

1101 14th Street NW, Suite 1220 Washington, DC 20005 1.202.842.1275 www.geron.org

Meaningful Lives As We Age

September 15, 2024

Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (ICC) Administration for Community Living 330 C St SW Washington, DC 20201

RE: Feedback on Strategic Framework for a National Plan on Aging Delivered via Response Form

Dear ACL and ICC Colleagues,

The Gerontological Society of America (GSA) appreciates and applauds the Administration for Community Living (ACL) and the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (ICC) for composing the Strategic Framework for a National Plan on Aging, and seeking feedback on the Framework, which has sparked a dialogue to leverage the strengths of federal, state, and local agencies that seek to support older people across the U.S.

Founded in 1945, GSA is the driving force behind advancing innovation in aging — both domestically and internationally. Our members come from more than 50 countries. We foster interdisciplinary collaboration among behavioral and social scientists, physicians, nurses, biologists, psychologists, social workers, educators, economists, policy experts, practice leaders, those who study the humanities and the arts, and many other scholars and researchers in aging. We believe the intersection of research from diverse areas is the best way to foster ingenuity, achieve the greatest impact, and promote optimal experiences of aging.

1. What do you like about the Strategic Framework for a National Plan on Aging?

We appreciate the multifaceted approach in cutting across silos of support and services that older people depend on to lead healthier lives as we all age together. The framework supports a National Plan on Aging seeks to build a movement supporting older peoples' preferences and needs, while promoting respect and dignity in supporting multi-layered planning efforts on various levels of government. We appreciate the cross-cutting values of person-centeredness, inclusion, respect, and collaboration and innovation.

GSA also commends ACL, ICC, and its federal partners in taking a comprehensive approach to supporting older people, including addressing elder justice, seeking to break patterns of ageism and ableism, which are recognizable barriers to older people to thrive in their communities.

We support the Framework's approaches to addressing Age-Friendly Communities using accessibility and universal design, the commitment the Framework has for social equity and diversity, addressing workforce and paid and unpaid family caregivers, the approach to bolstering the Geriatrics Workforce Enhancement Programs (GWEP), actions to mitigate social isolation and loneliness and improve social connectivity, and the advancement of tools and collaboration of agencies on national and community-oriented programs, such as promoting vaccines and vaccine access and reducing falls and fall-related injuries.

GSA also supports the approach to safe, affordable, and accessible housing, preventing homelessness, increasing availability of accessible transportation, addressing barriers to financial security and employment for older people, and seeking to improve access to Medicaid long-term supportive services for people who are eligible, as well as state-based innovations that facilitate financing and programs.

We commend ACL and the ICC for acknowledging multi-sector state and local plans on aging serving as models and guideposts. The importance of coordinating with the existing state and local aging plans is a tremendous strength.

2. What is missing from the Strategic Framework for a National Plan on Aging?

GSA supports expanding utilization of the Research, Demonstration, and Evaluation Center for the Aging Network, launched in 2023, not only with regards to the Center focusing on falls prevention, but other interventions and educational strategies that would lead to healthier lives for older people.

As the oldest and largest interdisciplinary organization dedicated to research, education, and practice in the field of aging, GSA encourages a robust evaluation and research component which we hope will be embedded throughout the Framework.

When funded adequately, the Center will produce high-impact, evidenced-based programs administered by ACL across the aging network. GSA had direct involvement in creating the Center during the last Older Americans Act (OAA) reauthorization process in 2020.

We encourage ACL and the ICC to consider measuring whether various actions resulting from the Framework are successful, and how processes should be evaluated and when successfully established scaled.

3. What could be added or changed to the Age-Friendly Communities domain in the Strategic Framework for a National Plan on Aging?

GSA encourages a more direct approach to the impacts of societal ageism in the Framework, and inclusion of resources for society as a whole to be more inclusive of older people.

Research has increasingly demonstrated the impact of language on service delivery and policymaking. GSA recommends ACL and the ICC study the effectiveness of how addressing ageism and age discrimination can inform the implementation strategies for creating age-friendly communities and language in the National Plan.

Led by GSA, the <u>National Center to Reframe Aging</u> is dedicated to ending ageism by advancing an equitable and complete story about aging across the U.S. The center is the trusted source for proven communication strategies and tools to effectively frame aging issues. It is the nation's leading organization, cultivating an active community of individuals and organizations to spread awareness of implicit bias toward older people and influence policies and programs that **benefit all of us as we age.** The National Center acts on behalf of and amplifies the efforts of the ten Leaders of Aging Organizations.

The National Center to Reframe Aging offers **evidence-based communications strategies** to improve understanding of aging and the many contributions of older people in society.

GSA encourages ACL and the ICC to integrate these reframing principles throughout the report and within federal agencies and departments that serve older people.

We encourage ACL and the ICC to research technological advancements that promote digital inclusivity among older populations to guide the plan to build more inclusive age-friendly communities that would increase social connections. There is much opportunity in making available additional resources and increased supportive measures in technology that would result in increased social connectivity for older people.

Regarding access to transportation in rural areas, GSA encourages ACL and the ICC to acknowledge the disparities and propose solutions towards greater equity. Lack of transportation access has proven to negatively impact social determinants of health in older people.

4. What could be added or changed to the Coordinated Housing and Supportive Services domain in the Strategic Framework for a National Plan on Aging?

GSA recommends ACL and the ICC address the impacts and resources to protect older people from and combat housing discrimination, especially among older minority populations. Offering education and services regarding provisions that protect older people against barriers to housing and how to report discrimination is recommended.

Further, we recommend inclusion of coordinated services and resources in both public and private housing living situations, including community-based programs and case management. Increasing resources and assistance programs for older people with low incomes is also encouraged.

GSA recommends a unified, accessible system that identifies available affordable housing that would allow greater access for older people. This system could also identify waitlist notifications for specific housing units.

GSA recommends ACL and the ICC research best practices for educating older adults on available services and how to properly access them can support the Framework's efforts to improve coordinated housing and supportive services.

5. What could be added or changed to the Increased Access to Long-Term Services and Supports domain in the Strategic Framework for a National Plan on Aging?

GSA encourages ACL and the ICC to include the encompassing range that Long-Term Services and Supports (LTSS) from long-term care facilities, in-home care, and other settings by both paid and unpaid caregivers. In addition, in a culturally appropriate way, the Framework should continue to work towards building equitable access along the LTSS system and meet the needs of underserved and minority populations.

We also encourage ACL and the ICC to address the need for increased support for Adult Protective Services (APS) program and the Long-Term Care Ombudsman (LTCO) program to help protect older people from abuse, fraud, and financial exploitation. The Framework should include addressing system inequities and promoting innovative practice for both programs.

GSA recommends ACL and the ICC include additional mental health interventions for older people that can help develop targeted strategies to reduce isolation and improve mental health, enhancing the Framework's efforts in health care and supportive services.

GSA recommends ACL and the ICC research additional refining strategies to increase access to LTSS and integrating these services with healthcare and housing can support older people in living independently.

6. What could be added or changed to the Aligned Health Care and Supportive Services domain in the Strategic Framework for a National Plan on Aging?

GSA supports increasing efforts within the Framework to highlight the need to recruit and support the next generation of aging researchers with a focus on supporting geriatrics health professionals to embark on careers in aging research and ensuring that all researchers have the training necessary for including complex older people in research. We also encourage greater attention in the Framework on expanding GWEPs programs across the U.S.

GSA encourages ACL and the ICC to emphasize the role of person-centered and team-based primary care in transforming the health system into one which supports the health and social needs of older adults. Further, we encourage the Framework to address Medicare coverage gaps that would better facilitate whole person care, such as expanded coverage of vision, dental, and hearing benefits. GSA also encourages the Framework to address improving Medicare and Medicaid integration and coordination and educating and embedding Medicare expertise in Medicaid agencies.

We encourage ACL and the ICC to include equitable and evidence-based and evidence-informed interventions, resources, programs, and practices in community-based settings.

7. Is there anything else you would like to add?

GSA encourages ACL and the ICC to develop greater recognition throughout the Framework regarding marginalized communities and a more direct emphasis embracing diversity, equity, inclusion in all domains and programs.

Minority older people, including American Indians, Alaska Natives and Native Hawaiian elders, tribes, the LGBTQ population, Asian/Pacific Islanders and Black and Latino communities, are significantly underserved and face barriers to accessing programs, benefits and services. We recommend the Framework acknowledge marginalized communities and their needs. Recognizing the intersectionality in our communities helps us understand how people's identities shape their experiences and how they may face unique challenges at the intersection of those identities.

Additionally, GSA encourages ACL and the ICC study successful models and partnerships provide practical insights for implementing the framework's goals, fostering innovation and collaboration across different sectors.

Thank you for the opportunity to provide information regarding this Strategic Framework. If you have any questions, please contact Patricia D'Antonio, Vice President of Policy and Professional Affairs at pdantonio@geron.org or 202-587-5880, or Jordan Miles, Director of Policy at jmiles@geron.org or 202-587-5880.

We look forward to continuing to work with you on the process of developing a National Plan on Aging.

Sincerely,

James C. Appleby, BSPharm, MPH, ScD (Hon)

Chief Executive Officer

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