



## ELDERS

Elders are held in the highest regard in all tribal communities. However, American Indian and Alaska Native (AI/AN) elders are the most economically disadvantaged elderly minority in the nation and are at risk for exploitation, food insecurity, limited economic opportunities, neglect, and other factors that harm their health and wellbeing.<sup>82</sup>

The Older Americans Act (P.L. 89-73) (OAA) is the major federal statute that authorizes social and nutritional services to AI/AN elders. These services are essential to providing tribal nations with the resources necessary to address the needs of their elders. These supportive services include congregate and home-delivered nutrition services; community centers; community service employment; long-term care ombudsman programs; information and referral services; and services to prevent the abuse, neglect, and exploitation of elders. The OAA specifically states “it is the purpose of this Title to promote the delivery of supportive services, including nutrition services, to American Indians, Alaskan Natives [sic], and Native Hawaiians that are comparable to services provided under Title III” (grants for state and community programs on aging). Due to inadequate funding to carry out the purpose of Title III, “comparable services” for Native elders have not been achieved. Tribal nations have little or no access to the agencies, departments, ombudsman, and programs that are available to states. In addition, state programs seldom serve Native elders due to cultural and geographic barriers. Addressing these disparities and protecting and enhancing funding levels for these critical programs is necessary in order to ensure AI/AN elders receive consistent and effective care and support.

**Key Recommendations**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Labor, HHS, Education Appropriations Bill**

**Older Americans Act – Title VI**

- *Provide \$43 million for Parts A (Grants for Indian Programs) and Part B (Grants for Native Hawaiian Programs).*

Programs under Title VI of the OAA are the primary vehicle for providing nutrition and other direct supportive services to American Indian, Alaska Native, and Native Hawaiian elders. In FY 2017, 271 tribal nations and tribal consortia were served under the OAA, Part A and Part B grants. Less than half of the Part A and Part B grants given to tribal nations are less than \$100,000 each. This funding level does not provide tribal nations with enough funding to provide adequate services to their tribal elders. As a result, many tribal elder programs are unable to meet the five-days-a-week meal requirement because of insufficient funding and are serving congregate meals only two or three days per week. In addition to being unable to provide elder meals throughout the week, some Title VI programs are unable to provide basic services such as transportation, information and referral services, legal assistance, ombudsman, respite or adult day care, home visits, homemaker services, or home health aide services. Funding should be increased so that Native elders receive critical care and assistance.

- *Provide \$12.1 million for Part C (Native American Caregiver Support Program) administered by the Administration on Aging, and create a line-item for training for tribal recipients.*

The Native American Caregiver Support Program under Title VI, Part C of the OAA assists American Indian, Alaska Native, and Native Hawaiian families caring for older relatives with chronic illnesses. The grant program offers many services that meet caregivers’ needs, including information and outreach, access assistance, individual counseling, support groups and training, respite care, and other supplemental services. Each year, this service reaches more than 240 tribal nations as well as tribal consortia that serve more than 400 tribal nations. Through the Native American Caregiver Support Program, many AI/AN elders and families are able to access the services they need to ensure their caregivers receive the support and services necessary as they provide care for their loved ones. With more than 230,000 American Indian and Alaska Native elders participating, this program cannot be effective if it is not adequately funded. Funding must be increased to ensure Native elder caregivers are receiving and accessing support services that ensure the needs of those they care for are effectively and adequately addressed.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Labor, HHS, Education Appropriations Bill**

**Older Americans Act – Title VII**

**Elder Rights Activities and the Elder Justice Initiative**

- *Create a five percent tribal set-aside for the Protection of Vulnerable Older Americans so that tribal nations and tribal organizations can carry out elder justice activities consistent with the Older Americans Act (Title VII, Subtitle B).*
- *Recommend that tribal nations and tribal organizations be eligible for the Elder Justice Initiative that provides grants to test and evaluate innovative approaches to preventing and responding to elder abuse.*

The current public safety concerns of elders on tribal lands are a result of decades of severe underfunding for tribal criminal justice systems and an incredibly complex jurisdictional landscape. OAA Title VII – Subtitle B authorizes a program for tribal nations, public agencies, and non-profit organizations serving Native elders to assist in prioritizing issues concerning elder rights and to carry out related activities. While such programs are authorized under OAA, appropriations for these programs are necessary because tribal nations have no additional source of mandatory federal funding for elder protection activities. As a result of this issue, a five

percent tribal set-aside should be created under Subtitle B to ensure that tribal nations have access to funds at a comparable level to states. It is further recommended that tribal nations and tribal programs be eligible to compete for grants to test and evaluate innovative approaches to preventing and responding to elder abuse as part of the new Elder Justice Initiative.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Labor, HHS, Education Appropriations Bill

#### Older Americans Act – Title V

#### Senior Community Service Employment Program

- *Restore funding for the Senior Community Service Employment Program (SCSEP) to the FY 2015 level of \$434.4 million and ensure no cuts are proposed for this program by either the Administration or Congress.*

Through the Senior Community Service Employment Program (SCSEP), low-income elders can take advantage of federal job training programs to help meet their needs. SCSEP promotes self-sufficiency and economic enhancement, and is the only federal workforce development program for low-income tribal elders 55 and older. SCSEP provides elders with services and training that allow them to gain necessary skills to re-enter the workforce and transition to regular employment. Restoring SCSEP funding to its FY 2015 level of \$434.4 million is critical for older adults. Each year, SCSEP provides jobs for about 67,000 elders in every state. Protecting and enhancing funding levels for this critical program is necessary in order to ensure tribal elders continue to receive the skills and resources necessary for self-sufficiency and economic achievement.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

- *Fully implement the Indian Health Care Improvement Act and promote long-term services and supports (LTSS) within Indian Country*

As the Native elder population continues to grow, it is important to prepare for the increased demand for LTSS. Generally, elders prefer to age within their homes and communities and pass along knowledge that is essential to Native people. The caregiving usually falls upon family members, because AI/AN households tend to be multigenerational. Caregiving is satisfying but can also be stressful emotionally and financially. Elders cannot continue to afford these services out of pocket. LTSS encompasses a full range of services from in-home community-based services to long-term care. To support and enhance LTSS, the following is needed:

- Develop comprehensive long-term care services by financing IHS Elder Care Initiatives to ensure that elders receive the care they need.
- Establish coordinated care for tribal aging services and supports to ensure that tribal elders will age in place in their own communities.
- Provide services and support for tribal adults with disabilities, who require a range of services such as transportation, home modification, medical, in-home, and other crucial supportive services.
- Work with HHS in developing culturally appropriate healthcare services for tribal elders with dementia diseases such as Alzheimer's disease. These healthcare services should also provide caregiver support services.