



September 2024

Healthy Aging Regional Convenings Summary

Collaborations to Support Older Adult Health

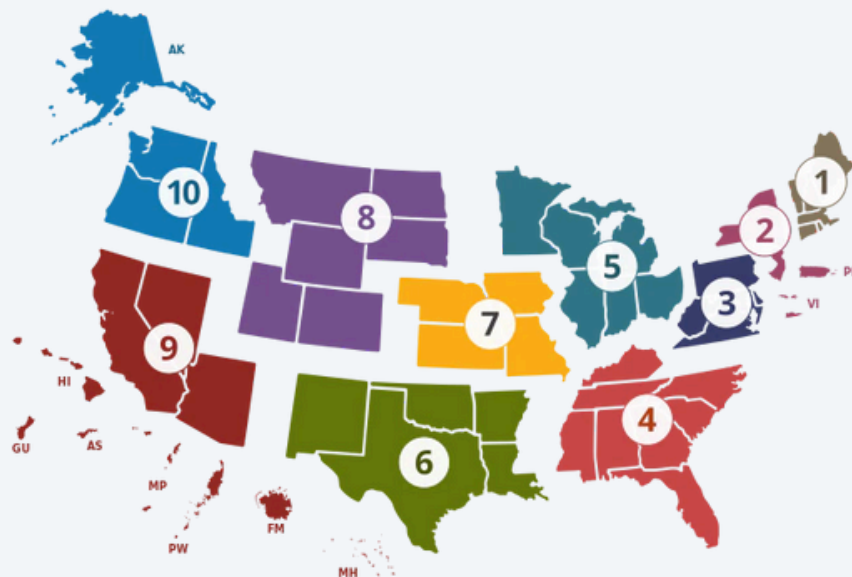


Background

The older adult population in the U.S. is growing rapidly – by 2040, almost a quarter of people living in the U.S. will be age 65 or older. The U.S. Department of Health and Human Services (HHS) Office of Disease Prevention and Health Promotion (ODPHP) has identified healthy aging as a key national priority and has worked to raise awareness of the many dimensions of healthy aging by supporting initiatives designed to help people live longer, improve their health, and remain healthy throughout their lives. Trust for America’s Health (TFAH), a leader in healthy aging in the U.S., has worked with state and local health departments through the [Age-Friendly Public Health Systems](#) initiative to elevate healthy aging as a core public health function.

ODPHP and TFAH have regularly partnered on healthy aging efforts, beginning with the [regional workshop series](#), held from Fall 2019 to Spring 2021, that focused on identifying opportunities for collaboration among public health and aging officials in states, tribes, and territories on healthy aging topics. Following the workshop series, ODPHP and TFAH co-sponsored the 2021 Healthy Aging Symposium, connecting attendees with the latest science, best practices, healthy aging policies, and innovative interventions to improve the health and well-being of older adults.

Exhibit 1. U.S. Department of Health and Human Services Regions



Region 1

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Region 2

New Jersey, New York, Puerto Rico, and the Virgin Islands

Region 3

Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia

Region 4

Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee

Region 5

Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

Region 6

Arkansas, Louisiana, New Mexico, Oklahoma, and Texas

Region 7

Iowa, Kansas, Missouri, and Nebraska

Region 8

Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming

Region 9

Arizona, California, Hawaii, Nevada, American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Marshall Islands, and Republic of Palau

Region 10

Alaska, Idaho, Oregon, and Washington

In February 2023, ODPHP co-sponsored the Healthy Aging Workshop with TFAH and The John A. Hartford Foundation to foster cross-sector collaboration to improve and support the health and well-being of older adults across the U.S. The workshop provided

an opportunity for leaders from each of the 10 HHS regions (**Exhibit 1**) to discuss their healthy aging priorities and brainstorm actions on which to collaborate. The workshop was attended by over 100 public health and aging services leaders.



Following the workshops, ODPHP and TFAH hosted ten healthy aging regional convenings (one with each HHS region) to discuss updates on healthy aging activities, priorities, and challenges. These meetings occurred between November 2, 2023 and April 23, 2024. The meetings were attended by state, territorial, and tribal health officers; state and local public health leaders; state and local aging services leaders; and HHS staff (including from ODPHP, the Office of the Assistant Secretary of Health (OASH), the Administration of Community Living (ACL), and the Substance Abuse and Mental Health Services Administration), The John A. Hartford Foundation staff, and TFAH staff.¹

1. Representatives from Puerto Rico, the U.S. Virgin Islands, Kentucky, and Mississippi were not able to join any meetings and are not included in this summary.

Healthy Aging Regional Convening Goals

The purpose of these healthy aging regional convenings was to:

- Provide updates on state activities and plans around older adult health and well-being since the February 2023 workshop, focusing on shared priorities and action plans.
- Determine whether the priorities selected during the Regional Workshop are still the most critical items to address in each region and if any priorities have shifted.
- Share progress on the previously identified objectives or any new objectives including any new collaborations or partnerships.
- Identify who else needs to be at the table for collaboration.
- List any challenges that have been experienced as well as how ODPHP and TFAH can support these activities and what additional resources would be helpful.



Healthy Aging Priorities

During the regional convenings, the following five topics arose as key healthy aging priorities:

- Brain and Mental Health
- Workforce
- Caregiving
- Social Determinants of Health
- Social Engagement and Social Isolation

This report synthesizes the key themes that emerged across the regions, provides implementation considerations for healthy aging practitioners, and lists additional healthy aging resources for further reading.

Brain and Mental Health

Attendees identified brain and mental health of older adults as a top priority. In this context, brain and mental health includes Alzheimer's Disease and related dementias, depression, anxiety and other mental conditions. Attendees noted that care providers for people living with dementia, whether institutional or in the community, are not always equipped or trained to serve people living with complex mental conditions, making it difficult for these individuals to receive adequate and appropriate care.

To address some of these challenges, several jurisdictions are focusing on improving dementia education and care by integrating dementia screening into primary care settings, providing specialized dementia training to staff in care facilities as well as for families and community members, and employing dementia care navigators to support individuals living with dementia. Evidence-based models are being implemented in some jurisdictions, such as [Project Extension for Community Healthcare Outcomes \(ECHO\)](#) and the [Guiding an Improved Dementia Experience \(GUIDE\) Model](#), to improve health service delivery to patients with dementia. Innovative programs are being expanded as well, such as [memory cafés](#), which are safe places for caregivers and individuals with dementia to connect and socialize. Many jurisdictions are also working to improve support for other mental health conditions, including suicide prevention, by offering counseling trainings for health care providers and partnering with the U.S. Department of Veterans Affairs to distribute gun locks.



COUNSELING ON ACCESS TO LETHAL MEANS

The Georgia Department of Health in collaboration with the Georgia Department of Aging Services (**Region 4**) implemented the [Counseling on Access to Lethal Means \(CALM\) program](#) to limit access to lethal means among older adults and veterans who show signs of mental health concerns. The program is a three-hour workshop for clinical professionals focusing on reviewing suicide data on lethal means and firearms, modeling counseling strategies, practicing counseling sessions, and discussing learnings with peers.

Workforce

Many jurisdictions are experiencing challenges with workforce supply and retention across the aging field, including shortages of trained staff and staffing turnover, especially in rural areas. Some solutions to expand the workforce that are currently being implemented include recruiting and offering incentives to students. For example, attendees reported offering nursing assistant trainings to high school students, nurturing partnerships between nursing schools and facilities that serve older adults, and dedicating funding toward loan forgiveness programs for health providers that serve older adults. Another recruitment strategy is to train and hire immigrants who have experience in health and human services. However, one jurisdiction noted that there is a need to increase the number of languages available for trainings and certification tests, as most are currently in English (and sometimes Spanish), which may limit the full pool of capable care worker candidates. In addition,

jurisdictions are focusing on retention of staff by providing toolkits and training to care facilities.

Community health workers (CHWs) can bridge gaps in care delivery. One jurisdiction received grant funding from the Health Resources and Services Administration (HRSA) to help CHWs receive training and certification from academic partners. Training included topics such as trauma-informed care, motivational interviewing, and client interactions. Some jurisdictions have also bolstered the role of CHWs by allowing Medicaid to pay for CHW services.

Attendees also discussed improving financial compensation and benefits to incentivize care workers, such as state tax credits, pension plans, and retirement investments. However, jurisdictions are still working towards implementing these strategies.



STRENGTHENING THE WORKFORCE PIPELINE

In Colorado (**Region 8**), legislators passed a bill ([SB31](#)) to improve access to geriatrics specialists for older Coloradans through coordination with graduate programs and incentives to students. The legislation provides up to \$400,000 in loan forgiveness for nurse practitioners and physician assistants who practice geriatrics in underserved communities. The program has authorized three years of funding starting in fall 2024.

Caregiving

Caregivers are an essential pillar of healthy aging, especially for individuals who wish to stay in their homes. There is a recognized need across jurisdictions to increase support for caregivers, including through financial mechanisms and education and training. Attendees discussed ways to increase financial support for caregivers, such as direct reimbursement, state tax credits, and respite grants that can be used towards patient care or caregiver-centered services and self-care. Many agencies have compiled online resources for caregivers on topics such as providing care, accessing services, and encouraging self-care. Some noted challenges when people do not identify as caregivers because it is more difficult to reach them with training and other supports.

Many participants noted the increased number of grandparents serving as primary caregivers for their grandchildren, especially in areas that have been heavily impacted by the opioid epidemic. One way to support older adults serving as caregivers is by connecting grandparents to federal assistance (e.g., Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Supplemental Nutrition Assistance Program (SNAP)) and providing skills trainings on topics like how to use technology.

POLICY INSIGHT

[The Recognize, Assist, Include, Support, and Engage \(RAISE\) Family Caregivers Act of 2017](#) is intended to support family caregivers through the creation of a Family Caregiving Council, Initial Report to Congress, and a National Family Caregiving Strategy. It is an ACL priority to support and track implementation of this legislation.

SUPPORTING CAREGIVERS

Through the [Family Caregiver Support Program](#) in Washington (**Region 10**), local Area Agencies on Aging offer services to caregivers for free or at low cost. Services available to caregivers include helping them find caregiver support groups, identifying training on specific caregiving topics, and offering respite care when the caregiver needs a break.



Social Determinants of Health

Housing

Housing was identified as a growing issue of concern for older adults across most regions. Older adults lack access to affordable and appropriate housing, and those who are able to find housing experience challenges in moving. Access to housing is of particular concern for older adults living in tribal communities. To address the issue of access to housing, agencies are exploring partnerships with organizations such as the YWCA and Habitat for Humanity to increase affordable housing opportunities. Others are also considering legislation to improve options for housing and assisted living and to address eviction policies. Aging in place is also being prioritized through home modification programs as well as programs to provide in-home care.

Transportation

Older adult access to transportation was an issue shared across regions. Leaders are exploring ways to expand older adult access to transportation, such as providing accessible vehicles and recruiting volunteers to transport individuals to medical appointments. Another possible solution being considered is the expansion of mobile clinical services and meal delivery programs to provide nutritious food to older adults.



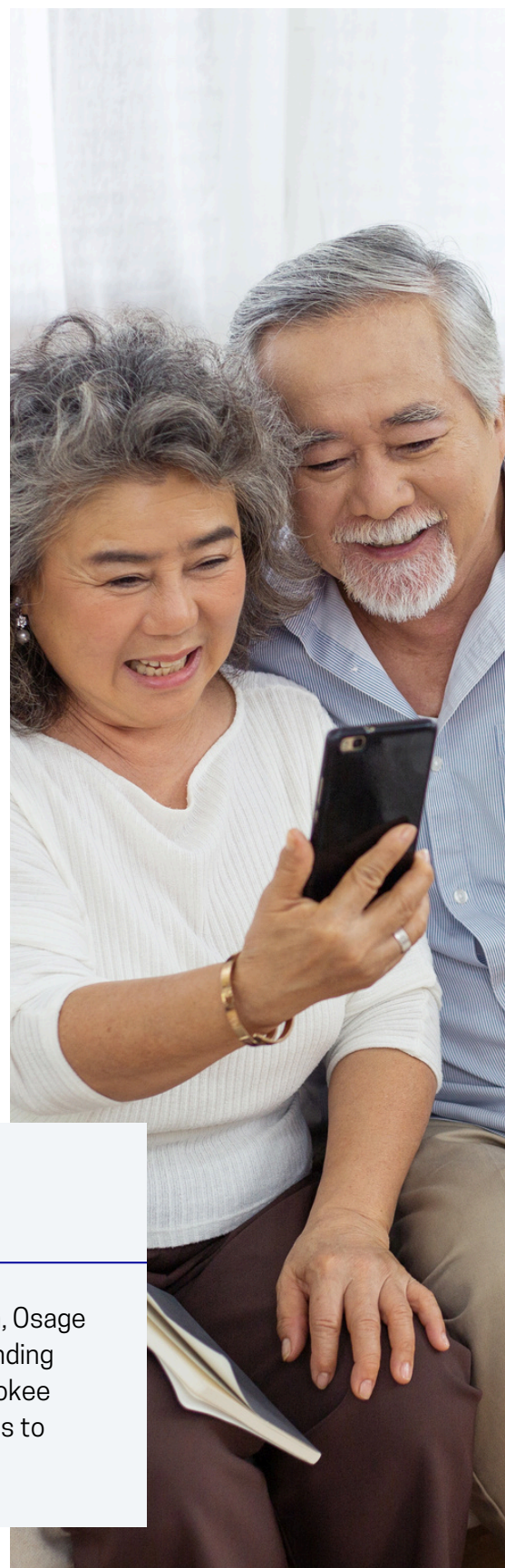
COLLABORATING TO IMPROVE HOUSING AND HEALTH

Maryland (**Region 3**) is a recent recipient of the [Housing and Services Partnership Accelerator](#), which supports jurisdictions in developing or expanding innovative housing-related supports and services for Medicaid-eligible people with disabilities and older adults who are experiencing or at risk of homelessness. The Maryland Medicaid agency and Maryland Department of Aging partner to lead this program in collaboration with an integrated team that includes the state departments of housing and community development, aging, and disabilities, in close coordination with other statewide associations and organizations.

Other Social Determinants of Health

Attendees across the regions were also focusing on the following social determinants of health priorities:

- **Communication and access to health information and resources.** Attendees recognized a lack of language-inclusive resources and a need for addressing language barriers to improve communication between older adults and health providers. The Hawai'i Public Health Institute (**Region 9**) conducted focus groups to inform [culturally responsive public service announcements on Alzheimer's](#), which incorporated several words from the Hawaiian language to describe Alzheimer's. Attendees also discussed strategies to disseminate educational materials through community events and other touchpoints for older adults, such as distributing vaccine information flyers through a meal delivery program and providing opioid resource pamphlets at senior centers.
- **Food security and nutrition.** Attendees noted challenges with access to food for older adults, including food deserts and tribal access to food. Some attendees mentioned that there are long waitlists for nutrition programs and Older American Act programs (e.g., home-delivered meal programs) in their area.
- **Employment for retired adults.** Age bias in hiring leads to economic challenges, social isolation, and increases health problems, disproportionately impacting women of color. Attendees discussed ageism and how to incentivize the hiring of older adults.



LENDING A HELPING HAND

In **Region 6**, many tribal nations (e.g., Delaware Tribe, Cherokee Nation, Osage Nation) work together to provide training, resources, services, and funding that benefit all surrounding tribal communities. For example, the Cherokee Nation granted funding to the Delaware Tribe to provide meal programs to Cherokee Nation and Delaware Tribe members.

Social Engagement and Social Isolation

Social isolation and loneliness are prevalent issues among older adults across regions. A commonly suggested solution is the availability of senior centers, adult day care models, and other programs that offer health and preventive services for older adults, while also providing opportunities for social engagement. For example, these programs may be provided by local YMCAs or Area Agencies on Aging.

These programs can often be supported through Older Americans Act Title III funds. One state developed social isolation screening tools to help care workers identify instances of social isolation. Some jurisdictions offer training for older adults to help them develop skills to handle social isolation and loneliness and mitigate suicide risk.



ADDRESSING SOCIAL ISOLATION

The North Carolina Division of Aging and Adult Services (**Region 4**) created a Social Isolation Workgroup to facilitate training across the state on suicide prevention, belonging, empathy, and how to “be with” elder neighbors and loved ones. This workgroup focuses on five key approaches: (1) requiring senior centers to offer virtual programs to be considered a Center of Excellence; (2) teaching older adults digital skills including digital health literacy; (3) connecting older adults to resources and virtual programs via the [Social Bridging Project](#); (4) increasing screening tools and referral programs; and (5) creating an assessment process.

Implementation Considerations

Partnerships

Multi-sector collaboration and other partnerships are vital to developing and implementing healthy aging programs. Collaboration through coalitions, networks, workgroups, task forces and other groups made up of individuals and organizations interested in improving the health and well-being of older adults is a key strategy to advancing healthy aging. These groups often inform programs, advocate for legislation, share information, and plan initiatives, drawing from multiple perspectives and resources. In addition to formal groups, attendees noted several other effective partners, including hospitals and healthcare systems, universities, faith-based organizations, libraries, YMCA's, and regional Federal Emergency Management Agencies (FEMA).

While partnerships can often help extend capacity, making new connections and maintaining current partnerships can be difficult due to lack of resources, time constraints, and workforce shortages. One attendee noted that their isolated geography limited the number of organizations available for partnerships, although another attendee acknowledged that being an isolated community created tightly connected networks.



COORDINATING ACROSS SECTORS

The Hawai'i Public Health Institute (**Region 9**) coordinates the [Kūpuna Collective](#), which is a multi-sector network to support Hawai'i in age-inclusive ways that maximize health, independence, and engagement among older adults. Network members include foundations, nonprofit and community-based organizations, health care organizations, and academic institutions.

Addressing Ageism

Across all regions, there is an effort to reframe communications, policies, and programs to foster age-positivity and reduce stigma associated with ageism. Ableist language and stereotypes about aging are barriers to expanding healthy aging efforts, but [reframing how we think about older adults](#) can lead to increased use of age-friendly language and even resulting in changing the names of some agencies to align with updated terminology. Many jurisdictions are providing trainings, resources, and campaigns to educate staff, health care workers, and community members about ageism and promoting conversations about healthy aging.

Data

Robust data on older adults is crucial to understand older adult populations and identify needed interventions and resources. Many jurisdictions are conducting scans to identify gaps in healthy aging resources, develop strategies to improve their social determinants of health data, and improve

resource availability and allocation across populations. However, some participants discussed challenges with the availability of data, particularly local data, in their area. One attendee recommended using proxy indicators when exploring data for smaller geographics regions. Local Area Agencies on Aging may also be able to provide data and support data needs.

Funding

Consistent funding is needed for programs to be sustainable and effective, and diverse funding streams can be beneficial when other resources are limited. Equity should be a key consideration when determining how to allocate funding for healthy aging programs. One attendee mentioned that they set a base threshold to ensure sufficient funding is delegated to rural areas. Examples of funding listed below (**Exhibit 2**) were identified by participants of the healthy aging regional calls.

Exhibit 2. Example Funding Sources Used by Meeting Participants for Healthy Aging Work

Grant/Program Name	Funding Organization
Alzheimer's Disease Programs Initiatives Grant	Administration for Community Living
BOLD Public Health Programs to Address Alzheimer's Disease and Related Dementias Grant	Centers for Disease Control and Prevention
Community Aging in Place for Better Living for Elders (CAPABLE) Grant	Johns Hopkins University
Lifespan Respite Care Program	Administration for Community Living
Suicide Prevention Grant	Centers for Disease Control and Prevention



Conclusion

The series of regional calls offered an opportunity for public health and aging services within the same region to come together to share healthy aging priorities, opportunities, and resources. The calls allowed participants to share best practices as well as voice challenges and barriers they face while working to improve the health and well-being of older adults and strengthen the partnerships within their region.

ODPHP and TFAH are committed to continuing to support multi-sector collaboration in states, tribes, and territories at all levels. TFAH and The John A. Hartford Foundation have become [Healthy People 2030 Champions](#), aligning priorities, partnerships, and activities with Healthy People goals. These partnerships are essential to advancing healthy aging across the country and to further improving the conditions for all people to thrive.

Additional Resources

The resources listed below were identified by participants of the healthy aging regional calls.

Healthy Aging Organizations and Initiatives

[Age-Friendly Public Health Systems](#)

[The American Society on Aging](#)

[The Better Care Playbook](#)

[Grantmakers in Aging](#)

[Grantmakers in Health](#)

[The John A. Hartford Foundation](#)

[LeadingAge](#)

[The National Center to Reframe Aging](#)

[Trust for America's Health](#)

Brain and Mental Health

[Alzheimer's Disease and Dementia Program](#). Indian Health Service, U.S. Department of Health and Human Services.

[Alzheimer's Media Campaigns](#). Papa Ola Lokahi.

[Best Practice Caregiving: Infographic Series on Dementia Caregiving Programs](#). The John A. Hartford Foundation.

[BOLD Public Health Programs Award Recipients](#). Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

[Brain Health, Alzheimer's, and Dementias Brochures](#). Idaho Department of Health and Welfare.

[Dementia Action Collaborative Resources](#). Washington State Department of Social and Health Services.

[Guiding an Improved Dementia Experience \(GUIDE\) Model](#). Centers for Medicare & Medicaid Services, U.S. Department of Health and Human Services.

[Gun Violence is a Public Health Crisis](#). American Public Health Association.

[How to Improve Attitudes towards Dementia? Reframing as a Tool to Overcome the Stigma around Alzheimer's Disease](#). Cuadrado F., Antoli A., Fernandez-Calvo B., and Vacas J.

[Take Brain Health to Heart Infographic](#). South Carolina Department of Health and Environmental Control.

[Take on Alz Program](#). California Department of Public Health.

[Traumatic Brain Injury Resources and Workbook](#). Washington State Department of Social and Health Services.

Workforce

[Geriatrics Workforce Enhancement Program](#). Health Resources & Services Administration, U.S. Department of Health and Human Services.

[Revisiting the Teaching Nursing Home](#). The John A. Hartford Foundation.

Caregiving

[Involving Family Caregivers to Shape Multisector Plans for Aging](#). Center for Health Care Strategies.

[Joint Meeting of RAISE Family Caregiving Advisory Council & Advisory Council to Support Grandparents Raising Grandchildren](#). The John A. Hartford Foundation.

[Training on Caregiving as a Public Health Priority \(July 2021\)](#). Age-Friendly Public Health Systems.

[Support Caregiving](#). National Academy for State Health Policy.

Social Determinants of Health

[Nutrition and Aging Resource Center](#). Administration for Community Living.

[Social Determinants of Health and Older Adults](#). Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

Social Engagement and Social Isolation

[Addressing Social Isolation in Older Adults as a Determinant of Health](#). South Carolina Institute of Medicine & Public Health.

Other

[Equitable Long-Term Recovery and Resilience](#). Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

[Expanding Falls Prevention Through Surveillance, Community-Clinical Linkages, and Strategic Planning and Evaluation](#). Association of State and Territorial Health Officials.

[Health and Well-being Matter: a Discussion on Reframing Aging](#). Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

[Healthy People 2030 and Older Adults](#). Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

[How Government Can Deliver Streamlined Life Event Experiences](#). Deloitte.

[Multisector Plan for Aging Learning Collaborative](#). The Center for Health Care Strategies.

[ReiMAGine Aging Podcast](#). Massachusetts Healthy Aging Collaborative.

[Training on Ageism \(January 2024\)](#). Age-Friendly Public Health Systems.



Acknowledgements

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