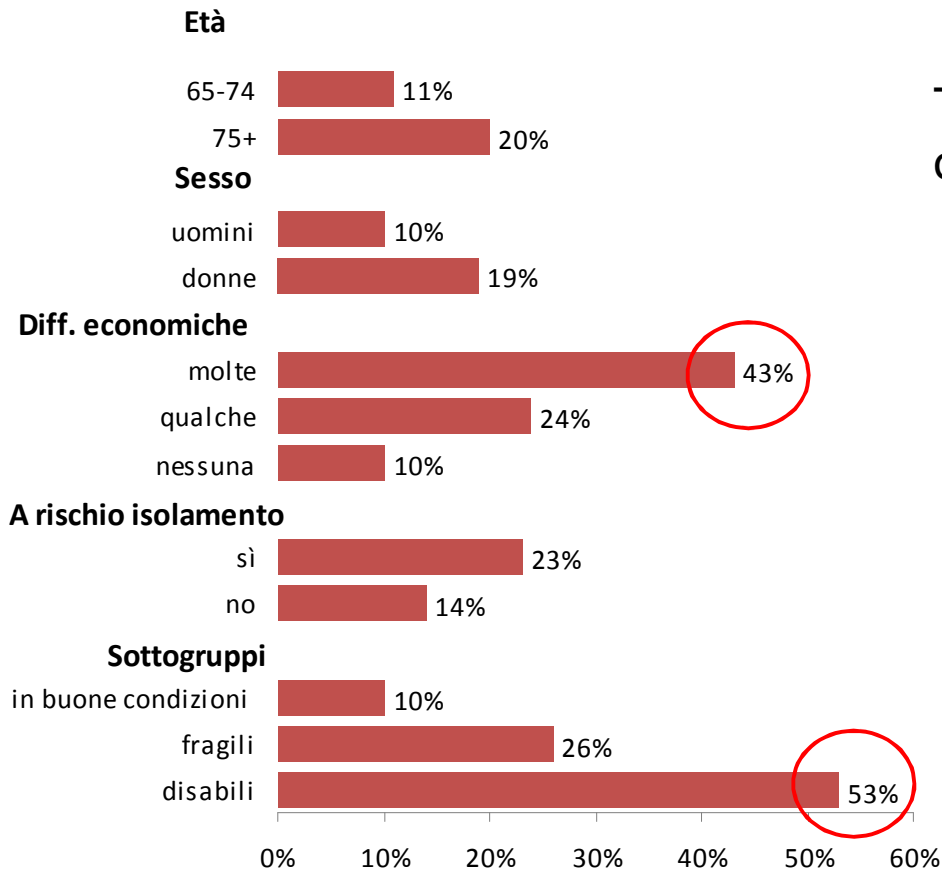
- Only 6% of elderly smoke (adult population 18-69: 25%)
- 46% is overweight (adult pop: 36%)
 - 34% overweight
 - 12% obese
- Everybody eats fruit and veggies but only 19% meet recommendations (17% adult pop.)
- 23% refers risky alcohol consumption (26% adult pop)



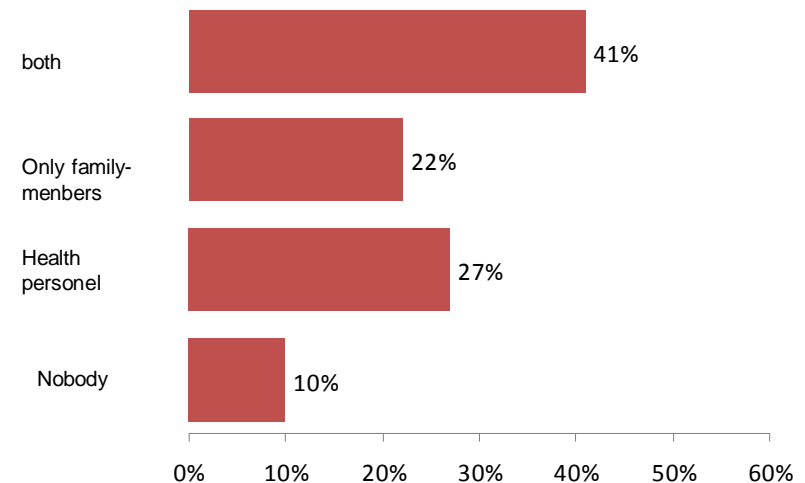
Symptoms of depression

Passi d'Argento, Trentino, 2012

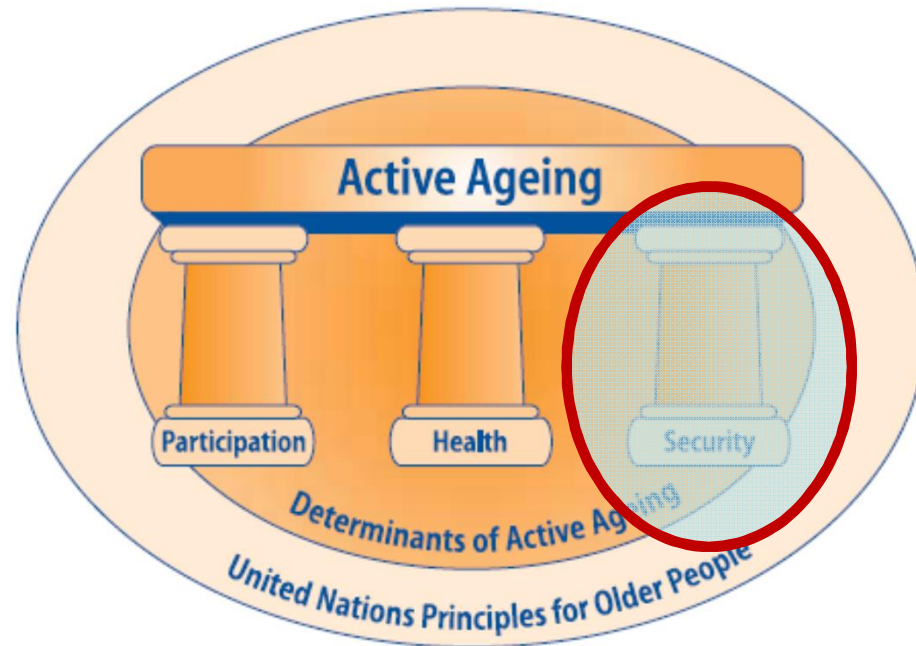
- ✓ 15% refers symptoms of depression (17% adult pop. 18-69)
- ✓ 90% speak about their mental health issues with somebody and ask for help (64% adult pop)



To whom do persons with symptoms of depression speak to?



Items studied by Passi d'Argento

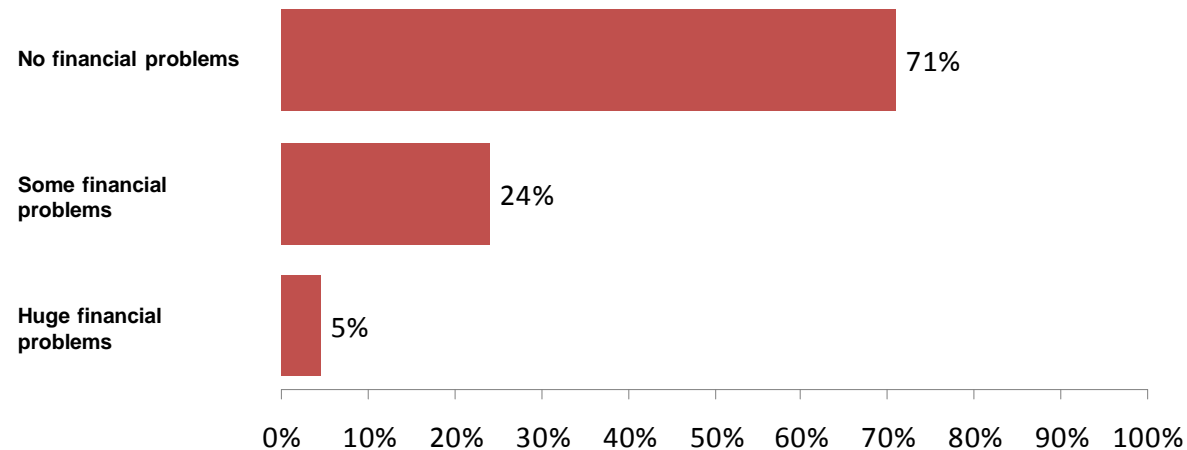


- Income and home-ownership
- Pension and activities that produce income

Income and house ownership

Passi d'Argento, Trentino, 2012

- **71%** refers to not have any financial problems (65% adult population 18-69 years)
- Less problems among:
 - The younger age-groups (65-74 anni)
 - men
 - Persons with high educational level
 - Home owners (82% owns the home he or she are living in)
- 95% has a pension and 8% works earning money

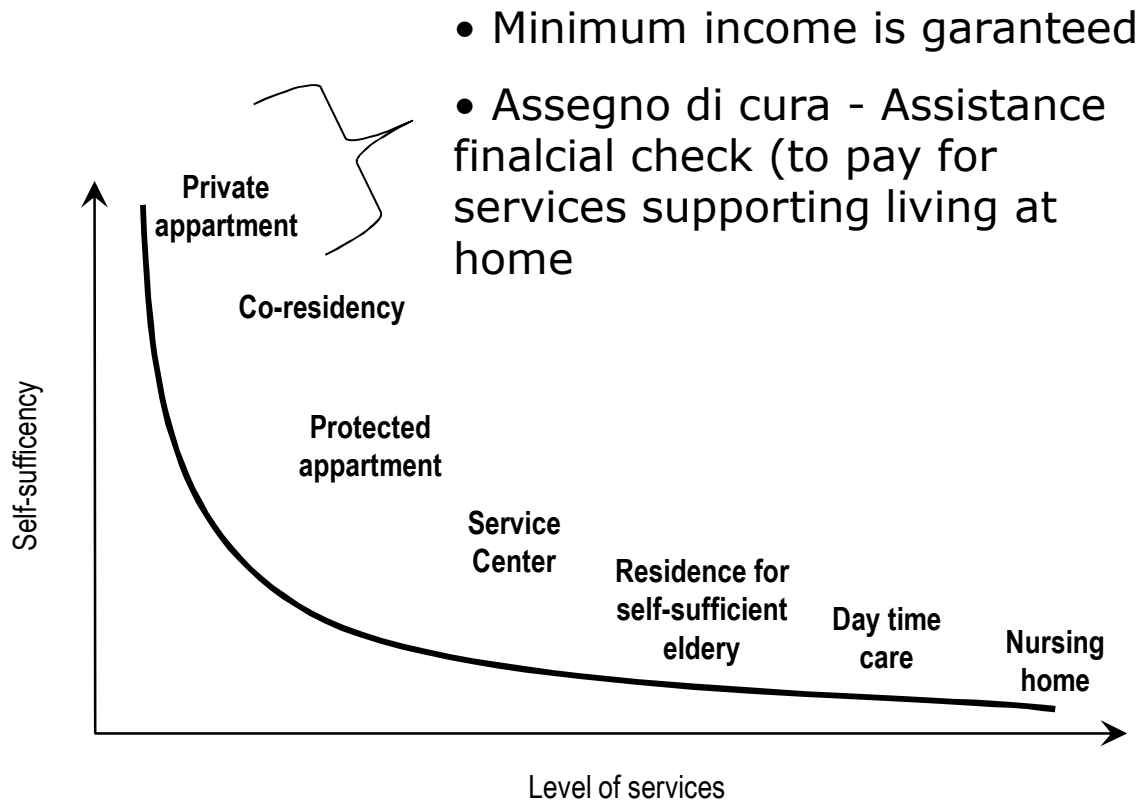


Policies and interventions: some examples 1/2

- Participation
 - Financial support of voluntary associations, of continuous learning programmes and cultural events
- Health promotion
 - Physical activity for the elderly
 - Walking groups in several municipalities
 - Training courses in healthy life style and physical activity in collaboration with the University of the elderly and free time (UTEDT → presentation of Laura Antonacci this afternoon)

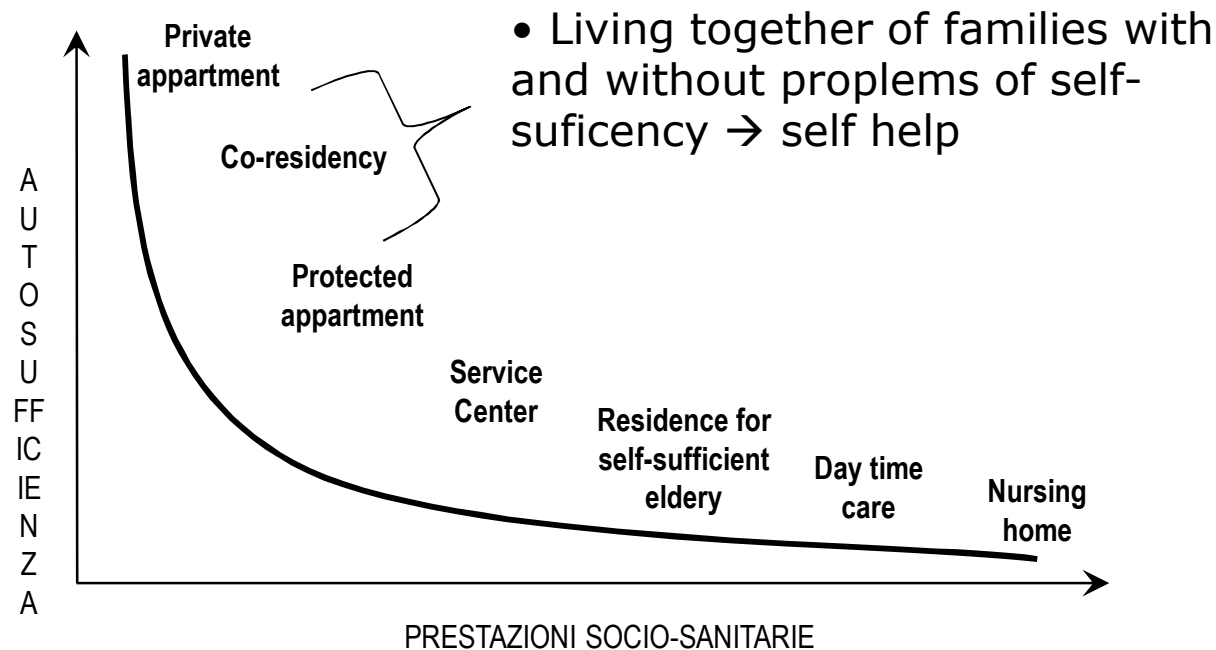
Policies and interventions: some examples 2/2

“ Housing and support of autonomous living



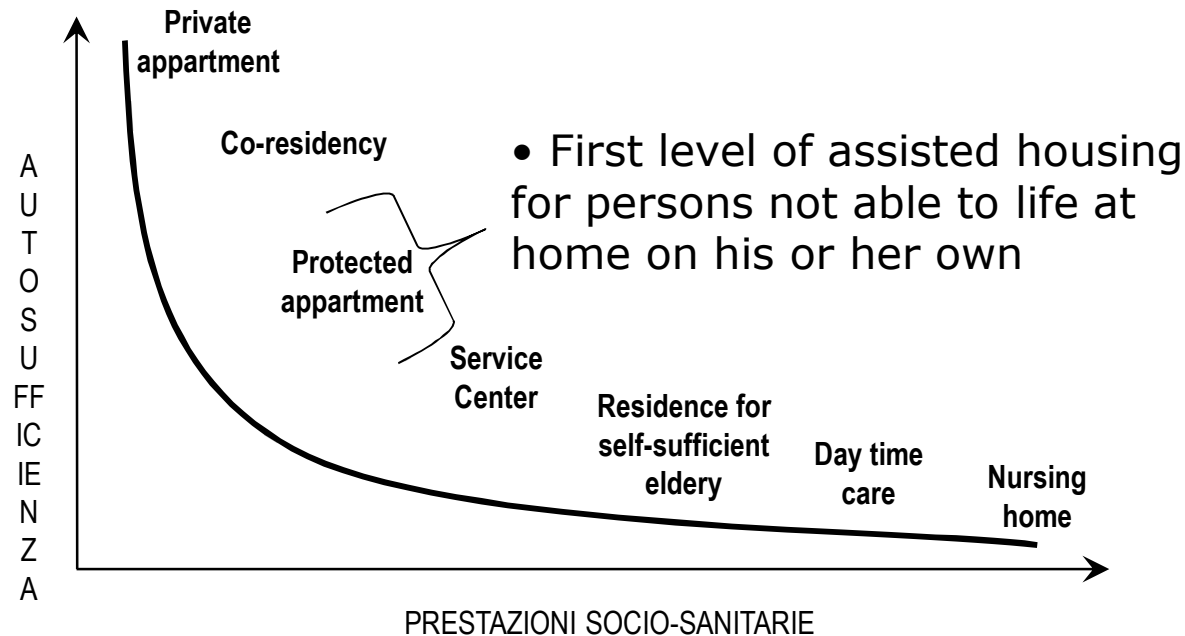
Policies and interventions: some examples 2/2

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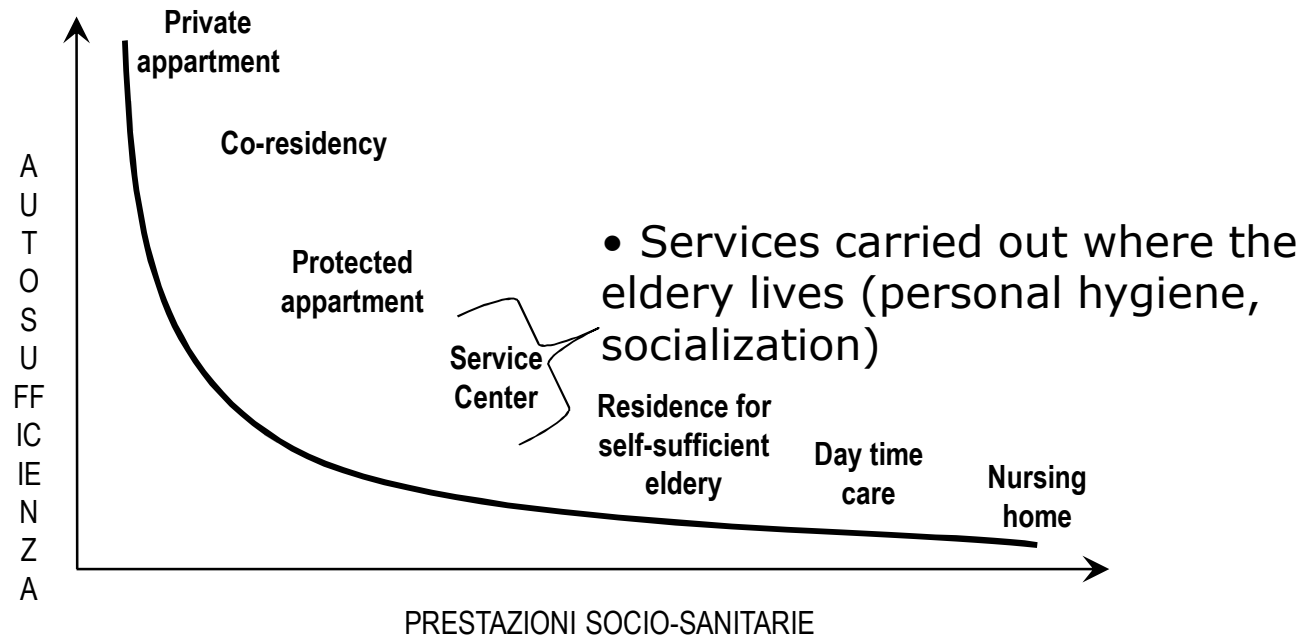
Policies and interventions: some examples 2/2

“ Housing and support of autonomous living



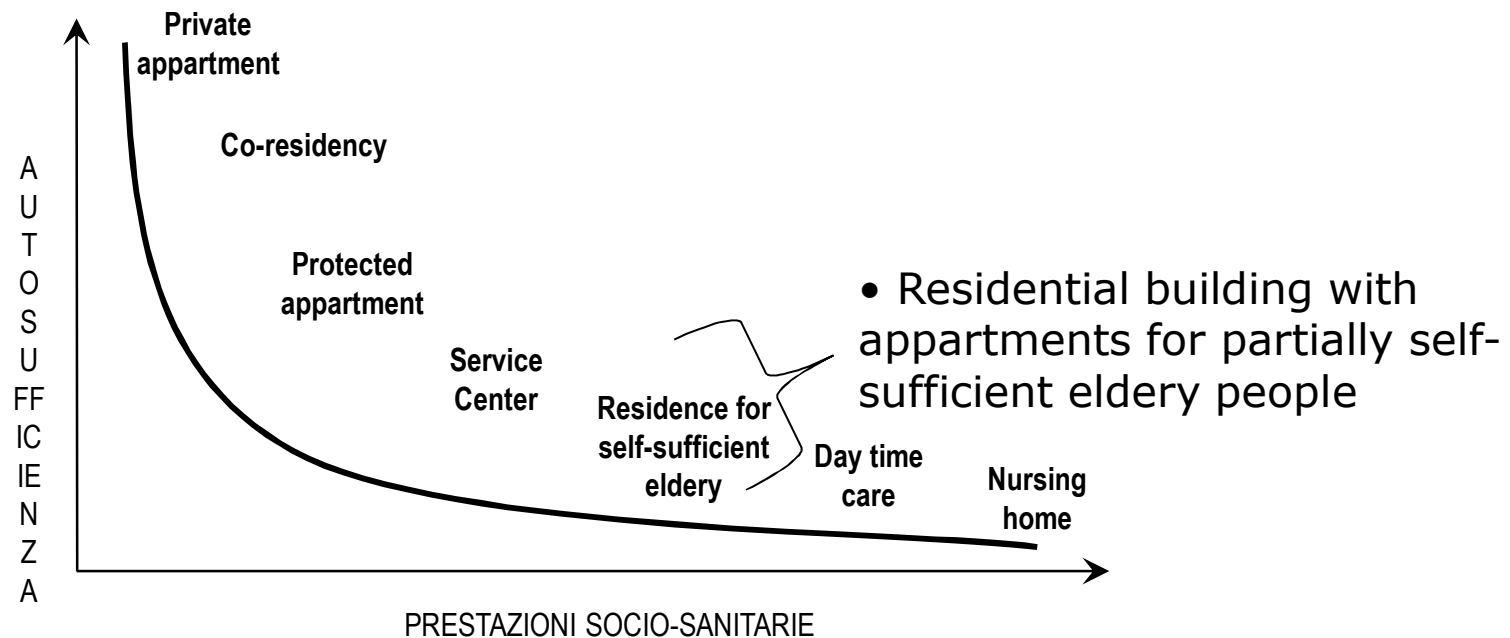
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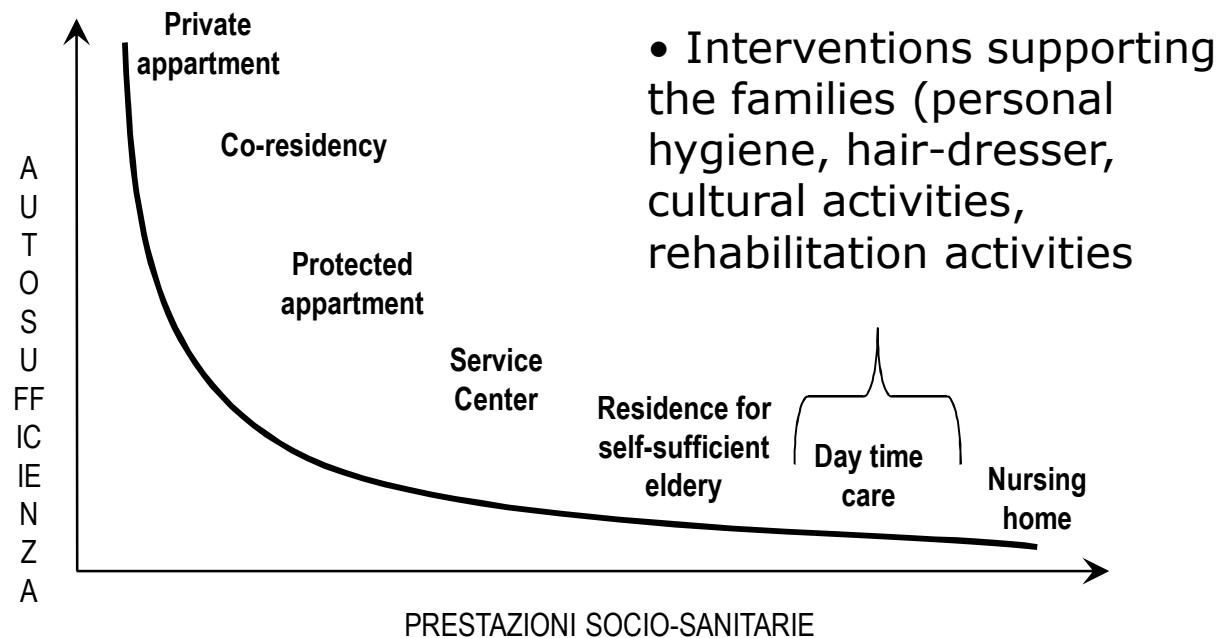
Policies and interventions: some examples 2/2

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Policies and interventions: some examples 2/2

“ Housing and support of autonomous living



Limits

- Monitoring
 - Small sample size → problems with subgroup analyses and (future) evaluation of trends
 - Difficulty in data collecting (home visits for vis-a-vis-interviews, collaboration with social services not always easy because of lack of epidemiological culture)
- Interventions
 - There are a lot of programmes and interventions supporting the elderly but there is no comprehensive strategy for active ageing in Trentino

Summary

- The population in Trentino is ageing
- The ageing is caused by longer survival
- A triumph of public health and a challenge
- The elderly in Trentino are mostly in good health and social conditions but
 - 8% are disabled, 20% show signs of frailty
 - 15% are at risk for social isolation
 - About 1/3 has at least some financial problem
 - Risky alcohol consumption is relatively frequent (but most elderly (77%) do either not drink or drink moderately)
- The Province Trentino is rich in high quality interventions and programmes in support of the elderly but there is no all-comprehensive strategy for healthy ageing which is recognizable as such