

Selected Highlights

The 2009 International Conference on Aging in the Americas (CAA) began with a dinner at the LBJ Library on Tuesday, September 15, 2009.



September 15-17
Austin, Texas



Jacqueline Angel, Professor of Sociology and Public Affairs opened the program: “Biobehavioral Underpinnings and Social Interaction on Hispanic Health” with **THE WELCOME**.



Peter Ward, C.B. Smith Sr. Centennial Chair in US-Mexico Relations and Professor of Public Affairs and Sociology introduced the **After Dinner Speaker**.



Dr. Ronald Angel, Professor of Sociology made a presentation: “Agency versus Structure: A New Twist on an Old Debate.”



Keith Whitfield, Professor of Psychology, Duke University introduced the **Keynote Speaker** on Wednesday, September 16.



Mark Hayward, Director of the Population Research Center, The University of Texas at Austin delivered the **Opening Keynote Address** *Developmental Origins of Healthful Aging among Hispanics: Toward a Transdisciplinary Conceptual Framework.*



Julio Frenk, Dean of Harvard University School of Public Health, “Skype Discussion of Human Security and Health: The Case of the U.S./Mexico Border.”



Fernando Torres-Gil, introduced the **Closing Keynote Speaker** on Thursday, September 17.



Luis Miguel Gutierrez, Director of Geriatrics, Mexican National Institute of Medical Sciences and Nutrition. *The Mexican Institute of Geriatrics and Hispanic Health: An Opportunity for Networking and Synergic Action.*



Kate Chambers, LBJ CHASP Graduate Research Assistant takes notes at the Consensus Building Session immediately following the invited speaker presentations with Co-Presidents, Kyriakos Markides, and Keith Whitfield.



U.T. Chancellor
Francisco Figarro



U.T. Vice Provost and Dean
of Graduate Studies,
Victoria Rodriguez



First Place Winner of Graduate
Student Poster Session Zeki
al Hazzouri, U. Michigan with
Terrence Hill, Chair Juried Panel

**Eileen Crimmins, Invited
Speaker**



**Conference Co-Organizer, Kyriakos Markides
with Hector Gonzalez, CAA Advisory Group
Member, Jennifer Salinas, and Keith Whitfield.**



**LBJ PhD student, Stipica
Mudrazija and Rebeca Wong,
Poster Judge and CAA
Advisory Group Member**

More photos found at http://www.utexas.edu/lbj/photos/2009-2010_events/aging_in_the_americas_conference/slideshow

ACKNOWLEDGMENT

We are grateful to the following sponsors for providing generous support and in-kind contributions for the Third international Conference on Aging in the Americas (T-CAA): Biobehavioral Underpinnings and Social Interaction on Hispanic Health. The Third CAA was held on September 15-17 at the University of Texas at Austin campus.

Office for Special Populations at the National Institute on Aging

NIH/National Institute on Aging (R-13) Conference Grant Award

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Population Research Center, University of Texas at Austin

Policy Research Institute, LBJ School of Public Affairs, University of Texas at Austin

Office of Graduate Studies and the George W. Jalonick, III and

Dorothy Cockrell Jalonick Centennial Lectureship, University of Texas at Austin

The University Co-op

2009 International Conference on Aging in the Americas, Biobehavioral Underpinnings and Social Interaction on Hispanic Health Conference Proceedings

The disparities in global health can burden countries developed and underdeveloped alike. Researchers wage an ongoing battle on how to approach these key issues. After all, a healthy globe is the only thing that will give this world a fighting chance. The third installment of the *International Conference on Aging in the Americas* aims at doing just that. By taking an interdisciplinary approach to the issues of Hispanic health and health care policy research, academics from varying disciplines settle on differing degrees of significance these topics (in the context of each discipline) have and will have in the future. With the sharp increase in immigration and an aging Hispanic (as well as non minority) population, the issues relating to poor health are critical to creating a healthful society. The conference this year, lasting a short three days, examined through a unique lens the biobehavioral underpinnings as well as social interaction during a series of lectures. Finally, the conference deduced what is lacking in the research in order to develop effective health care policy in the Mexican Origin population.

Ronald Angel, a distinguished medical sociologist and an expert on aging and the life course research, kicked off the conference Tuesday evening with a captivating address entitled “Agency vs. Structure: A New Twist on an Old Debate.” He emphasized without romanticizing, the new research interest of genes and their effects on the life span. He began by defining what agency and structure mean: comparing agency, which is the capacity to act on one’s own behalf, and on the other hand structure, “the factors that limit the ability of humans to act as agents.” Dr. Angel stated that health problems must be addressed from multiple levels of analysis and intervention, highlighting the challenges of using genetic profiles in Hispanic aging research. Toward that end, he introduced the goal of the conference by asking: “How will an understanding of human biology inform our understanding of the social aspects of aging in new and novel ways, especially with relation to race, ethnicity, and social class?”



On Wednesday, Dr. Mark Hayward began with a keynote address. He outlined the need for a transdisciplinary approach to the key issues in health. Testifying to the accomplishments of social science in this area, Dr. Hayward also addressed the shortfalls of this discipline in explaining the issues plaguing the Hispanic population. The Hispanic Epidemiological Paradox is a key principal in today’s health world, and understanding the paradox help develop policy to address it. He offered several social science explanations



for the paradox; however, emphasized the disagreement in the field and the lack of a complete explanation. Dr. Hayward supports the idea of looking to other disciplines to supplement the research in order to create a more thorough understanding. One problem concerning the research on the Hispanic population, according to Dr. Hayward, is that there is no evidence of data collected on Hispanic health before 1990. Furthermore, when retrieving data today, ‘Hispanic’ is one giant category, and in reality, there are many subgroups of Hispanics. We cannot ignore the important inter-group ethnic disparities and the many differences among them. Instead, these differences must be studied in order to characterize the population accurately. In his conclusion, Dr. Hayward draws attention to the mutability of the Hispanic population. Like any population it is not stagnant, and thus “the research must evolve with the population.”

The first section of the conference, entitled *Biology and Behavior: A Two Part Harmony*, addressed the subtopic of the conference. Although the conference was mostly attended by social scientists, the new portion dedicated to the biological underpinnings and their affect on the life course was relevant and novel. Dr. Anthony Comuzzie has completed a range of research projects dedicated to the genetic explanations for and links to chronic disease. Dr. Comuzzie outlined the phenotypic characteristics seen in someone with obesity, and explained the transition from this to discovering the genes underneath. He expressed the importance of understanding that diabetes (and most diseases) is polygenic and that many genes must be expressed together to have an effect on the phenotype. He quickly dismissed the myth that they would discover a ‘diabetes gene’ or ‘obesity gene,’ and explained from a standpoint of a geneticist the importance of gene linkage and association when journeying from phenotype to gene. Dr. Comuzzie, never claiming his discipline as the sole contributor to health research, constantly acknowledges the importance of looking to environmental factors as well. His lecture was innovative, as a result of his groundbreaking research, and from the perspective of his discipline was very informative. It brought depth and the well-rounded perspective this conference was trying to achieve.

A second lecture, in the *biology and behavior* portion of the conference, was given through video in a truly innovative method using Skype. Dr. Julio Frenk, Dean of the Harvard School of Public Health, delivered a lecture from the comfort of his office, with as much gusto as if he were sitting in front of the audience. In his cyber lecture, he argued that it is vital to attain *human security in health*, and solely possible to seek this through international cooperation. Dr. Frenk sees attainability of these through the ever-growing resources available for health. He presented three of the



most vital dimensions in health: financial, health-care, and epidemiological security. Financial security refers to the protection against the “economic consequences of disease.” The second, health-care security, concerns safety from any harm a physician may inadvertently cause and protects the dignity of patients. Finally, epidemiological security conventionally refers to protection from injury caused by biological and chemical agents. These three dimensions are the most relevant to the health field today, and all contribute to reaching security in health.

The latter part of the conference entitled *Family, Work, and Rest* focused on how social resources impact health and well-being of older people of Mexican origin. Dr. Kyriakos Markides who discovered the Hispanic Epidemiological Paradox, presented findings from the Hispanic Established Population for the Epidemiologic Study of the Elderly (Hispanic EPESE), an ongoing longitudinal study of the health of older Mexican Americans. For example, he and his colleagues have found a growth in incidence of chronic disease among older Mexican origin people whose population is now characterized as having high rates of diabetes. He noted that although Hispanics are living longer, older Hispanics are severely frail and disabled in their later years, and an overwhelming majority do not have adequate health care (Medicare, but lacking MEDIGAP).



The closing keynote address, delivered by Dr. Luis Miguel Gutierrez Robledo, brought the conference to an informed end. In his lecture, he described the purpose of the new Mexican Institute of Geriatrics, and explained the goals to promote healthy aging in the Mexican population. Cultural characteristics affect health and health behaviors and are believed to vary between Mexico and North America. He identified the truths and dispelled the falsehoods that punctuate popular held beliefs. This institute will be crucial in delivering much needed new data on the aging Mexican population and provide a comparison for the Mexican-origin population in the U.S. Concluding his lecture, Dr. Gutierrez discussed that prevention and health promotions are both key in an effective public health approach.



The conference ended with a thought-provoking consensus-building session. The goal of this forum was to find areas of agreement, disagreement, and gaps in research of biobehavioral effects and social interaction on Hispanic aging. A general consensus among this diverse group of aging researchers was reached on a variety of conceptual and methodological issues related to Hispanic health. For example, participants agreed that a transdisciplinary approach is vitally important to address the unique health care needs of

the Hispanic population. Much of the literature on Hispanic and Mexican-origin health outcomes, or those of any other group, cannot deal with individual differences in disease susceptibility since information on risk factors other than self-reported risk behaviors and family and personal health history are not available. Nonetheless, at the appropriate level of analysis an understanding of the interaction of genes and environment offers great promise, especially in more accurate identification and understanding of risk. We know that Mexican-origin individuals are, as a group, at elevated risk of diabetes and its complications. Yet, like all human populations the Mexican-origin population is highly



outbred, and the ethnic label itself represents more of a political label than a meaningful genetic or medical category. The promising contribution of genetics is in allowing us to more accurately identify those individuals at highest risk of specific diseases and their complications. It might also make more targeted and effective interventions possible. For example, if someone identifies him or herself as a Mexican or Mexican American a physician tests glucose levels and perhaps

looks for other markers, such as glycosylated hemoglobin. A better understanding of genetics holds out hope for better prevention and treatment of disease. More studies are needed to address the question of how knowledge of group membership can be combined with biological and social factors to help understand the unique health risks of older Hispanics. For these reasons, participants agreed that it is crucial to focus on individual health through genes to build a more accurate picture of the health of the Hispanic population.

In conclusion, the conference shed new light on the need for a collaborative effort in investigating Hispanic health and the protective role of immigration and family. The conference brings a comprehensive understanding in examining Hispanic health in the United States and Mexico. As a result of the nature of research, the work Hispanic health field is spread around the U.S. Without conferences and consensus building sessions to fill one another's holes, the toil of these researchers would become disjointed. Finding solutions to improve Hispanic health, and providing explanations for health trends is one portion of the process toward reaching an understanding of global health. The effect of globalization has led to a sharp increase in immigration, and the study of the fastest growing minority in an influential nation can offer the answers for making a healthful future for a global society.