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Assuming personal responsibility for the state of one's health

- 1 WHEREAS individuals make choices about the food that they eat, the physical activity/exercise in which they engage, and the lifestyle they lead;
- 2 WHEREAS many health problems can be prevented or alleviated by changes in behavior, lifestyle, or treatment plan;
- 3 WHEREAS all individuals, including older individuals and their families and caregivers, need adequate information to make informed choices about health care, personal assistance, and rehabilitation services;
- 4 WHEREAS well-informed health care providers and recipients create more efficient and effective health care services;
- 5 WHEREAS cultural differences influence and determine lifestyle choices and opportunities; and
- 6 WHEREAS older adults are normally their own primary providers of health care;

THEREFORE, BE IT RESOLVED by the 1995 White House Conference on Aging to support policies that:

- 7 Ensure that all individuals, especially older adults and caregivers, have full access to wellness and health educational programs, services, and facilities, so that they may provide sufficient self-care and know when to seek appropriate professional care;
- 8 Provide information to all persons, especially older adults, about disease prevention, and detection; chronic disease management; accident prevention; the consequences of smoking, substance abuse, and poor nutrition; emergency response technology; mental health; and wellness programs;
- 9 Educate all persons in the community about the diversity of the aging process, including possible physical, emotional, and social changes affecting older adults, and evaluate the effectiveness of such educational programs;
- 10 Utilize and promote traditional and non-traditional means as well as new technologies and innovative approaches to distribute information to older adults, their families and caregivers, including the frail elderly and individuals who are homebound or institutionalized, and include follow up support;
- 11 Ensure that approaches and materials are culturally and linguistically appropriate and accessible to both urban and rural populations;

- 12 Implement/expand the Indian Health Service Elder Health Program to provide geriatric/gerontological training and elder wellness programs, and require that all programs of the Indian Health Service, including tribal and urban health programs, have access to prevention, promotion, and wellness programs.

