UNECE National Report on MIPAA+15 Third Cycle

Response from the United States
Executive Summary

The U.S. has made protecting the rights, dignity, and independence of older people a national priority for more than 80 years. The Social Security Act was passed in 1935 to support the economic and general welfare of older adults. Then in 1965, Medicare, Medicaid, and the Older Americans Act were enacted, and these four programs continue to form the cornerstones of the U.S. system for supporting the health, economic security, and social wellbeing for millions of seniors, individuals with disabilities, and their families. Because of these programs, millions of older Americans have lived more secure, healthier, and meaningful lives.

The focal point of older adults and aging within the U.S. Government is the Administration for Community Living (ACL), a division of the U.S. Department of Health and Human Services (HHS). Within ACL, the Administration on Aging (AoA) runs the majority of aging-specific programs, including the Older Americans Act (OAA). The OAA relies on a philosophy of bottom-up planning by listening to older adults, their families, and communities. Through the Older Americans Act, older adults are empowered to exert greater control over their lives and choices.

The U.S. promotes the human rights of older persons by calling attention to the needs of older people and how society should react in response to those needs, but also by highlighting the tremendous resource that older individuals represent to our communities and society. Older adults represent a wealth of knowledge and experience and contribute to the continued vitality of every sector of our local, state, and national communities and economies.

Major Achievements since 2012

- Every 10 years the President of the United States convenes the White House Conference on Aging (WHCOA), a national meeting of older adults, their families and caregivers, and leaders from public and private sector aging organizations to assess the changing landscape of aging in the U.S. In July 2015, President Obama hosted the sixth WHCOA, following a year-long dialogue at regional forums held throughout the country. Through the year-long outreach efforts and broad use of online engagement, the 2015 WHCOA had the greatest degree of public input and engagement ever. The Conference focused primarily on four areas of national importance to older adults: retirement security, healthy aging, long-term services and supports, and elder justice. The final WHCOA report describes the activities and outcomes in much greater detail: https://whitehouseconferenceonaging.gov/2015-WHCOA-Final-Report.pdf.

- The Administration for Community Living (ACL) as it now stands was created between 2012 and 2015 by bringing the HHS Administration on Aging together with programs focused on supporting people with disabilities and independent living programs from the U.S. Department of Education and other divisions of HHS. The Administration for Community Living also houses programs focused on the support and dissemination of assistive technologies, as well as a research division, the National Institute
on Disability, Independent Living, and Rehabilitation Research (NIDILRR). Bringing aging, disability, and independent living programs together within ACL has created many synergies and has strengthened all of the program areas. ACL’s aging programs have benefitted from an increased focus on self-advocacy, person centeredness, and rights-based approaches.

- The Older Americans Act (OAA) was reauthorized by the U.S. Congress in 2016. This 51-year-old law represents an ongoing policy success in the provision of services at the local level, but also as an approach to developing policy from the bottom up. The design of OAA programs is entirely dependent upon input of consumers themselves – the older adults receiving OAA services and their families, caregivers, and providers.

- The U.S. has made great strides in enhancing national responses to preventing and addressing elder abuse since 2012. The ongoing implementation of the Elder Justice Act has resulted in significant new resources and approaches for preventing and combating elder abuse, neglect, and exploitation. HHS chairs the Elder Justice Coordinating Council, which coordinates elder justice activities taking place across the Federal Government. The work of the Elder Justice Coordinating Council involves many sectors of government, law enforcement, and economic stakeholders, reflecting the complex challenges of elder abuse. The most recent report to Congress demonstrates the multidisciplinary approaches: http://www.aoa.acl.gov/AoA_Programs/Elder_Rights/EJCC/docs/EJCC-2012-2014-report-to-congress.pdf.

- There has been significant progress in developing new national systems that are responsive to elder abuse. ACL is overseeing the launch of the National Adult Maltreatment Reporting System, the first national reporting system for states to submit data on adult maltreatment, as well as the development of the first national Adult Protection Services guidelines that highlight best practices for an effective APS system.

- Healthy aging continues to be a primary focus of the U.S. Government, both through advances to public health, and in increasing the access, affordability, and quality of healthcare for older persons. The continued rollout of the Affordable Care Act has resulted in significant improvements in the quality of care older adults receive across care settings and has increased incentivizes for the provision of high quality care. Programs across the government have also made significant investments health promotion and the prevention of injury and disease. Programs and policies have been enacted related to chronic disease, accidents and injury, the design of the built environment, pollution, and many more factors that impact the health of older adults.

- In 2015, the Department of Health and Human Services joined the American College of Preventive Medicine to host a Healthy Aging Summit, bringing together policymakers, researchers, clinicians, educators, and public health practitioners to explore the science of healthy aging, identify knowledge gaps, promote the role of prevention and preventive services in improving quality of life in later years, and mobilize action to improve the delivery of care for those aging in place or in transition. The Summit had significant representation from academia, healthcare, the private sector, the World Health Organization, and the U.S. Government.

- The U.S. has also made significant investments in recent years related to brain health and aging. These investments have involved increased funding for biomedical research related to understanding the brain, cognitive health, and dementia, as well as investing in programs to support individuals with dementia and their caregivers.
• The U.S. has also taken steps to strengthen retirement security for older adults. For example, this year the U.S. Department of Labor published a rule requiring retirement advisers to put their clients’ best interest first, ahead of advisers’ incentives. The U.S. Departments of Labor and Treasury have also created new policies and programs to help more Americans gain access to retirement investments.

• The U.S. has seen the continued expansion of Long-Term Services and Supports (LTSS) for older adults in recent years, which reflects the growing demographic of individuals that require supports but want to remain living in the community. The U.S. Government has supported this expansion in a number of ways, including rebalancing initiatives that encourage States to invest in more home and community-based services and reduce reliance on institutions. As LTSS expands, there is an increased focus on quality, and there is significant work being done to establish nationally validated outcome measures for LTSS.

Areas for Improvement

• As the number and proportion of older adults grows in the U.S., the needs for services and supports for this population also continues to grow. Care and service providers for older adults must continually refine and enhance abilities to meet the needs of individuals with a person-centered approach. Many older adults who need services and supports wish to remain in their homes and communities, and while there has been great progress, there is much work to be done in expanding and improving community-based services and supports, including supports for families and caregivers. These programs can delay, reduce, or eliminate the reliance upon institutional residential services, a more expensive option and one that many older adults do not prefer.

• Similarly, another ongoing area of improvement is securing financing for these long-term services and supports that many older adults rely on. The Older Americans Act established a national Aging Services Network that connects older adults with services and supports available at their local level. The Affordable Care Act created new incentives for the healthcare system to value and utilize home and community-based services such as many of those provided by the Aging Services Network. One ongoing area of improvement in the work of the Department of Health and Human Services is encouraging capacity building among the Aging Services Network to be able to provide valuable services to healthcare and payor partners.

• The U.S. Government recognizes 567 tribes (as of 2016). Like all older adults, the indigenous peoples of the United States – American Indians, Native Hawaiians, and Alaska Natives – often need services and supports as they age, but many face significant and particular challenges in accessing them. Many tribal elders live in rural areas with limited access to supportive and healthcare services. An ongoing area for improvement is the need to enhance the ability of tribal elders to access services efficiently.
General information

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National Aging Situation

The United States continues to experience incredible demographic transformation. By 2020, there will be a projected 77.6 million Americans over the age of 60. Currently, approximately 10,000 U.S. adults turn 65 every day, as individuals from the “baby boomer” generation age. And the fastest growing demographic in the U.S. is women over age 85. The proportion of older adults representing racial and ethnic minorities is also increasing rapidly. Average life expectancy in the U.S. is just over 78 years, but there are significant disparities by race/ethnicity, geography, and socioeconomic status.

This demographic transformation will continue into the next decade and beyond. As older adults become a larger proportion of the U.S. population, our society needs to be able to effectively engage the challenges and fully embrace the possibilities inherent in an aging population.
National actions and progress in implementation of MIPAA/RIS

RIS Commitment 1: To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages.

As the U.S. faces the current demographic and societal changes related to aging, importance of collaboration across sectors has become paramount. We recognize the need to establish collaborative relationships between public institutions, private industry, healthcare, academia, and the non-profit sector, while simultaneously focusing on breaking down the silos of housing, transportation, healthcare, and long-term services and supports.

In 2015, the Obama Administration hosted the decennial White House Conference on Aging, a national meeting to review progress on aging programs and policies and shape new focus areas for the future. The Conference allows opportunities for direct engagement and public input concerning the full inclusion of aging in all matters of U.S. Government policy. The 2015 Conference addressed the following topics: 1) elder justice; 2) healthy aging; 3) long-term services and supports; and 4) retirement security.

The Conference also included a series of regional forums in cities across the U.S. to engage with older Americans, their families, caregivers, leaders in the aging field, and others on the key issues affecting older Americans. They were co-sponsored with AARP, a leading national stakeholder representing the interests of older adults and their families and caregivers, and co-planned with the Leadership Council of Aging Organizations, a coalition of more than 70 of the nation’s leading organizations serving older Americans.

As demonstrated by the work of the 2015 White House Conference on Aging, providing older adults, their families, and organizations representing their interests the opportunity for input across existing U.S. Government policies and programs continues to be at the core of our approach.

This approach is inherent in the programs of the Older Americans Act, which are carried out through the national Aging Services Network. The Network delivers community-based services and supports to approximately one out of every five U.S. older adults, with particular attention to serving economically and socially vulnerable elders. In addition to ACL at the Federal level, the Network consists of organizations at the state, tribal, and local levels, all of which work with older adults and caregivers to design programs and policies to best serve their communities. At the state and local level, every organization in the Aging Services Network is governed by a mandated advisory board, and 50 percent of the board members must be over 60. These organizations are also required to hold public hearings to ensure that their official plans outlining their service provision are responsive to the needs of older adults in their communities.

The Centers for Medicare and Medicaid Services (CMS), the primary health insurer of older adults in the U.S., works closely with older adults, caregivers, and their stakeholders to improve the health of the older adult population, improve the experience and quality of patient care, and work to make this care affordable.

In terms of the legislative branch of the U.S. Government, the U.S. Senate Special Committee on Aging (the Committee) serves as a focal point in the Congress for discussion and debate on matters relating to older Americans, and frequently calls on the expertise of our Assistant Secretary for Aging for testimony.
The Committee has explored issues of health care, retirement security, fraud and abuse, housing, and employment. The resulting public hearings, reports, and legislation have been invaluable resources for policymakers and other interested parties throughout the years. Private citizens, consumer and industry representatives, and government agencies are called to testify at hearings. The Committee has regularly reviewed health and pension coverage and employment opportunities for older Americans. The Committee has also conducted oversight of the administration of major Federal programs like Medicare, Medicaid, Social Security, and the OAA. Finally, the Committee has crusaded against fraud targeting seniors and the Federal programs on which they depend.

A crucial focus of U.S. Government programs is monitoring and evaluating the effectiveness of aging programs to ensure they are delivering meaningful services and resources to our country’s older adults and their support networks. The Federal Interagency Forum on Aging-Related Statistics (Forum) has convened Federal agencies with a shared interest in improving aging-related data since 1986. These include the National Institute on Aging, National Center for Health Statistics, and Census Bureau. Every four years, the Forum compiles a report on older Americans with key indicators of well-being to provide the latest data on five subject areas: population, economics, health status, health risks and behaviors, and health care. Archived reports can be found at www.agingstats.gov.

**RIS Commitment 2: To ensure full integration and participation of older persons in society.**

One of the policy cornerstones of the U.S. system to support older adults is The Older Americans Act (OAA), which was reauthorized in 2016. This law funds the provision of supports and services meant to help older adults remain independent and living in the communities of their choice as full members of society. The OAA includes many provisions related to promoting and enabling maximum independence for older persons, so that they may direct the course of their lives and maintain full participation in society:

- The OAA funds nutrition assistance programs that are designed to reduce hunger and food insecurity, while also promote the socialization of older individuals, as well as their health and well-being.

- A core tenant of the OAA is to specifically help those older adults that might be at highest risk of losing their independence. Section 305(a)(E) stipulates that states must provide assurances that preference will be given to providing services to older individuals with the greatest economic and social need. Social need is defined as the need caused by non-economic factors including: (A) physical and mental disabilities; (B) language barriers; and (C) cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that (i) restricts the ability of an individual to perform normal daily tasks; or (ii) threatens the capacity of the individual to live independently.

- Section 301(a)(27) says that states’ plans shall provide assurances that OAA funds will be used to provide services consistent with self-directed care—which is an approach to providing services in which:
  - (A) Services (including the amount, duration, scope, provider, and location of such services) are planned, budgeted, and purchased under the direction and control of an individual;
o (B) An individual is provided with information and assistance which are necessary and appropriate to enable him/her to make informed decisions about his/her care options;

o (C) The needs, capabilities, and preferences of an individual with respect to such services, and an individual’s ability to direct and control his/her receipt of such services, are assessed by the area agency on aging (or other agency designated by the area agency on aging) involved;

o (D) Based on the assessment made under subparagraph (C), the area agency on aging, or other agency designated by the area agency on aging, develops together with an individual and his/her family, caregiver, or legal representative: (1) A plan of service for an individual that specifies what services he/she will be responsible for directing; (2) A determination of the role of family members, and others whose participation is sought by an individual, in providing services under the plan; and (3) A budget for these services.

o (E) The area agency on aging or state agency provides for oversight of an individual’s self-directed receipt of services, including steps to ensure the quality of services provided and the appropriate use of funds under this Act.

RIS Commitment 3: To promote equitable and sustainable economic growth in response to population ageing

The U.S. Government recognizes that securing economic stability and access to resources is crucial to maintaining dignity, independence, and wellbeing for older adults. And we also recognize the importance of ensuring that older adults are active participants in developing these economic systems.

A main focus of the U.S. Government is ensuring independence for older adults through programs that protect and improve financial security. Such programs include:

• As previously noted in this report, the primary safety net for older adults in the U.S. consists of Social Security, complemented by Medicare, Medicaid, and the OAA. This structure has helped to form a framework for reducing poverty, as well as establishing, supporting and protecting the rights, dignity and independence of millions of older Americans, individuals with disabilities and their family caregivers. In 1961, around one-third of the U.S. population aged 65 and over was living in poverty; in 2013, the approximately 10 percent of the 65-and-over population lived in poverty. Currently, Social Security is the major source of income for most of older adults.

• Pension Counseling and Information: The ACL Pension Counseling program assists older Americans in accessing information about their retirement benefits and helps them negotiate with former employers or pension plans for due compensation. Currently, there are more than 700,000 private (as well as thousands of public) pension and retirement plans in the U.S. Given that an employee may have worked for several employers, and these employers may have merged, sold their plans, or gone bankrupt, it is very difficult for the average person to know where to go to get help in finding out whether he or she is receiving all of their pension benefits. The program provides hands-on assistance in pursuing claims through administrative appeals processes; helps seniors to locate pension plans lost as a result of mergers and acquisitions; answers queries about complex plan provisions; and makes targeted referrals to other professionals for assistance.

• Pension Counseling projects have successfully recovered over $175 million in client benefits, representing a return of more than eight dollars for every Federal dollar invested in the program.
Projects have directly served over 50,000 individuals by providing hands-on assistance in pursuing claims through administrative appeals processes, helping seniors to locate pension plans “lost” as a result of mergers and acquisitions, answering queries about complex plan provisions, and making targeted referrals to other professionals for assistance.

ACL also supports the National Education and Resource Center on Women and Retirement Planning, which provides access to a one-stop gateway that integrates financial information and resources on retirement planning for health and long-term care. This project has made user-friendly financial education and retirement planning tools available to traditionally hard-to-reach women, including low-income women, women of color, women with limited English speaking proficiency, and rural and other “underserved” women. Information is offered through financial and retirement planning programs, workshops tailored to meet women’s special needs, and published in hard copy and Web-based formats.

In 2016, the U.S. Department of Labor published a rule requiring retirement advisers to put their clients’ best interests first, ahead of any potential profits. This policy helps protect the retirement security of Americans across the lifespan.

The Consumer Financial Protection Bureau (CFPB), a new government agency that opened its doors in 2011, has focused a great deal on creating and tools help seniors and caregivers navigate safely through financial challenges. Examples include:

- Financial caregiving is a challenging task that is often undertaken suddenly or with little preparation. CFPB’s Managing Someone Else’s Money ([http://www.consumerfinance.gov/managing-someone-elses-money/](http://www.consumerfinance.gov/managing-someone-elses-money/)) guides are available for agents under powers of attorney, court-appointed guardians, trustees, and government fiduciaries.


U.S. Department of Labor has also recently increased support to states looking to increase access to workers in their states without retirement accounts.

U.S. Department of the Treasury has introduced myRA (my Retirement Account), a simple, safe, and no-fee savings option. Individuals can currently contribute to myRA through payroll deductions at their employers, and will also be able to contribute directly through their bank accounts starting later this year.

Another component of securing economic security for older adults is engagement with and encouragement of private sector investment in, and recognition of the unique challenges and opportunities associated with and aging society. And as the U.S. Government works to encourage these conversations, we aim to ensure that older adults have inclusion and ownership in the conversation.

For example, in 2015, the White House Conference on Aging joined the Boomer Venture Summit in Silicon Valley, a conference brings together innovators, corporations, and investors discuss the longevity economy – one that capitalizes on the health and wellness associated with longer lives.

There is growing private sector interest in products, services, and approaches for the growing older adult population, and many sectors of the U.S. Government are working to encourage innovation, while also ensuring that the best interests of older adults are the focus.
**RIS Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences (social, financial protection, pensions, and respite care)**

One of the areas where the U.S. government has made the most progress in recent years is in strengthening the systems at the Federal, state, and local levels that protect older adults in a variety of ways.

**Legal Assistance and Elder Rights**

- Legal assistance and elder rights programs under Title III-B of the Older Americans Act (OAA) are instrumental in addressing the harmful consequences of elder abuse including financial damage caused by exploitation and fraud. Legal services provided under Title III-B, Section 321, of OAA are part of the essential core of ACL’s legal assistance and elder rights programs. There are approximately 1,000 OAA-funded legal services providers nationwide, which provide over one million hours of legal assistance per year. Legal services under Title III-B can protect older persons against the direct challenges to independence presented by elder abuse. These cases involve complex legal issues which may include: cases of financial exploitation, fiduciary abuses, and consumer fraud; cases of physical abuse; and cases of neglect/self-neglect.

**Long-Term Care Ombudsman Program**

- States’ Long-Term Care Ombudsman Programs serve residents of long-term care facilities (nursing homes, board and care, assisted living and similar settings) and work to resolve resident problems related to poor care, violation of rights, and quality of life. Ombudsmen also advocate at the local, state, and national levels to promote polices and consumer protections to improve residents’ care and quality of life. ACL provides Federal leadership and administers OAA formula grants for states to operate their Office of State Long-Term Care Ombudsman Program. Training and technical assistance are provided to state and local ombudsmen by ACL’s National Long-Term Care Ombudsman Resource Center.
  - In 2016, ACL published new regulations to enhance federal leadership over State Long-Term Care Ombudsman Programs and ensure program consistency and effectiveness across states.

**Adult Protective Services**

- Adult Protective Services (APS) is a social services program provided by state and local governments nationwide serving older adults and adults with disabilities who are in need of assistance because of abuse, neglect, self-neglect, or financial exploitation (adult maltreatment). ACL oversees Federal coordination of APS services, and in 2016 published the first ever national APS guidelines that highlight best-practices for an effective APS system. The majority of states have adopted these national guidelines or plan to do so, which will result in significant improvements in APS provision, evaluation, and expansion.
• 2016 saw the launch of the National Adult Maltreatment Reporting System, the first national reporting system for states to submit data on adult maltreatment. This system will result in the first ever national data on elder abuse and will greatly improve the Federal government’s ability to evaluation progress.

National Legal Assistance and Elder Rights Projects
• National Legal Assistance and Elder Rights Projects (NLAERP) grants comprise a comprehensive national legal assistance support system for aging and legal service providers and advocates, including those involved in addressing elder abuse.
• ACL funded the creation of a new National Center on Law and Elder Rights in 2016. This organization will focus on building the capacity of legal service delivery systems across the U.S. to address critical legal issues for older adults. The center will provide technical assistance related to legal training, case consultation, systems enhancement, and other relevant areas.

Counseling and Retirement Planning
• Since 1993, the ACL Pension Counseling projects have helped older adults access information about their retirement benefits and negotiate with former employers and pension plan administrators for due compensation. Monetary recoveries have helped people achieve and maintain financial security, which has increased their independence and decision making. HHS’s Administration on Aging and Administration on Community Living (AoA/ACL) currently funds six regional counseling projects covering 29 states, and a National Pension Assistance Resource Center, which strengthens the pension counseling skills and capacities of the ACL Pension Counseling projects, state units on aging (SUA), and area agencies on aging.

Senior Medicare Patrol (SMP) Program
• Since 1997, the U.S. Department of Health and Human Services’ Administration on Community Living (HHS/ACL) has led a national program to provide Medicare beneficiaries information on protecting themselves against fraud, errors, and abuse within the Medicare system. The program mission is to empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report healthcare fraud, errors, and abuse through outreach, counseling, and education. ACL funds 54 Senior Medicare Patrol (SMP) statewide projects (one in each state, Guam, Puerto Rico, U.S. Virgin Islands, and the District of Columbia) with funds authorized in the Older American Act and the Health Care Fraud and Abuse Control (HCFAC) Wedge. SMP projects recruit and train volunteers to educate Medicare beneficiaries on how they can detect and prevent fraud, errors, and abuse in Medicare.

Combating Violence, Abuse, and Neglect of Older Persons
• The Elder Justice Act (EJA) of 2009 (Title XX of the Social Security Act, Subtitle B), was signed into law on March 23, 2010 to address weaknesses in Federal and state responses to elder abuse. The EJA provides funding to implement a number of provisions, including to:
• Improve and enhance adult protective services programs;
• Enhance the long-term care ombudsman program; and
• Receive reports of crimes in long-term care facilities.

• The Elder Justice Act also established the Elder Justice Coordinating Council (EJCC) to coordinate activities related to elder abuse, neglect, and exploitation across the Federal government. As Chair of the EJCC, the Secretary of HHS has lead responsibility for identifying and proposing solutions to the problems surrounding elder abuse.

• In 2014, as part of the continued roll-out of the EJA, ACL created the Office of Elder Justice and Adult Protective Services (OEJAPS), expanding our administration of elder abuse prevention, legal assistance, and pension counseling programs by officially designating this office as the home for APS in the federal government. Through this office, ACL leads and supports the development and implementation of a comprehensive, national infrastructure for preventing, detecting, and responding to adult maltreatment, while also emphasizing a consumer-directed approach.

• Title VII-A3 of the Older Americans Act also provides funding for elder justice programming through the Prevention of Elder Abuse, Neglect, and Exploitation program. Through this title, ACL distributes funds via formula grants to states and territories based on their share of the population aged 60 and over, roughly $5 million annually. With an emphasis on training for prevention, the program is focused on technical assistance and capacity building for law enforcement, medical professionals, and others working with older adults to recognize elder abuse.

• ACL also funds the National Center on Elder Abuse (NCEA). The NCEA provides relevant information, materials, and support to enhance state and local efforts to prevent and address elder mistreatment. The NCEA makes available news and resources; collaborates on research; provides consultation, education, and training; identifies and provides information about promising practices and interventions; answers inquiries and requests for information; operates a listserv forum for professionals; and advises on program and policy development. NCEA also facilitates the exchange of strategies for uncovering and prosecuting fraud and scams targeted at seniors.

• Since 2000, the Enhanced Training and Services to End Abuse in Later Life Program, a discretionary grant under the Violence Against Women Act (VAWA), addresses elder abuse, neglect, and exploitation, including domestic violence, dating violence, sexual assault, or stalking, against victims who are 50 years of age or older through training and services. The Department of Justice Office on Violence against Women administers approximately $3.1 million for this grant program annually, which funds approximately eight to nine communities a year to work collaboratively to address abuse in later life.

National Adult Protective Services Resource Center

• In response to the growing need for APS programs to improve investigation and response, train APS staff, and develop and disseminate best practices for interventions into reported incidents of elder abuse, neglect, and exploitation, in FY 2011 AoA/ACL established the first-ever Federal grant program to provide a National APS Resource Center (NAPSRC). The goal of the NAPSRC is to provide current and relevant information and support to enhance the quality, consistency, and effectiveness of APS programs across the country. The NAPSRC works to enable state APS programs to enhance their critical role in responding to elders and adults with disabilities who are facing abuse, neglect, and exploitation.
Elder Justice AmeriCorps

• In 2016, the U.S. Department of Justice, through its Elder Justice Initiative and its Office for
  Victims of Crime with support from the Office for Access to Justice, and the Corporation for National and
  Community Service, announced Elder Justice AmeriCorps, a $2 million grant program to provide legal
  assistance and support services to victims of elder abuse, neglect and exploitation – the majority of whom
  are women – and to promote pro bono capacity building in the field. This grant to Equal Justice Works
  will be the first-ever army of new lawyers and paralegals to help victims of those who prey on our
  nation’s elders.

RIS Commitment 5: To enable labour markets to respond to the economic and social
consequences of population ageing (employability, raising participation rates, flexible
retirement)

Although there has been a great deal of economic recovery since the recession that the United States
experiences earlier this decade, many Americans still face significant financial difficulties, and this is
especially true for older adults. The U.S. Government is working to support these older adults both by
making employment available and adaptable to the needs of older adults.

The U.S. Federal government itself is a leader in implementing policies and programs which enable older
persons and persons with disabilities to continue working and that enhance work-life balance. These
include flexible and compressed work schedules and telecommuting options; accommodating older or
disabled workers by providing workspace and computer modifications; ergonomic chairs and special
accommodations for those in wheelchairs or using guide dogs; continued education and training; and
support for caring for dependents. Many of these efforts are mirrored in the private sector.

There are programs focused on the employability and employment of older persons across the U.S.
Government. Examples include:

• The U.S. Department of Labor’s Senior Community Service Employment Program (SCSEP) is a
  community service and work-based job training program for older Americans. Authorized by the Older
  Americans Act, the program provides training for low-income, unemployed seniors. SCSEP participants
  gain work experience in a variety of community service activities at non-profit and public facilities,
  including schools, hospitals, day-care centers, and senior centers. The program provides over 40 million
  community service hours to public and non-profit agencies, allowing them to enhance and provide needed
  services. This training serves as a bridge to unsubsidized employment opportunities for participants. The
  program is focused specifically on unemployed older adults in greatest economic need. More information
  about this program and related discretionary grants can be found here: https://www.doleta.gov/seniors/.

• The EPA’s Senior Environmental Employment Program created a program utilizing the skills of
  individuals age 55 and over in short-term environmental assignments.

• The U.S. Department of Agriculture’s Natural Resource Conservation Service established an older
  worker employment program to provide technical assistance for its conservation operations around the
  country.
RIS Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions

Ensuring that the educational needs of older adults are met requires both access to the same educational opportunities available to people at any age, but also access to education specifically designed and delivered to meet the specific needs that are associated with aging.

In terms of making life-long learning available to older adults, there are number of programs across the U.S. Government to make traditional education setting available to older adults, including older adults with disabilities. In 2015 the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) was transferred from the U.S. Department of Education to the Administration for Community Living (ACL) within the U.S. Department of Health and Human Services. NIDILRR is a grants-making agency that sponsors research into the use and adoption of new technologies, approaches, and knowledge for improving the ability of people with disabilities to perform activities of their choice in the communities, as well as the expansion of society’s capacity to provide full opportunities and accommodations for all people.

In terms of developing and enhancing educational resources specific to the needs of older adults, a number of U.S Government agencies are focused on a diverse set of topics. These include:

- As mentioned in previous sections, the U.S. is making significant investments in developing and disseminating tools focused on strengthening financial literacy for older adults, and their families and caregivers.
- The Older Americans Act funds senior centers across the U.S. that provide a wide variety of supports and services, including classes for older adults on using computers and technology, how to stay healthy and safe as one ages, and how to manage one’s chronic illness.

RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being

Programs across the U.S. Government focus on improving health and quality of life for older adults through numerous lenses and approaches.

In a general sense, many of the U.S. Government’s largest investments in protecting health and well-being of all Americans benefit older Americans a great deal. The billions of dollars of biomedical research funded through the National Institutes of Health leads to the development of science and medicines that benefit older adults more than any other group. The work of the Centers for Disease Control and Prevention to track and prevent communicable diseases also has the greatest benefits for people at both ends of the age spectrum. And the Federal Emergency Management Agency’s work responding to disasters is often largely focused on older adults and other populations with special healthcare needs.

Then, in addition, there are the numerous and significant programs focused specifically on the health and well-being of older adults. Examples include:
Health of Older Persons: Nutrition

- The Older Americans Act Nutrition Programs provide nutritious, safe, appealing meals targeted to vulnerable older adults at risk of food insecurity and food insufficiency. These adults are older, poorer, more likely to live alone, more likely to be a minority, in poorer health, and more functionally impaired, and at higher risk of isolation and nursing home placement than the general older adult population in the United States.

- In 2014, about 218 million meals were served to 2.4 million older adults in the U.S. and its territories, both in congregate meal settings, and in home-delivered meal programs. These meals often provide at least half of the total food for the day for these vulnerable individuals and enable them to continue to live healthier, more independent lives in their homes and in the community.

Chronic Disease Self-Management Programs

- Chronic Disease Self-Management Education (CDSME) programs provide older adults and adults with disabilities with education and tools to help them better manage chronic conditions such as diabetes, heart disease, arthritis, HIV/AIDS, and depression. ACL has been supporting the dissemination of CDSME programs through grants to states since 2003. State governments use these funds to develop an infrastructure (e.g. state and community partners, workforce, sites, and enrollment systems) to deliver these programs in their communities.

Alzheimer’s Disease Initiative

- In 2014, ACL received funds through the Affordable Care Act in support of a new grant program dedicated to the provision of specialized supportive services. The Alzheimer’s Disease Initiative (ADI) program targets the provision of services to persons with disabilities living alone in their communities, individuals with intellectual or development disabilities at risk of developing Alzheimer’s Disease or a related dementia (ADRD) and the provision of behavior symptom training and expert consultations for caregivers.

Brain Health Initiative

- ACL supports building dementia capability through its brain health initiative, Alzheimer’s awareness program, and support of the Alzheimer’s Call Center administered through the Alzheimer’s Association. Dementia capability is increasingly included as a consideration in ACL’s longstanding home and community based programs that are served through the traditional aging network and in Indian Country. ACL demonstrates leadership and provides expert consultations in numerous areas related to adults with ADRD. ACL staff consults and coordinates with divisions within HHS in support of Federal ADRD related efforts. ACL provides expert consultations to entities outside the Federal government, including AARP and Easter Seals, among other civil society organizations.
Veteran Directed Home & Community Based Services (VD-HCBS) Program

- Since 2008, ACL began a partnership with the Veteran’s Health Administration to serve veterans of all ages at risk of nursing home placement through the Veterans Directed Home and Community Based Services (VD-HCBS) Program. The VD-HCBS program provides veterans the opportunity to self-direct their long-term supports and services and continue to live independently at home. Eligible veterans manage their own flexible budgets, decide for themselves what mix of goods and services best meet their needs, and hire and supervise their own workers. Through an Options Counselor, the Aging & Disability Network provides facilitated assessment and care/service planning, arranges fiscal management services, and provides ongoing options counseling and support to veterans, their families, and caregivers.

Transportation Initiatives

- In 2015, the U.S. Department of Transportation (DOT) launched the National Aging and Disability Transportation Center. This investment provides technical assistance to improve the availability and accessibility of transportation options that serve the needs of people with disabilities, seniors, and caregivers.

- The DOT Rides to Wellness Initiative provides grants to increase partnerships between health and transportation providers and show the positive financial benefit to such partnerships. The initiative’s goals are to increase access to care, improve health outcomes, and reduce health care costs.

- The FAST Act passed in 2015 included a new discretionary pilot program for innovative coordinated access and mobility (Section 3006(b)) to help finance innovative projects for the transportation disadvantaged that improve the coordination of transportation services and non-emergency medical transportation services.

RIS Commitment 8: To mainstream a gender approach in an ageing society

Addressing Violence Against Older Women & Lifetime Gender Disparities

- In 2015, the U.S. Government, under the Obama Administration, expanded its commitment to combating violence against women of all ages by hosting several roundtables focused on understanding and supporting the unique challenges older adults face. For the first time, elder justice was put on the agenda of the 2015 White House Conference on Aging.

- The White House also used the conference to consider how the White House Council on Women and Girls and the Office of the Vice President’s Advisor on Violence Against Women could advocate for older women. In April 2015, the White House Council on Women and Girls convened expert stakeholders in the fields of aging, health, domestic violence and elder abuse, and economic security for a listening roundtable, “Promoting Equal Futures Across the Lifespan” and, in June of the same year, hosted a roundtable with the Office of the Vice President, “Supporting Survivors across the Lifespan,” which convened advocates from leading sexual assault and domestic violence organizations across the country to identify gaps in services for older survivors and ways to improve the accessibility of programs.

- Furthermore, at the June 2015 United Nations Human Rights Council session, the United States co-sponsored an event marking World Elder Abuse Awareness Day, during which the U.S. delegation...
outlined U.S. responses to address violence against older women, elder abuse as a public health challenge, and the financial exploitation of older adults.

- The Department of Justice Office on Violence Against Women (DOJ OVW), through its technical assistance provider, the National Clearinghouse for Abuse in Later Life (NCALL), worked with elder abuse prosecutors throughout the country to create the National Institute on the Prosecution of Elder Abuse (NIPEA) curriculum. Aequitas, an organization dedicated to fighting sexual violence of all kinds, has partnered with NCALL to offer this three-and-one-half-day course annually for the last three years. During the course, participants receive training on the dynamics of elder abuse and practical skills to successfully prosecute cases. By 2018, a prosecutor from every state will have participated in this institute.

- In December 2015, OVW and NCALL released Addressing Harm to Indigenous Elders: Developing a Tribal Response to Abuse in Later Life, a new resource that assists tribes in assessing their readiness to address violence against indigenous elders by exploring their unique circumstances and cultures. The resource has been distributed to tribal programs across the country. Finally, on June 9, 2016, OVW, through NCALL, released a new toolkit and guide, “Working with Older Survivors of Abuse: A Framework for Advocates,” with principles and practical strategies for victim-service advocates. The final toolkit, which includes a self-assessment and a series of training modules, will be shared with national and local domestic violence, sexual assault, and stalking victim services providers over the next year.

- The U.S. Department of State and U.S. Agency for International Development jointly produced the U.S. Strategy to Prevent and Response to Gender-Based Violence Globally to recognize the pervasive role of violence against women and girls of all ages and a hindrance to democratic, stable societies, and sustainable development. The Strategy outlines a definition of gender-based violence that articulates the impact of violence and abuse across the life cycle, including elder abuse.

National Education and Resource Center on Women and Retirement Planning

- The National Education and Resource Center on Women and Retirement Planning was established through a cooperative agreement with the Women’s Institute for a Secure Retirement (WISER). The mission of the Center is to provide women with access to a one-stop gateway that integrates financial information and resources for retirement, health, and long-term care planning with Older Americans Act Programs. Often, programs such as OAA Nutrition and Supportive Services Programs become critical to the retirement security of older women. This program also does work to educate women veterans about their financial needs. Through the Center, WISER is making user-friendly financial education and retirement planning tools available to traditionally hard-to-reach women. This includes average and low-income women, women of color, women with limited English speaking proficiency, women living in rural areas, and other under-served women.

**RIS Commitment 9: To support families who provide care for older persons and promote intergenerational and intra-generational solidarity among their members.**

A primary focus of the U.S. Government is supporting caregivers and the families of older adults in a way that empowers care recipients and meets their needs and wishes.
A number of these programs and initiatives have been discussed throughout this report, and more information can be found in the report of the 2015 White House Conference on Aging. But one foundational Federal investment that has not yet been noted is the National Family Caregiver Support Program (NFCSP).

The NFCSP provides grants to fund a range of supports that assist family and informal caregivers to care for their loved ones at home for as long as possible. The NFCSP includes five basic system components: information; access assistance; counseling and training; respite care; and supplemental services. Most of these caregivers are women, and many of them are older. They are the backbone of America’s long-term care system.

**RIS Commitment 10: To promote the implementation and follow-up of the regional implementation strategy through regional cooperation**

In addition to the programs (mentioned above in our report) under the OAA, the U.S. demonstrates a particular commitment to the goals of MIPAA by including older adults as a focal point for international advocacy to raise the visibility of older persons across existing human rights platforms. The following are example of recent U.S. efforts at the United Nations and other international fora on the human rights of older adults:

- At the June 2015 Human Rights Council session, the U.S. co-sponsored a side event marking World Elder Abuse Awareness Day. During the discussion period, the U.S. delegation outlined U.S. responses to address violence against older women, elder abuse as a public health challenge, and financial exploitation.

- At the 59th Commission on the Status of Women, the U.S. co-sponsored a side event organized by HelpAge International and Argentina, and the U.S. HHS Assistant Secretary for Aging spoke about violence, abuse, and neglect toward older women, noting that older women are visible throughout the Beijing Declaration and Platform for Action.

- At the 2015 World Health Assembly, the U.S. took part in a panel at a side event sponsored by Canada on the topic of violence against older women and elder abuse as a public health concern with human rights implications.

The U.S. Government is proud of its commitments to promoting the rights of older persons in this country through deeply embedded, historic, and widespread policies, programs, and acts of legislation, including the OAA, Medicare, Social Security, and the Americans with Disabilities Act, to name only a few. Globally, more efforts are needed to raise awareness of the concerns of older persons. The United States has worked to raise the visibility of older persons across existing human rights platforms, including presenting on the concerns of older women, including violence and financial exploitation, at past sessions of the Commission on the Status of Women, Commission on Social Development, and Human Rights Council. At the 2014 and 2015 sessions of the UN Open-Ended Working Group on Ageing, the U.S. recommended actions member states can take in UN fora on behalf of older persons. We think these courses of action offer the most effective means to outline progress to date; identify what remains to be done; and suggest best practices to tackle remaining challenges in a timely way.
Conclusions and priorities for the future

In 2015 the Social Security Act turned 80 years old, while Medicare, Medicaid, and the Older Americans Act all turned 50. These four programs serve as the foundations of the support system for older adults in our country, but they are augmented by the many and varied programs highlighted throughout this report from across the U.S. Government. One thing all of these programs face together is the massive demographic changes in the U.S. There are more older adults than ever before, and that group is much more diverse itself – in terms of age, functional ability, race and ethnicity, and many other factors.

These shifts represent challenges to the budgets and approaches of Federal programs, but they also represent huge opportunities. Older Americans are a powerful and growing constituency, and they are living longer and more independent lives than ever before. The majority of older adults have long been clear on wanting to receive more supports and care in their homes and communities, and we are now seeing reforms to the provision of care in our country that allow that.

There is still a great deal of work to be done in expanding, strengthening, and financially sustaining the system of home and community-based services that older adults want and need. As more and more evidence mounts on the cost effectiveness of these approaches, we hope to witness the expansion of this approach in the U.S. and across the globe.

Similarly, the U.S. and the rest of the globe has ongoing work to do in shifting focus from treatment of diseases and injury toward prevention and a focus on healthy behaviors, environments, and institutions. Prevention improves people’s quality of life and saves money, but is often not a focus of systems in the U.S. and abroad.

The U.S. has made significant strides in developing systems to prevent, detect, and report elder abuse, neglect, and exploitation, but there is still an alarmingly high likelihood that older adults will become victims of some sort. This is true around the world, where elder abuse is frequently overlooked, misunderstood, and unreported, especially abuse of older women. The human rights of older people must be a focus for the global community as we face this century of massive demographic change and growing older adult populations.

Finally, it is crucial that caregivers are acknowledged and supported, while also ensuring that care provided to older adults is centered on their needs and wishes. The challenges facing both informal and formal caregivers around the globe are massive, complex, and frequently overlooked. Major shifts will need to be made in how older adults are cared for, and an important place to start is acknowledging the hidden caregiving economy. Both older adults and their caregivers need and deserve a support system that is flexible, with person-centered assistance; effective and equitable; respects a wide range of traditions, beliefs, and cultures; and celebrates the unique and powerful histories of the world’s older people.