



ASA Policy Priorities



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ASA's strategic plan envisions that by 2024 ASA will expand member engagement in policy development and advocacy and significantly strengthen ASA's role and voice as one of the country's leading aging sector advocates.

We will lead on policy efforts related to:



ASA will support organizations and coalitions championing issues related to aging that align with ASA's mission and member priorities. For all other important aging policy matters, we will use our extensive year-round educational and thought leadership programming to drive change for our society.

Older adults and families caught in the digital divide face a public health crisis, with restricted ability to stay healthy, meaningfully engaged or financially secure amid the COVID-19 pandemic and beyond. Experiencing the digital divide can mean not knowing how to access online portals, not having access to a smartphone or laptop or not having a trusted resource for help navigating technology, especially for older people who have low digital literacy or experience language access barriers. While the pandemic unleashed historic investments by the federal government in expanding broadband infrastructure investments and opportunities for greater digital equity efforts, we must ensure older adults are part of this work.

3 Key Issues: Access, Adoption and Content

#1 Access

The costs associated with broadband subscriptions, which are out of reach for millions of Americans of limited economic means, present the greatest challenge to expanding digital accessibility and adoption rates in multifamily affordable rental housing.

#2 Adoption

There is a lack of private and public support for digital literacy programs that are age-inclusive, that teach basic technical skills, are culturally competent and build capacity for community-based organizations and their staff.

#7 Content

Curricula need to include all the ways in which one can adopt and use technology—not just how to use Microsoft Word, but also how to navigate social media, fintech, telehealth, federal and state benefits and other lifesaving resources. The curricula should also include scam and fraud prevention training, as cybercrimes against older adults have increased fivefold since 2014, costing more than \$650 million in losses per year.

Continue to Invest in Age-inclusive Programming

- Support greater investments in broadband infrastructure and subscriptions, including intentional investments and grants by the federal government in historically marginalized communities, federally supported housing and rural areas.
- Create voucher and grant programs for low-income individuals for the purchase of a connected device (i.e., a desktop, laptop or tablet computer) for which the appropriate federal agency shall reimburse the retailer.
- Invest in state and localities to support expanding digital inclusion programs in public libraries, senior centers and congregate meal sites.

Include Older Adults at the Table

- Ensure federal agencies responsible for overseeing and influencing digital inclusion issues, such as the <u>FCC</u>, <u>FTC</u>, <u>CFPB</u> and <u>NTIA</u>, consider the needs of older adults by including age in diversity, equity and inclusion (DEI) efforts and adding representatives of the aging field to advisory boards.
- Collaborate with existing private-sector efforts to ensure older adults play an active role in defining problems and devising solutions.

Reform Government Regulations and Policy

- Assess the availability and outcomes of expanded telehealth services under Medicare and Medicaid during the pandemic and make effective telehealth coverage permanent.
- Create digital inclusion and literacy requirements for all federal programs promoting volunteerism, workforce training or education that targets older adults, as well as multigenerational efforts such as AmeriCorps and in the departments of Labor and Education.
- Improve and expand federal regulation that strengthens rules and policies to prevent and prosecute internet and cyber scams targeting older adults.

Ageism refers to stereotypes, prejudice and discrimination directed toward others or oneself based on age. There are well-documented social, economic and health impacts of ageism.

3 Key Issues: Healthcare, Culture and Law

#1 Ageism in healthcare is prevalent.

Older adults face age-based biases and barriers to diagnosis and treatment that effectively ration healthcare delivery. Older adults are too often excluded from research. In a 2021 study, researchers found that one-third of U.S. respondents ages 50 and older reported the healthcare system "never," or only "sometimes," considered their care preferences, which is magnified among those who are lower-income or identify as a minority group. This can lead to older patients engaging less in the healthcare system or not seeking medical care altogether. Any reluctance to use health services has serious implications for older minority populations suffering from chronic conditions.

#2. Ageism in our culture.

On TV (where only 1.5% of characters are older adults), in advertising (where older adults are 7 times more likely to be portrayed negatively in online ads), in housing (where elders face age-based screening and discrimination) and in education (in which there are ageist funding and other structural barriers)—all out of sync with the reality of today's aging society.

#3 Ageism in our laws.

From how they're made to how they're implemented, arbitrary, chronological age-based laws, regulations and policies permeate all three branches of government. Congress uses ageist language in law and avoids investing in older adults; the Judicial Branch undervalues older judges, and the legal system is fraught with age-bias; and the Executive Branch promulgates ageist regulations and policies with arbitrary, chronological age-based laws.



Make our laws age-inclusive

- Encourage the United States to advance and join the <u>UN Convention on Rights of Older</u> Persons.
- Reform U.S. age-discrimination laws to level the evidentiary playing field.

Invest in anti-ageism efforts that work

- Expand budget, enforcement and reporting requirements for the <u>Equal Employment</u> <u>Opportunity Commission</u> and the <u>Department of Labor</u> related to age discrimination.
- Improve the <u>Workforce Innovation and Opportunity Act</u> to promote the employment of older individuals.
- Invest in anti-ageism and multigenerational federal education initiatives to create greater cross-generational understanding.

Ensure the government understands the impacts of ageism

- Conduct a <u>GAO</u> analysis of how ageism permeates regulations and policies to the detriment
 of older adults to monitor and track ageism in a range of key agencies, particularly among
 healthcare and long-term care workers, in the housing sector, in the legal system and during
 emergency management, and implement actions plans for change.
- Invest in more ageism research from the <u>NIH</u> and other related federal agencies on the impact of ageism in healthcare and long-term care.
- Ensure age is part of federal DEI initiatives, including adding age advocates on advisory boards, requiring age-related training and certifications (such as for all healthcare providers), to increase knowledge of the aging process and teach people how to work with older adults.

Health equity is having the personal agency and fair access to the resources and opportunities needed to achieve the best possible physical, mental and social well-being. By 2030, it is expected that 20% of Americans will be ages 65 or older, and soon after will outnumber children. Our healthcare system is unprepared for the complexity of supporting an aging population—a problem that has been magnified by the COVID-19 pandemic, which has had the greatest impact on historically marginalized older adults.

3 Key Issues: Data, Workforce and Organizational Capacity

Lack of data on historically marginalized populations prevents adequate strategies.

For older adults, social determinants of health such as access to housing, financial resources, transportation and social connections, play a critical role not only in better health outcomes, but also in improving overall well-being. Proper collection of reliable data can help shine a light on where disparities exist to develop adequate interventions and strategies for tackling health inequities.

Lack of an age-competent and diverse healthcare workforce is exacerbated by a shrinking pipeline of talent.

Too many health providers do not understand the diversity inherent in aging processes, and when treating older patients, discount their needs and experiences. Though people of color are projected to make up much of the population within a few decades, they are largely underrepresented in the healthcare workforce. Only 11% of the physician workforce, 15% of registered nurses and 20% of physical and occupational therapists identify as African American, Hispanic, or American Indian and Alaska Native.

Lack of resources for community-based organizations prevents delivery of inclusive and reliable community-based care.

Communities served by the health system are usually the last stakeholders to provide input and direction to localized health equity plans. For successful programs, implementation and community buy-in, community members and community-based organizations must have the resources and independence in program investments.

Invest in broad, diverse data collection

- Federal agencies, such as the <u>CDC</u>, should roll out high-quality, centralized and standardized data collection training and systems to improve accuracy, close gaps in data, and monitor and report on progress made toward eliminating disparities.
- Support investments in implementation of solutions based on Social Determinants of Health (SDOH) data.
- Improve diversity in clinical trials and data collection for COVID-19 and future public health threats to address SDOH.
- Equip providers with the necessary technical assistance and funding to execute a unified data collection and tracking process.
- Require health systems to collect, analyze, and report enhanced disaggregation of race and ethnicity data to allow for transparent reporting and analysis of data.

Expand, diversify, and train the care workforce

- Increase funding and developmental opportunities that promote racial, ethnic and all forms of diversity in the healthcare workforce.
- Expand and target graduate medical education funding and loan forgiveness programs to foster training for individuals from underrepresented groups.
- Support caregivers and home- and community-based care models that prioritize SDOH.
- Improve gerontological training for all healthcare providers, from the specialized diagnosis
 and treatment of older patients to more individualized, integrated care that incorporates the
 patient's person-centric goals and treatment objectives.

Broaden the scope of federal programs for older adults to empower and build resources in community-based organizations

- Support increased federal funding for existing and new social, economic and mental health services for older adults beyond current programs.
- Invest in age-inclusive federal, state, and local health literacy efforts to improve gaps in healthcare understanding and to lower costs.
- Invest in creative solutions for streamlining benefits, transportation reimbursements, grants and vouchers to ensure older adults have access to community-based healthcare options.
- Staff federal advisory boards and councils with local leaders of organizations serving older adults, and older people who receive services.
- Improve federal grant-making and funding to increase lead-time for applicants, funding for capacity-building programs, improve reporting systems, provide technical assistance, and require local steering committees made up of community-based organization stakeholders.

Climate change and its impacts are well documented. However, its unique impact on older adults is often ignored. A 2013 <u>EPA</u> study found that most older Americans live in just nine states and that five of those states (California, New York, Florida, Texas and Pennsylvania) are highly susceptible to climate change.

3 Key Issues: Age-inclusion, Emergencies and Volunteerism

Lack of age-inclusive healthcare and environmental justice policies.

There is significant science that demonstrates all the ways in which climate change impacts the health of older adults—from respiratory diseases to mental health issues. But we believe more needs to be done to not only address how our healthcare and other systems relied upon by older adults are impacted by climate change but demonstrate why environmental justice advocates must include older adults in their advocacy and policy considerations.

Lack of broad, consistent and intentional federal support for emergency preparedness, response and recovery for older adults.

Local, state and federal officials, along with help from nonprofit agencies, maintain a response network for disaster events and shape policies around emergency preparedness, response and recovery. However, the higher rates of death for older individuals in emergencies, along with the increase of these events due to climate change, requires preparedness, response and recovery policies that focus on this population.

43 Lack of environmental volunteer opportunities for older adults.

Shifting demographics are driving increased volunteerism by older adults but so, too, is the desire for many to reimagine retirement. The primary motivations in older environmental volunteers are socialization, generativity, usefulness to others and a pro-environmental attitude. Only 15% of older adults engage in environmental activities despite 80% of this population affirming that they "do what is right for the environment." That is why we need better policies that harness the benefits of volunteerism for older adults while increasing the number of participants in climate change initiatives.

Include Older Adults in Healthcare and Environmental Justice

- Support greater investments by the <u>HHS</u>, <u>EPA</u> and other federal agencies in age-inclusive research to study the impact of climate change on how we age.
- Invest in climate change training for the healthcare workforce, particularly as it relates to the well-being of older adults.
- Invest in transitional sheltering assistance for older adults who live in high-risk climate areas, such as areas with unhealthy air quality caused by wildfires.
- Identify innovative age-friendly, climate-friendly solutions that also impact SDOH, such as
 creating more cooling centers and adding urban greenery, or creating more accessible urban
 greenspace, to combat social isolation and heat islands, while providing fresh air.
- Expand existing economic development and land-use tools for localities, states and the
 federal government to ensure older adults are intentionally included in decisions related to
 comprehensive planning, in environmental reviews or impact analysis and in making change
 through local boards and commissions.

Strengthen Emergency Preparedness, Response and Recovery

- Amend existing federal legislation mandating the inclusion of older adults in preparedness and disaster policies.
- Require the <u>Federal Emergency Management Agency</u> (FEMA) to include older advocates on their advisory boards and commissions and mandate localities do the same.
- Advocate for localities to implement a formal emergency preparedness plan specifically
 for older adults, which includes leveraging existing age-friendly communities in a system to
 identify and publicize community service providers that can enter disaster areas and provide
 assistance, as well as drafting a plan that maps out neighborhoods (using public records) with
 a higher concentration of older residents.
- Invest in the energy and outdoor infrastructure of the United States to deploy innovative technologies and update existing infrastructure to be reliable and resilient.

Promote Age-inclusive Volunteerism

- Invest in a Civilian Climate Corps that centers older adults, by reviving a federal program
 created during the Great Depression by President Franklin D. Roosevelt to create work and
 volunteer opportunities that would combat climate change.
- Expand public sector support for volunteerism at older ages, as now the private sector fulfills
 a more active role in creating these opportunities. A significant expansion of programs such
 as <u>AmeriCorps Seniors</u> is necessary, with environmental work as a priority.
- Offer environmental volunteering as an option in pre-retirement programs.
- Ensure green volunteer roles are open to people across all education and income levels.
 Potential ways to combat disparities include free transportation, compensation for qualified individuals and reimbursement for travel and food costs.
- Encourage innovative volunteer programs, such as a Cornell University pilot program called Retirees in Service to the Environment that created a partnership between an organization dedicated to environmental education and one devoted to serving older adults to teach environmental workshops and encourage volunteering with an organization.