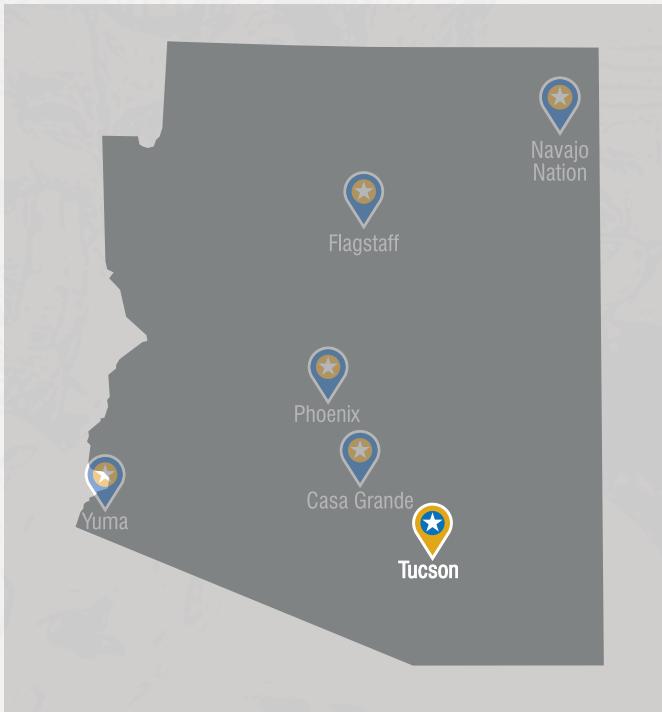


# WHITE HOUSE CONFERENCE ON AGING: *Arizona Listening Sessions 2015*

## Session Site: Tucson, Arizona March 31, 2015



On March 31, 2015, the 2015 White House Conference on Aging hosted a regional forum in Phoenix, Arizona. Others from communities across Arizona were able to participate remotely via two listening sessions that were held simultaneously in Flagstaff and Tucson; in early April three additional listening sessions were held in Casa Grande, the Navajo Nation, and Yuma. A recommendation report from each of the five listening sessions was generated and a Summary of the five listening sessions was produced; the Summary and the individual site session reports (five) are available at [www.pipertrust.org/aging2015](http://www.pipertrust.org/aging2015).

### HEALTHY AGING

*Valuing quality of life for elders.*

Arizona has a large population of seniors, and this population is growing as the baby boomers reach age 65. These seniors are living longer; the numbers of persons living to age 90 and beyond is one of the most rapidly growing segments of our population. As a society we should place higher value on assuring that seniors enjoy a good quality of life. Good health is critical to high quality of life.

Unfortunately Arizona is a relatively poor state. Good, high-paying jobs are relatively scarce, and most people receive low wages. Many people do not have the ability to save for retirement, and many seniors have no significant financial resources and are thus dependent on Social Security and Medicare. Lack of income generally means lack of options. Seniors without financial and other resources struggle to remain healthy and enjoy a good quality of life. Some lack affordable, safe places to live and exercise; some cannot afford to purchase nutritious food; some cannot afford needed medications and health care. Many do not have access to, or cannot afford, the help of caregivers whose help could significantly improve their quality of life.

Physical health does not alone assure a high quality of life. Healthy relationships also are important. Some seniors find it difficult to establish and maintain relationships. Some, particularly those aging in place, become isolated and disconnected from family and friends, and they lack support networks. Some struggle to find a sense of purpose and meaning in their lives. Many seniors lack knowledge about the resources available to assist them, and they struggle to locate and obtain the services they need.

Arizonans of all ages need more information about personal finances and healthy living. They do not expect their health and vitality to decline, and do not appreciate the extent to which lifestyle choices, such as regular exercise and healthy eating habits, will affect their health and well-being as they age. Many Arizonans do not receive adequate preventative care, due to gaps in health insurance coverage. Some lack transportation, and therefore cannot access the healthcare and other services they need.

Our antiquated and fragmented health care system is not set up to address the multitude of issues facing Arizona's seniors. To maintain a high quality of life seniors need to be treated as whole persons. In addition, our healthcare system must adapt to serve an aging population. Arizona does not have a sufficient number of physicians, particularly those with expertise in gerontology. As a consequence, many Arizonans, particularly seniors, overuse emergency services. After their

urgent symptoms are treated they are quickly released,

To adequately provide for the health and well-being of its seniors Arizona should pursue a variety of strategies. We should promote inter-generational living arrangements, where seniors can be supported by and connected to younger members of their families. Efforts should be made to build communities that decrease social isolation of elders. We should be more aware of and pay more attention to the needs of caregivers, and should value informal caregivers. The entire community must become better educated about aging and the needs of elders.

Our society is affected by ageism. Attitudes about seniors must change. As the baby boomers age and the seniors' market share increases, we may radicalize and even glamorize aging. To serve this growing demographic the Older Americans Act should be fully funded. Wellness programs should be brought to communities where elders live. As a society we should promote food security and access to healthy foods.

The healthcare system in particular must become more elder friendly. Elders need integrated health care. Primary care services should be co-located with emergency rooms and urgent care centers. Physicians should treat the whole person, and consider options other than pills to maintain and improve health. Healthcare providers should increase emphasis on prevention, information and follow up. We must address waste and system-wide fraud throughout the healthcare system, especially Medicare, and should address inequities of medical plans. Hospitals should make it easier for elders to transition from the hospital back to the home setting.

To assure health and well-being of elders it is important that seniors have sufficient income to provide for their needs. To that end, we should teach financial literacy through life, in all school settings (K-12 and beyond). We should also educate people about the services that are available to assist seniors in maintaining their quality of life. Visionary leadership is necessary to advocate and provide for the income needs of seniors, and to create incentives for employment of older adults.

#### **RETIREMENT SECURITY**

*Increasing numbers of people are aging without adequate resources (personal and public).*

Most Arizonans are not adequately prepared for retirement. Arizona's low wages may be good for business but many Arizonans are barely scraping by. Income inequality is a real problem in Arizona. People working for \$7.35 per hour cannot pay their current living expenses, let alone save for retirement. Some are in denial about the need to save for the future. Many small

businesses do not offer employees or owners any kind of retirement savings plan. As a consequence many are outliving their resources.

For too many aging people the only retirement plan is Social Security and continuing to work indefinitely. Unfortunately many seniors have difficulty finding suitable employment.

Proposals to privatize Social Security are concerning because many people are not financially literate and thus are unlikely to be able to invest wisely and manage retirement savings effectively. Saving for retirement is complicated by many uncertainties, including uncertainty about what healthcare and housing will cost.

To address these issues we must teach financial literacy beginning in elementary school and continuously thereafter. We must also encourage people to begin saving for retirement when they first become employed. Instead of politicizing Social Security, our leaders should work to fix the program so that it will be there for the many seniors and aging baby boomers who are depending upon it. We should advocate for additional funding, and work at the grass roots level to keep this issue front and center in minds of the general public.

#### **LONG-TERM SERVICES AND SUPPORTS**

*Assuring adequate funding for a continuum of services, including preventive services.*

Our long-term care system is resource based, rather than needs based. Many people are unprepared for the cost of long-term care, whether in home or in an institutional setting. In addition, the long-term care system has not kept pace with the growth of our senior population and currently cannot meet all of the needs for long-term care. There are not currently enough community living facilities to serve the elder population, particularly in rural areas. This problem will become worse as the population of elders swells due to the large numbers of aging baby boomers.

The long term-care system faces many challenges. For the most part providers are focused on profit instead of prevention. There is a lack of coordination throughout the system, including hospitals and providers. There are not enough resources to train healthcare providers at all levels of expertise. Medicare, Medicaid and insurance regulations make it difficult for elders to maneuver the system, and often result in denial of needed care.

Older persons and those who care for and about them should become educated about how best to maneuver the long-term care system and how to appropriately utilize services. Minimum standards and best practices should be developed and disseminated to long-term care providers. Non-professional services and community-based

services expanded, e.g., neighbors helping neighbors, senior companions, life care services, and more inter-generational living arrangements. More skilled and unskilled workers should be trained to provide needed care and assistance. These workers must be adequately compensated and that compensation should include benefits. Respite programs should be more available to informal caregivers.

Our political leadership should begin to think and act as though they will be dependent on Social Security and Medicare to meet their own long-term income and care needs. As a society we should value elders, and advocate for the programs that keep them alive and well. It is also important that long-term care be made as cost-effective as possible so that it will be affordable to the elders who need it. The private sector and government should be encouraged to become more innovative to make long-term care available to all who need it.

### **ELDER JUSTICE**

Elders are too often the victims of fraud and abuse. Elders, particularly those who are socially isolated, are prime victims of scams that prey upon their relative unsophistication and lack of social connection. Older persons also are subject to physical and mental abuse. Too often the abusers are caregivers, including family members. Abused elders often are embarrassed by their circumstances, afraid of cutting off needed care and support, or even unaware that the way they are being treated is abusive. Some elders are reluctant to report the abuse, particularly when it is committed by a family member. There is no user-friendly system for reporting abuse and neglect. In addition, there is a lack of shelters or other alternatives for abused seniors.

Social service and healthcare providers, and even family members often miss signs of elder abuse. Laws exist for the protection of elders, but even when abuse and fraud is reported, this type of crime is not a high priority for prosecution. The Elder Justice Act has not been fully funded. More resources should be devoted to educating all segments of the caregiving community and the public, and to investigate and prosecute claims of elder abuse. Prosecutors should give higher priority to such cases, and judges should impose stiffer penalties when abuse is found. Consideration should be given to the development of special, elder-friendly courts, similar to those that address juvenile justice issues.

The campaign against elder abuse should go viral. We should use technology to educate public

about the issue and how best to identify and prevent abuse. Public service announcements should be developed and broadcast to heighten awareness of the problem.

Another way to address the problem of elder abuse is to build more elder communities to decrease social isolation. We also should find ways to educate and support family members who care for elders.

### ***Issues Important to Arizona***

Arizona desperately needs additional funding to address the needs of elders. There is not enough Medicaid funding, block grant funding for elder programs, funding for implementation of the Elder Justice Act, funding of Adult Protective Services, and funding for preventative healthcare services.

Arizona has many sparsely populated rural areas in which elders must travel great distances to receive healthcare and other services. Transportation should be provided to assure that elders in rural communities receive needed services. Provision of services in rural areas is costly, and many lack services as a result.

The Arizona Department of Behavioral Health Services is being dissolved. This will result in needed care becoming less available to elders.

Attitudinal problems adversely affect many elders. There is a prevailing attitude of ageism, and elders often are marginalized. There is a lack of cultural diversity, including provision for elder LGBTQ individuals in residential settings. There is also a lack of community involvement that might ameliorate some of the problems facing elders.

Arizona has many transient elders who find it particularly difficult to access services. Problems associated with the transient elderly will increase as more retired persons move to Arizona, where they may have few or no family connections.

To address these issues, Arizona's administrative agencies or the Legislature should adopt laws and regulations to ensure that resources are allocated fairly among all Arizona counties. Independent county needs assessments should be performed separately from block grant funding allocations. Programs that serve seniors should be targeted to receive more block grant dollars. With guidelines from federal government, decision making about elders and their needs should be decentralized and delegated to local government. There should be more funding for elder transportation needs, and more community outreach. Measures of all kinds that close the income gap (between rich and poor) will also help assure that elder needs are met.