



Older Americans Act

A Layman's Guide

When President Johnson signed the bill creating the Older Americans Act (OAA) on July 14, 1965, he said:

"The Older Americans Act clearly affirms our Nation's sense of responsibility toward the well-being of all of our older citizens. But even more, the results of this act will help us to expand our opportunities for enriching the lives of our citizens in this country, now and in the years to come."

Created during a time of rising societal concerns for the poor and disadvantaged, the OAA set forth a broad set of objectives which are as relevant today as they were over three decades ago. The OAA has been reauthorized 14 times since 1965.

Title I: Declaration of Objectives and Definitions

This title introduces the purposes and goals on which the OAA's policies and programs are based. It provides a statement of this nation's commitment to assuring the well-being of older persons. Definitions relevant to understanding the OAA's purposes and administering structures are located here.

Declaration of Objectives

1. An adequate income in retirement.
2. The best possible physical and mental health -without regard to economic status.
3. Obtaining and maintaining suitable housing available at costs older citizens can afford.
4. Full restorative services for those who require institutional care, and a comprehensive array of community-based long-term care services - including support to family members.
5. Opportunity for employment.
6. Retirement in health, honor, dignity.
7. Participating in and contributing to meaningful activity.
8. Efficient community services - which

provide choice - with emphasis on maintaining a continuum of care.

9. Immediate benefit from proven research knowledge which can sustain and improve health and happiness.
10. Freedom, independence, and the free exercise of individual initiative - and protection against abuse, neglect, and exploitation.

Title II: Administration on Aging

This title established the Administration on Aging (AoA) within the Department of Health and Human Services (formerly Health, Education and Welfare) under the direction of a Commissioner who must be appointed by the President with the advice and consent of the Senate. The OAA was amended in 1993 to officially upgrade this position to the Assistant Secretary for Aging. Included among AoA's duties and functions are to serve as an effective and visible advocate for older individuals; collect and disseminate information related to problems of the aged and aging; administer grants; conduct evaluation of programs; provide technical assistance and consultation to states; and stimulate more effective use of existing resources. This title calls for the development and operation of the Eldercare Locator and the Pension Counseling and Information Program.

Title III: Grants for State and Community Programs

The largest program under the OAA, this title lays out responsibilities and requirements for State and Area Agencies on Aging. It is through the programs and structures established by this title that most of the money is authorized and most of the legislative detail is found.

Services

Access services: transportation, outreach, I&A and case management.

In-home services: homemaker, home health aide, visiting and telephone reassurance, chore and supportive services for families of older individuals with Alzheimer's disease and other related disorders.

Legal assistance: financial, insurance and tax counseling, representation in guardianship proceedings.

Part A – General Provisions

The purpose of this title is to encourage and assist State and Area Agencies on Aging to foster the development and implementation of comprehensive and coordinated systems to serve older individuals. This part sets forth authorization levels and details the formula by which AoA funds are allotted to states. For the most part this formula is based on the number of people aged 60+ in each state. There are 56 state and territorial units on aging including the District of Columbia, Puerto Rico, Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

For a state to participate under Title III, the governor must designate a state agency as the sole agency to put forth a plan for developing and implementing a statewide aging program. This multi-year plan (2, 3, or 4 years) represents a “legal contract” between the state and the federal government for carrying out the programs authorized under the OAA. Like its counterpart at the federal level, the state agency is responsible for serving as an effective and visible advocate for the elderly.

And it must provide assurances that preference will be given to providing services to older individuals with the greatest economic and social need, with particular attention to low-income minority older individuals and older individuals residing in rural areas.

To enhance the provision of services at the local level, the State Unit on Aging (SUA) is charged with the responsibility of dividing the state into distinct planning and service areas (PSAs) and designating an Area Agency on Aging (AAA) for each of them. The law provides for some exceptions to this requirement and currently there are 13 states and/or territories which are considered single planning and service areas. There are currently 655 AAAs.

The AAAs are responsible for assessing the needs of older persons within their respective PSA. Each AAA is required to provide assurances that an adequate proportion of funds allocated to the PSA under Title III-B will be expended for the delivery of each of the following categories of services: access, in-home and legal assistance. The Area Agency must establish an advisory council consisting of older persons (including older minority individuals) who are participants or who are eligible to participate in OAA programs to advise the agency on area plan development, administration and operation.

This part sets out SUA and AAA plan requirements including assurances that the SUA will carry out a

State Long-Term Care Ombudsman program, guidance related to disaster relief and definitions pertinent to this title.

Part B – Supportive Services and Senior Centers

The justification for the genesis and subsequent evolution of the aging network rests in the belief that there were gaps in the provision of social services for the elderly. The Older Americans

Act, and more specifically Title III, is the only federal supportive services program directed solely toward improving the lives of older people. Under current law, all service providers funded under part B must follow priorities established by the AAA - and approved

by the SUA - for serving the rural elderly, those with greatest economic and social need including specific objectives for low-income minority older persons.

By and large, the list of supportive services funded under Title III has remained fairly constant over the years.

Supportive services

- Health (including mental health)
- Transportation
- Information and assistance
- Housing
- long-term care
- legal assistance
- Services to encourage employment of older workers
- Crime prevention

Part C - Congregate and Home Delivered Meals

Millions of older adults are malnourished. Adequate nutrition is necessary to maintain cognitive and physical functioning, to reduce or delay chronic disease and disease-related disability, and to sustain a good quality of life. The OAA provides for the establishment and operation of nutrition projects both in a congregate setting and for homebound individuals. All meals must meet the requirements for the one-third daily recommended dietary allowances. But the nutrition program is more than a meal. It provides nutrition education, counseling and screening, and often is the gateway to many other services.

The law provides that the programs serve at least one hot, cold, frozen, dried, canned or supplemental food meal per day, five or more days a week except in a rural area where such frequency

is not feasible. Congregate meals are served in senior centers, schools, churches and other community settings. For many older persons the meal provides not only an opportunity for socialization, but the only meal that person may have that day.

Part D - Disease Prevention and Health Promotion

According to the World Health Organization, health promotion is the process of enabling people to increase control over, and to improve their health.

Disease prevention covers measures not only to prevent the occurrence of disease, but also to arrest its progress and reduce its consequences once established. Under this part, the SUA is required to provide disease prevention and health promotion services and information at senior centers, meal sites and other appropriate locations. They must give priority, in carrying out this part, to areas of the State which are medically underserved and in which there are a large number of older individuals who have the greatest economic need for such services.

Disease Prevention and Health Promotion Services

- Health risk assessments
- Routine health screening
- Nutritional counseling and education
- Health promotion programs
- Exercise and fitness programs
- Home injury control services
- Screening for prevention of depression
- Educational programs on
- Medication management education
- Information concerning diagnosis, prevention, treatment and rehabilitation of age-related diseases and conditions
- Gerontological counseling
- Counseling regarding social Services

Part E - National Family Caregiver Support Program

The enactment of the Older Americans Act Amendments of 2000 (Public Law 106-501) established an important new program, the National Family Caregiver Support Program (NFCSP).

The program was modeled after several successful state long term care programs and after listening to the needs expressed by hundreds of family caregivers in discussions held across the country.

Eligible population :

- Family caregivers of older adults;
- Grandparents and relative caregivers of children not more than 18 years of age (including grandparents who are sole caregivers of grandchildren and those individuals who are affected by mental retardation or who have developmental disabilities).

The NFCSP calls for all states, working in partnership with area agencies on aging and local community-service providers to have five basic services for family caregivers, including:

- Information to caregivers about available services;
- Assistance to caregivers in gaining access to supportive services;
- Individual counseling, organization of support groups, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their caregiving roles;
- Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- Supplemental services, on a limited basis, to complement the care provided by caregivers.

Funds are allocated to states through a congressionally mandated formula that is based on a proportionate share of the 70+ population. The statute requires states to give priority consideration to: 1) persons in greatest social and economic need (with particular attention to low-income individuals); and 2) older individuals providing care and support to persons with mental retardation and related developmental disabilities.

Title IV: Training, Research, and Discretionary Projects & Programs

The goals of the OAA and the achievement of AoA service and performance outcomes are anchored in the application of research and evidenced-based program design. Under this title, competitive grants or cooperative agreements are awarded to eligible public or private non-profit agencies, organizations and institutions. This includes state and area agencies on aging and other organizations representing and/or serving older people and their

caregivers. New competitions of state and local innovations and projects of national significance are announced in the Federal Register, project proposals are reviewed by external experts, and project awards are made for periods of one to four years.

Title V: Community Service Employment for Older Americans

The purpose of this title is to foster and promote useful part-time opportunities in community service activities for unemployed low-income persons who are fifty-five years old or older and who have poor employment prospects. Unlike the other titles of the Act, Title V is administered by the Department of Labor.

Title VI: Grants for Native Americans

This program serves as the focal point for advocacy on behalf of older individuals who are Indians, Alaskan Natives and Native Hawaiians. Supportive and nutrition services that are comparable to services provided under Title III are provided to 241 Tribal and Native organizations representing 300 American Indian and Alaska Native Tribal organizations, and two organizations serving Native Hawaiians. Services are provided in a manner that preserves and restores their dignity, self-respect, and cultural identities. Grants may be awarded to tribal organizations representing at least 50 individuals age 60 or older.

The Older Americans Act Amendments of 2000 established the Native American Caregiver Support Program to assist caregivers of Native American elders who are chronically ill or have disabilities.

Title VII Allotments for Vulnerable Elder Rights Protection Activities

While conditions for older Americans have improved markedly since passage of the OAA, many older individuals still are denied their basic rights and benefits, and suffer abusive situations ranging from financial exploitation to severe neglect.

Title VII was created by Congress in the 1992 Amendments to the OAA to protect and enhance the basic rights and benefits of vulnerable older people. Individuals who may need advocacy on their behalf because their physical or mental disabilities, social isolation, limited educational attainment, or limited financial resources prevent them from being able to protect or advocate for themselves. Title VII has a dual focus.

First, it brings together and strengthens three advocacy programs -- the Long Term Care Ombudsman Program; Programs for the Prevention of Abuse and Exploitation; and State Legal Assistance Development Programs - and calls for their coordination and linkage in each state. Second, it calls on SUAs to take a holistic approach to elder rights advocacy. Funds for Protection of Vulnerable Older Americans are allocated by formula to SUAs. States use both Title III and Title VII funds for the Ombudsman and Elder Abuse programs.

Elder Rights Activities

Chapter 2	Ombudsman Program
Chapter 3	Prevention of Elder Abuse, Neglect and Exploitation
Chapter 4	Legal Assistance Development Program

Summary

Americans are living longer. This phenomenon of longevity carries the responsibility of making daily choices over a lifetime to keep active and healthy, to earn, save, and invest wisely, to commit to work or activities that are satisfying and ennobling, to form and sustain lasting ties with family and friends, to fulfill spiritual needs. The Older Americans Act still provides a framework for a partnership among the different levels of government and the public and private sectors with a common objective — improve the quality of life for all older Americans by helping them to remain independent and productive. As with all systems, there will be changes to accommodate the evolving nature of the world in which we live. But for now and in the near future, the Older Americans Act is the foundation.

FOR MORE INFORMATION

AoA recognizes the importance of making information readily available to consumers, professionals, researchers, and students. Our website provides information for and about older persons, their families, and professionals involved in aging programs and services. For more information about AoA, please contact: US Dept of Health and Human Services, Administration on Aging, Washington, DC 20201; phone: (202) 619-0724; fax (202) 357-3560; Email: aoainfo@aoa.gov; or contact our website at: www.aoa.gov