



Age-Friendly Public Health Systems: The Podcast Partnering with the YMCA to Advance Age-Friendly Work

Guest: Katie Adamson, Vice President for Health Partnerships YMCA of the USA Host: Dr. J. Nadine Gracia, President and CEO, TFAH

Interview Transcript

[00:00:00] **Katie Adamson:** The pandemic really showed us how many health-related needs older adults were confronting, and it just blossomed to the forefront for Ys.

[00:00:16] **Dr. J. Nadine Gracia:** That's Katie Adamson, Vice President for Health Partnerships and Policy at the YMCA. I'm your host, Dr. Nadine Gracia, President and CEO of Trust for America's Health, also known as TFAH.

Dr. J. Nadine Gracia: Hello, and welcome to the fifth episode of Age-Friendly Public Health, the podcast. When we talk about promoting the health and well-being of older adults. It's important to acknowledge that multiple sectors play a key role in advancing healthy aging and an age friendly ecosystem. That includes community partners that foster age friendly communities.

So we're excited to feature one of those community partners today, the YMCA. Our guest today is Katie Adamson, the Vice President for Health Partnerships and Policy at the YMCA. Katie provides guidance and consultation on healthy living policy, partnership, and program strategies at the national level and for local Y's and the state alliances.

She also helps advance healthy living legislative and advocacy strategies at the state and federal level including the drafting and implementation of legislative initiatives and accompanying policy documents, and she assists with congressional, corporate, and health partnerships. Welcome, Katie.

[00:01:27] Katie Adamson: Thank you. Good to be here.

[00:01:29] **Dr. J. Nadine Gracia:** Well, Katie, it is really great to have you on this edition of The Podcast. You know, the Y has a long history of community support and partnerships. How does this history focus your current programming?

[00:01:42] **Katie Adamson:** So thanks for that question and thanks for having the Y on your show, Nadine. Next year, the YMCA is going to celebrate its 175th anniversary and the Y was founded to help young men during the Industrial Revolution find a safe place to sleep, stay active, and respond collectively to community needs.

I think at the time it was to keep them out of the way of societal ills. In fact, at one point during our history, we were the largest hotel chain in the United States in terms of residency occupancies. Our focus on spirit, mind and body emerged around 1891. Also, it's a worldwide movement, which a lot of people aren't aware of in that we're in 120 countries around the globe.





[00:02:24] **Katie Adamson:** We now have shifted though. And throughout our history, we have shifted to the most pressing needs in our society. So those needs have ranged from relief during wartime, which led us to win the Nobel Peace Prize after World War II for support of prisoners of war overseas. night and vocational schools, being the first to teach English as a second language, and responding more recently in the 70s to latchkey kids, and then becoming the leading provider of childcare.

So, the Y has always been set up as an organization to respond to community needs.

[00:03:03] **Dr. J. Nadine Gracia:** 175 years. That is an amazing history for the Y and so many have their understanding of what the Y is, but may not know all of the current programs that the Y is engaged in. So it'd be wonderful to hear a little more about how your current programming is based on that really remarkable history.

[00:03:22] **Katie Adamson:** Yeah, and so I think a lot of people do think of us as sort of gym and swim, which is critical, especially with the chronic diseases we face in this country. But it's important. And I'm often saying we're not, you know, just a "Y" anymore. We're not just for young people.

We're no longer just for men. In fact, more women are members than men. And while we were founded on Christian principles, we now serve people of all faiths and religions. But we've always been, and we always will be a place for communities to gather and respond to these most pressing needs. There are 2,600 Y's in the United States. Seventy-three percent of U. S. households are within 10 minutes of a Y and we serve close to 17 million people in the U. S. And important to this conversation, over 3. 6 million of those are over 55. So those pressing needs in society today are addressing the leading cause of death and disability among adults and older adults – chronic diseases like diabetes, heart disease, arthritis – but also among our youngest children, the leading cause of death is drowning.

So, we have water safety programs across all ages. We are today, the leading provider of early learning school-aged childcare, summer day-in-resident camp, swim instruction for all ages, youth sports and adult sports, and one of the leading providers of food programs for youth during the summer supper and after school meal times. But we're also the largest in-person provider of evidence-based programs addressing chronic disease. And recently, and whenever there's an emergency, we step in as the frontline providers of childcare, food programs, and a place for emergency response teams to shower and sleep. And a place for society to connect to address the trauma from emergencies, which we're seeing more and more every day with the changing of the climate.

[00:05:13] **Dr. J. Nadine Gracia:** Katie, that's just such an impressive history and certainly an impressive way in which the Y is in communities and really meeting the needs, as you said, of communities around the country and really around the world. And your emphasis too on understanding it's more than gym and swim. A lot of us have that perception with regards to the Y. I want to dive in a little bit more to what you talked about is, also that the Y really services across the lifespan. A lot of people have the familiarity of what the Y does for our youth, which is important, but you also have programs that focus on older adults. And certainly, that's the focus here of our podcast today. What are some of the programs that the YMCA has developed to promote healthy aging and engage with older adults?

[00:05:58] **Katie Adamson:** Yeah, and I, I think this goes back to the, I've been at the Y now for 20 years. And when I came on, we had a very intentional innovations process where we would really try





to discover the best research and programs that were out there to further develop how those might look and feel and why we would activate the different programs in the community.

And if it worked at the Y, and it looked like it would be a sustainable model, then we would try to scale it with partnerships and support of other federal agencies and public health. These programs address both healthy aging, but also preventing and controlling chronic disease and injury. So we identified.

The best resource is an example in areas like the NIH diabetes prevention program or the different clinical trials that were out there for cancer survivorship programs that could help people reclaim their lives after going through cancer treatment. And then we would take that evidence-based research program and test that model in a set number of YMCAs. And again, see if we could replicate the outcomes of those trials and then do it in a sustainable way.

So, we have four evidence-based programs today that we kind of hold up as also some of the leading causes of death among older adults. So, the National Diabetes Prevention Program, which we built in partnership with CDC, The Live Strong at the YMCA program for cancer survivors, the Enhanced Fitness program – which addresses both arthritis control and falls prevention among older adults, and the blood pressure self monitoring program that helps individuals get control of their hypertension. And again, as I mentioned, these are typically based off of clinical trial work.

In some cases, we have actually paid for some more clinical trial work, as we did with our Livestrong program. We've also been tracking some of the cost savings, which we know is important for TFAH to really be able to make the case for prevention. And then we've been working to scale these programs for pretty much the last, I'd say, 15 years. And we serve over 250, 000 adults with these evidence-based programs and most of these programs enter at least 40 or more states, but not all communities, sadly. So we continue to try to scale those programs. I will say also that we have had Y's on their own working with research partners to scale evidence based programs that address both Parkinson's disease and Alzheimer's.

These programs haven't been scaled through our national office yet, but are on our radar for future and potential innovations and scale at a recent clinical trial with the National Institutes on aging. The funded academic institutions worked with 13 across the country to see if we could slow or stop cognitive decline with physical activity.

And in fact, we did, we either slowed or stopped it completely. But to scale these is a big process. So we have to have funding and staff and an innovation process to do it.

[00:09:03] **Dr. J. Nadine Gracia:** Katie, thank you for sharing really such powerful examples of the programs that the Y has really to promote healthy aging and support older adults.

I'd love to hear you describe even further how the Y helps to assure, you know, reaching older adults who, for example, may have less access to resources, who may be at higher risk. for certain chronic conditions and the way in which you tailor and reach those older adults to ensure they have a full opportunity for healthy living.

[00:09:33] **Katie Adamson:** Yeah, thanks so much Nadine. I think that I wanted to focus a little bit on where we saw this most and where the Y really had a big aha moment around the needs of our seniors during the pandemic when our YMCA shut down for health and wellness operations. The seniors that were used to coming to our building every day.





[00:09:54] **Katie Adamson:** We're struck by their loss of connection, and there was one YMCA, and I'll never forget this story, where it's a very rural community, and this little YMCA, these seniors came with their old folding chairs around this big oak tree in the front of the building, and they sat there every day to talk, and said that without the YMCA as a place to socially connect, they were getting so isolated.

So they just as a group decided they were going to show up, be outside, be mass, but have a place to connect with each other to stay mentally healthy. That same YMCA and many YMCA's across the country. started getting calls from seniors about their lack of ability to get to a pharmacy to get their medication and that they couldn't also get food in their homes.

Katie Adamson: And so the Y's started utilizing some of their staff to drive to the pharmacy and pick up the medical supplies and bring them to these individuals. And then also, Bringing groceries to their doors, but they also just started making senior checking calls over a million calls during the pandemic, just to say, hi, how are you doing?

Could we work on some physical activity programs together? Do you want to just talk? And they talked about how scared alone, socially isolated that their seniors were during this period. And I think a lot of that has continued. We. overnight turned our programming to be virtual. That's something that we so believe in personal connections and in in person personal connections.

It was hard for the Y to do this, but we turned all of our programming, especially programming for chronic disease. We turned it over to a virtual platform and, you know, many of our seniors weren't able to access. Some of the online tools that are available through zoom and teams. And so a lot of those programs were also hosted just by a simple phone call.

Katie Adamson: So we adapted to address the needs of those seniors, but a lot of their fears haven't changed. A lot of those seniors are still doing those programs from home. In order to stay safe, they're still concerned about COVID. They're still concerned about the flu, and they've determined to stay at home, but we need to keep them socially connected.

Katie Adamson: I would say additionally, one of the things we did with Health Begins, a really great company Rishi Manchanda runs, we have partnered with them around doing something called healthcare detailing. And that's really copied from the pharmaceutical industry, where we doorstep physicians offices and teach them about prevention.

Katie Adamson: Teach them about the services that are in the community. We know that there are populations that lack access to any kind of healthcare facility, even if it's more of just a facility like a YMCA, but also primary care. We also know that certain populations have higher risk of chronic disease. And so we have worked with Health Begins to try to work with the population at highest risk, the same folks that are going to have the highest cost in terms of lives lost.

Katie Adamson: We're health care dollars to the system, and we have tried to work to educate positions of where to send these people to help them improve their health care outcomes, reduce health care spending, improve overall quality of life. That could be a YMCA program that could be a meals on wheels. That could be transportation, as I mentioned how important that is to seniors, and we're trying to use really an innovative quality improvement approach with physicians offices around getting people to the services they need to improve their health care outcomes.

Katie Adamson: We see sort of a need to transform the way we work to address the populations we're serving.





[00:13:34] **Dr. J. Nadine Gracia:** These are all such valuable lessons, Katie, you know, of, of, Understanding how to adapt, learning, you know, what the needs are and that in the Y's case, you know, seeing that from the people that you're serving where they themselves are showing you their needs and that you're listening, staying attuned to that and really adapting to be able to serve them.

Dr. J. Nadine Gracia: Most effectively powerful lessons to share. Well, Katie, can you give us some examples of, of how Y's have partnered with public health to support older adults? You know, this is the age friendly public health podcast. And, you know, from TFAH's vantage point, we certainly focus on public health and prevention.

Dr. J. Nadine Gracia: And as I mentioned at the top of our conversation, how important it is that many sectors have key roles in advancing healthy aging. What's also important is that those sectors work together. So, would really love to hear you talk about how Y's have partnered with public health, and are there barriers to these partnerships, and if so, what's needed to overcome those barriers?

[00:14:33] **Katie Adamson:** Yeah, so Nadine, we do an annual survey of our YMCA's to try to get a sense of who they're working with on the ground. And so, Last year alone, 670 of our Ys had a direct partnership with their local health department, 535 Ys partnered with AAAs, Area Agencies on Aging, and 680 Ys were involved with active older adult initiatives in their communities.

Katie Adamson: These partnerships range from joint public health screening activities, to communications campaigns, to coalition work, to joint programming like diabetes prevention. On a national level, we spent over a decade in partnership with CDC, Robert Wood Johnson Foundation and Public Health, including TFAH and other sector leaders on our healthier communities initiative that worked on policies and environmental change strategies so that the physical environment, the built environment in our communities would be more walkable, bikeable, and that communities would have more access to healthy, affordable food and that Appreciate it.

Katie Adamson: The universally designed communities that would help mom in a wheelchair or grandma with a walker or a wheelchair be able to move seamlessly through communities and so those activities continue and Y's today in our partnership with CDC, several health departments across the country have utilized the CDC grant funding and the work of our local YMCA and worked with both our Y's and our YMCA state alliances that we have in all 50 states to take some of the evidence based programs that we have and use CDC funding to scale them.

Katie Adamson: The LIVESTRONG program is an example of that, as well as the Enhanced Fitness program. Additionally, the National Association of Chronic Disease Directors fought hard. to secure Medicaid coverage for the National Diabetes Prevention Program to be covered in a small handful of states. I know they continue to work on that today, but I think that that focuses on one of the, like, sort of most systemic changes we worked on with public health in terms of older adults, and that is to get Medicaid to start paying for some of the evidence based health interventions.

9 Katie Adamson: The YMCA was awarded back in 2012 with a Center for Medicare and Medicaid Innovation Award. We are one of the only nonprofits to be awarded such funding opportunity, and we partnered with a dozen public health and patient advocacy partners to test the diabetes prevention program in communities to see if we could reduce spending.

Katie Adamson: for Medicare, improve health outcomes for Medicare, and quality of care, and we did so. Over the course of the project, we were able to reduce spending by 2, 650 per older adult over 15 months, and we also improved both health outcomes and quality of care, and the pilot became a





covered service in Medicare, now known as the Medicare Diabetes Prevention Program Expansion Project.

Katie Adamson: But unfortunately, Just because we got it as a covered service doesn't mean that seniors are accessing it or we have enough service providers delivering it because it was set up in a very health system way, which doesn't work really well with community based organizations. So we've worked. Over the last eight years to fix some of the problems in the program through the regulatory process with the Diabetes Advocacy Alliance, a coalition we're part of.

[00:17:59] **Katie Adamson:** So, you know, we've tried on all levels from local health departments to partner with public health to state level. to national level to try to move systems and build joint program capacity, communications campaigns. So lots of examples of partnership with public health. I think our most recent one, we have worked directly with states and their Medicaid managed care organizations to try to help low income seniors access the Y programs.

Katie Adamson: And we have had contracts with Medicaid. managed care organizations to enable seniors to come to the Y and access many of our evidence based programs in about 18 states. So we have been actively working on that policy and programmatic strategy as well.

[00:18:44] **Dr. J. Nadine Gracia:** Okay. These are great examples. You're demonstrating multi-sector partnerships in action. Wonderful to hear how the Y is partnering. I mean, 670 local health departments, partnerships with federal agencies like the C. D. C. Many partners that we at TFAH also have and also philanthropy. And when you mentioned, for example, the Robert Wood Johnson Foundation. So really great advice that you're sharing for the field on how to Engage in these types of multi sector partnerships.

Dr. J. Nadine Gracia: I want to move to talking about the framework that you use as it relates to healthy aging. We're a big proponent of having these frameworks to also be able to take these types of programs and initiatives to scale. The YMCA has an approach to healthy aging that's called the Four P's. Can you talk about and describe this framework for us and how you've applied it to this work?

[00:19:32] **Katie Adamson:** Yes. And I want to put the context around the framework in that the Four Ps was developed in a pretty comprehensive toolkit that we created just before the pandemic. And so that got put on hold. But let me walk through what the four Ps are because the goal was always to create this large tool, but then to, again, use human-centered design principles, innovation strategies.

Katie Adamson: The Y doesn't just say do this in your Y and it will work. We like to test it out and see because, again, some of the strategies will be different depending on the community, depending on the resources at the YMCA, depending on partnerships, etc. So I'm going to go through the Four P's, but then I'd like to talk to you a little bit more about how we're going to scale.

Katie Adamson: This once we've created a really good model and a whole bunch of best practices. So the first P in the framework is 'principle.' So, our 'principles' within our YMCA is how do we operate. So, from – enhancing our facilities, access to individuals, older Americans, to improving information and communication strategies so they're more accessible. The presence of dedicated and inclusive staff and staff that reflect the community we're serving. So older adult staff are often our program deliverers in the enhanced fitness program. They graduated, they loved it, it was a way for them to get engaged. So we train them to be the staff and establishing a mechanism for aging adult engagement.





Katie Adamson: So 'principle's underpin a healthy aging-friendly YMCA and provide a foundation for implementing what we will then later call an action planning process. So, for example, in the 'principles.' But just to go a little deeper, so you understand what I'm talking about. We've created a facilities assessment tool that help Ys walk through their facility and look for any falls risks, either around the swimming pool – no throw rugs on the ground, no shiny waxed floors. So falls risks, access to water fountains near and around older adult classes, making sure classes are located near bathrooms, creating spaces for social connection, and then ensuring communications is age positive from photographs to how we communicate around active older adults. As opposed to saying seniors, which a lot of older adults do not want to be called.

Katie Adamson: So how are we communicating to our audiences, to offering screenings and health education programs and having older adult committees that help us design all of this who we hire matters and training is essential staff needs to reflect on all the populations we serve. And so principles. How do we operate as an organization?

So that's one P. 'Programs,' including both a wellness and a purpose lens. How are we meeting aging adult needs across our wellness tier? So, primary, secondary, tertiary tier. And incorporating design principles that attract participants and members to come to our program. So, you know, that there might be an older adult that is living with somebody with Alzheimer's and needs to have a day out.

How do we create an environment where it can either support their aging adults or just give them a break from being at home. So what do those programs look like? How do we also deepen social impact? So we know a lot of seniors are dealing with food insecurity. How are we going to partner with AAAs to extend our reach?

And then how do we – we like to call it 'health meets social approach.' So how are we making sure that our health programming is also recognizing health-related needs and human needs of the population we're serving? And then Partnerships is really how do we link all these programs inside our four walls?

So all that's going on in our community and all the active older adult aging communities that are happening outside of our four walls so that we can meet both interrelated needs, but also have a broader impact on systems with policy change. And then finally is 'policy change.' And so how do we take all of this work, realize what we're learning, and then lean in on policy to improve our communities to be more age friendly at the state, local and national level.

Does that help understand those four P's and. Just setting up tools and resources for Y's to dig in and really have empathy and understanding across all the four P's.

[00:24:06] **Dr. J. Nadine Gracia:** Can you talk about this program and what some of the outcomes were?

[00:24:10] Katie Adamson: Yes. So I think it's also super relevant to what I was just talking about.

So we determined since we created this wonderful tool before the pandemic and then didn't get to activate that tool in our YMCA's, that we would actually go deeper utilizing the tool, updating the tool because the tool is years out of date. And I know, Nadine, in this world, coalitions come and go. There's new science, so we want to update that tool that talks about the four P's. And so we convened





a group, Competitive Opportunity, a group of Healthy Aging, YMCA – some of our best and brightest – to come to the table and help us update the tool. But in addition to that was to gather insights and programs that could help be incorporated into the tool to inform some of the tool and also refine an action plan and decision mapping tool that is going to accompany this larger tool kit we created.

So, we had 48 YMCA's that were supported by YMCA of the USA through this last year, and we had four separate. We had one on principles, one on practice, one on program, one on policies over the last year. And so 48 total Y's involved in that cohort that dug in and actively were working on updating that toolkit.

Katie Adamson: The phase two of that toolkit is now underway. We have six separate healthy aging cohorts underway involving 76 YMCA's and six separate we call them SDP's or they're sort of specialized Y's service delivery partner Y's that can help train more than those 76 Y's – once this process is done – on how to implement what comes out of this cohort.

And so, they're going to finalize the updating of the healthy aging capacity building guide. And my understanding is by June or July of this year and have some resources and tools that will accompany those guides and tools that go along with that healthy aging capacity building guide. So the updated guide will be a flexible self-service reference for individuals, teams and organizations in the Y movement, and they can utilize those with their partners.

[00:26:26] **Katie Adamson:** In fact, partnership is a big part of it. It incorporates all this innovation I've been talking about that will enhance our program services and business models. And it sounds so in the weeds, but I want you to understand that we've worked with the Institute on Healthcare Improvement over the years and the human centered design principles to really refine what we offer and how we offer so that we're meeting the wants, needs and interests of the very people we serve. So we do a lot of research with populations that don't come to our buildings today and with those that do and say, how can we make our work more relevant to your daily life, what do you need that we're not providing.

And then we actually storyboard this. So Y is not just creating programs we *think* people will want. We actually create things that people *need*. And so there's a big process that goes along with that. And so, like I mentioned, we'll have Y's walking through their facilities and deciding, are these safe places for older adults? Is the writing on our wall big enough? Do we have enough ways to communicate with our seniors that works for them or older adult populations that works for them? And so. This is a process. It's an ongoing iterative process. And so it's exciting to me that it's not just a cookie-cutter toolkit, but that there are tools that go along with it and action planning guides that help Y's meet the wants, needs, and interests of the people in their communities and meet the needs of older adults, engaging older adults in the process.

[00:27:58] **Dr. J. Nadine Gracia:** Thank you, Katie. You know, these are such informative practices that you have in place and how you're working to do these enhancements for the toolkit and what you're also stating very clearly and is certainly at the foundation of any community based organization is putting the people first and meeting their needs.

As you said, not designing programs that you think people will want. Katie. But really hearing from the community and addressing what they need. Those are really important lessons for us all to hear. And this has been such an amazing conversation with you. I'd like to ask you as we come to a closing, if there's anything else you'd like to share with our listeners today.





[00:28:40] **Katie Adamson:** Yeah, I would love to offer warm handoffs. If there are organizations that are listening that want to connect with a particular Y in their community or our state alliance of YMCA's that might be working on a statewide level, I'm here to help connect them to our YMCA's. And so I just want to say that there's no wrong door to coming into the Y, but sometimes it's harder to find the right person at the Y to start a partnership.

And so I am happy to share that I'm at katie.adamson @ YMCA.net and anyone can reach out to me directly to connect with their local Y and start having conversations about working with them, the older adult population or starting a committee of older adults that you want to help the Y with this whole process.

We stand ready to partner with you.

[00:29:26] **Dr. J. Nadine Gracia:** Well, to our listeners, that was a sincere and genuine offer from Katie. I hope you will take her up on that offer in terms of helping to make those connections, that warm handoff, and really facilitating those types of partnerships. in your communities. Katie, it's been such a pleasure speaking with you, learning more about the why, hearing about your commitment and focus to promoting healthy aging and supporting older adults.

Thank you so much for being with us.

[00:29:53] **Katie Adamson:** And Nadine, thanks for everything that you do at TFAH to make sure that we're all aimed at the best practices and the evidence because we couldn't do it without you. So thanks so much.

[00:30:03] **Dr. J. Nadine Gracia:** Well, thank you again, Katie. It's been such a pleasure speaking with you. For our listeners, please feel free to share this segment on your social media channels and look for an announcement of our next segment, which will be released in the next few months.

You can also learn more about the Age Friendly Public Health Systems Initiative on our website at AFPHS.org. That's A F P H S dot O R G. Thanks for tuning in.