



# Join the Conversation

**Thursday, August 4  
10:00 a.m. - Noon**

Community conversations will take place to discuss issues like the changing dynamics between generations; the challenges of caregiving, the financial considerations of elder care and the realities of aging both physical and mental. The thoughts, concerns, opinions, and ideas that Iowans share will be documented and shared with all Iowans and, in particular, policymakers and Iowa Leaders.



*Presented by the Elevate Aging Collaborative: AARP Iowa, Alzheimer's Association, The Hale Group, Iowa Alliance for Retired Americans, Iowa Association of Area Agencies on Aging, Iowa CareGivers, Jewish Family Services, and Older Iowans Legislature. Technical assistance is provided by the Office of the State Long-Term Care Ombudsman.*

## **Cedar Rapids**

*Hosted by Heritage Area Agency on Aging  
Kirkwood Continuing Education  
and Training Center  
101 50th Avenue SW  
Cedar Rapids, IA 52404*

## **Council Bluffs**

*Hosted by Connections Area Agency on Aging  
Connections Area Agency on Aging  
300 W. Broadway, Suite 240  
Council Bluffs, IA 51503*

## **Davenport**

*Hosted by Milestones Area Agency on Aging  
Milestones Area Agency on Aging  
935 E. 53rd Street  
Davenport, IA 52807*

## **Des Moines**

*Hosted by Aging Resources of Central Iowa  
Des Moines Botanical Center  
909 Robert D. Ray Drive  
Des Moines, IA 50309*

## **Mason City**

*Hosted by Elderbridge Area Agency on Aging  
Elderbridge Area Agency on Aging  
22 N. Georgia, Suite 216  
Mason City, IA 50401*

## **Waterloo**

*Hosted by Northeast Iowa Area Agency on Aging  
Northeast Iowa Area Agency on Aging  
2101 Kimball Avenue, Suite 320  
Waterloo, IA 50702*



# IT'S TIME TO ELEVATE AGING IN IOWA

**In 2015, Iowans came together to talk about aging and caregiving. They came together via:**

1. The Iowa Department on Aging leadership of the *White House Conference on Aging* activities; activities that led to conversations in a dozen communities (Ames, Cedar Rapids, Council Bluffs, Creston, Davenport, Des Moines, Dubuque, Fort Dodge, Mason City, Ottumwa, Sioux City and Waterloo) involving close to 300 participants.
2. The production of Iowa Public Television's (IPTV) *Iowans Caring for Mom and Dad – What's Next* program broadcast live to both a studio and statewide audience.
3. The convening of the Older Iowans Legislature at the Iowa Capitol.

## **The general messages heard from Iowans –**

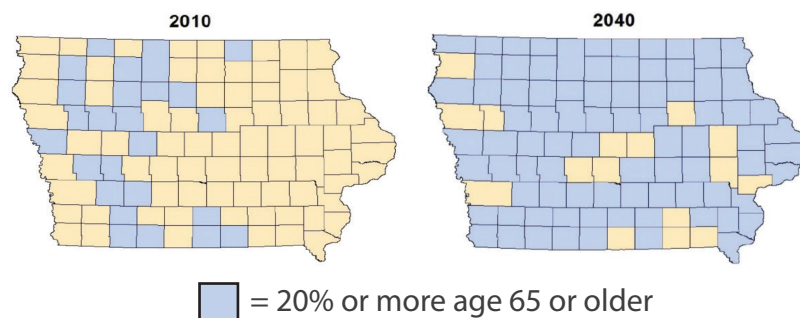
- More needs to be done to ensure that Iowans are informed about and prepared for the physical, mental and financial challenges of growing older.
- Iowans and the formal (the paid workforce) and informal (family and other) caregivers who support them need more help, and their needs deserve to be given greater priority.
- Iowa needs a clear and comprehensive aging agenda and everyone needs to work together to achieve it.

In short, ***it's time to Elevate Aging.***

**Those involved with the 2015 events and compiling this summary include the following organizations:**

AARP Iowa, Alzheimer's Association, The Hale Group, Iowa Alliance for Retired Americans, Iowa Association of Area Agencies on Aging, Iowa CareGivers, Jewish Family Services, Office of the State Long-Term Care Ombudsman, and the Older Iowans Legislature. Technical Assistance has been provided by the Iowa Department on Aging.

## **The context in Iowa serving as the backdrop for the various events:**



- By 2040, **Iowans age 65 and older will comprise 20% or more** of the population in most counties.
- **There are currently over 750,000 baby boomers** in Iowa. Many are, or have been, caregivers for aging parents and other loved ones, and are approaching the age where THEY may need long-term services and supports.
- **70% of those 65 and over** will need some form of long-term services and supports. (*Administration on Aging*)
- **While the demand for long-term services and supports in Iowa is expanding**, the number of family and informal caregivers to provide that support is declining. The paid caregiving workforce is reaching a crisis point due to the inability to recruit and retain the workers needed to meet the growing demand.
- **87% of Iowans indicate** that it would be extremely or very important to have services that allowed them or their loved ones the assistance needed to remain independent (AARP).
- **63,000 Iowans have Alzheimer's disease.** It is the sixth leading cause of death in Iowa. 134,000 Iowans are unpaid caregivers for this population. (*Alzheimer's Association*)

*The commitment to the Iowans who participated in the events was that their thoughts and concerns would be summarized, carried forward, and used to help leaders in Iowa address the challenges that exist. This document serves that purpose.*

## THE SPECIFIC CONCERNS AND THE POTENTIAL SOLUTIONS OFFERED BY IOWANS INCLUDED:

Concerns	Potential Solutions
<p><b>A. Lack of awareness and understanding</b> of the issues Iowans face as they and their loved ones age, and the resources and options available to individuals and families.</p>	<ol style="list-style-type: none"> <li><b>1. Create a highly visible, broad-based educational campaign</b> to better inform Iowans of all ages on the aging and caregiving challenges they will likely encounter, and to encourage them to better prepare for them. Incorporate understanding of the aging process and services into Iowa K-12 and college curriculum.</li> <li><b>2. Expand support for and the resources devoted to</b> the Area Agencies on Aging <b>LifeLong Links™</b> and <b>Family Caregiver</b> programs – to help Iowans better prepare for and respond to these challenges.</li> </ol>
<p><b>B. A rapidly expanding aging population in Iowa and the challenge that individuals, families and taxpayers have in paying for</b> long-term services and supports – now and in the future.</p>	<p><b>Establish new funding sources for long-term services and supports (LTSS).</b> Many individuals and families are impoverishing themselves to pay for LTSS, and Medicaid cannot adequately fund the LTSS needed. Iowa should serve as a laboratory that explores new funding approaches that could include redesigning long-term care insurance, creating IRA or HSA savings vehicles, revising Medicare supplement policies to include LTSS, etc.</p>
<p><b>C. Growing challenges faced by family and other informal, mostly unpaid, caregivers</b> (many of whom juggle caregiving and other responsibilities with paid employment) and a lack of support for their needs.</p>	<ol style="list-style-type: none"> <li><b>1. Increase information, education and support to caregivers</b> as their loved ones transition from one care setting to the next – such as the <i>Care Act</i> proposed by AARP and endorsed by the Older Iowans legislature.</li> <li><b>2. Seek additional funding to create or expand public-private partnerships</b> to improve the health and resilience of family caregivers – such as the Alzheimer's Association's <i>HERO</i> project.</li> <li><b>3. Expand respite and adult day services</b> to give informal caregivers a necessary break.</li> <li><b>4. Encourage and support family and other caregivers</b> by considering tax credits for the expenses they incur, promoting greater workplace flexibility via work scheduling and family leave policies, expanding programs used to pay for the services of family members, and increasing caregiving training opportunities.</li> </ol>
<p><b>D. Difficulty in finding and obtaining home and community-based services;</b> services that help people maximize their independence and live in their own homes.</p>	<ol style="list-style-type: none"> <li><b>1. Enhance the home and community-based service infrastructure</b> by accelerating the shift of tax dollars away from expensive facility-based care and to usually less expensive services that can help people live in their own homes; where they want to for as long as they can.</li> <li><b>2. Explore new sources of revenue</b> specifically for this purpose.</li> <li><b>3. Embrace technology</b> such as remote health monitoring, services via telehealth, the use of robotic devices to perform simple household tasks and provide companionship, and the use of virtual reality tools to provide entertainment and stimulation. Begin by assessing where Iowa is in using or testing such technologies, and where and how they can be expanded.</li> </ol>
<p><b>E. A workforce shortage in health and long-term service and support occupations;</b> particularly in the direct care workforce. (The direct care workforce includes job titles such as certified nursing assistant, home health aide, personal assistant, direct support professional, and numerous others.)</p>	<ol style="list-style-type: none"> <li><b>1. Create an initiative similar to Iowa's STEM</b> (Science, Technology, Engineering and Math) to focus on the recruitment and retention of the workforce needed in the health and long-term services sector. Specific efforts should be made to promote these careers with K-12 and college students.</li> <li><b>2. Continue to expand <i>Prepare to Care</i></b> learning opportunities for the direct care workforce and specialized training in areas such as dementia, mental health, and oral health care.</li> </ol>
<p><b>F. High cost of and lack of ready access to transportation and other services,</b> particularly in rural Iowa.</p>	<p><b>Promote the expansion of volunteerism</b> and the creation of “caring communities” (where communities expand the services available to support aging residents). These services could include transportation, chore services, senior companions, etc. Service-learning opportunities for K-12 and college students could help provide the volunteers needed.</p>
<p><b>G. Lack of adequate housing</b> that allows Iowans to age in place, and the costs of repairs and renovations.</p>	<ol style="list-style-type: none"> <li><b>1. Review existing incentives such as loan programs and tax credits</b> that help homeowners make repairs and modifications to their homes, and expand and/or modify as needed.</li> <li><b>2. Explore incentives that would expand the use of universal design concepts</b> in new home construction.</li> <li><b>3. Encourage the development of alternative community living models</b> to support aging in place.</li> </ol>