



**AMERICAN
PSYCHOLOGICAL
ASSOCIATION**
SERVICES, INC.

March 21, 2024

Senator Bernie Sanders
Chairman
Senate HELP Committee
428 Dirksen Senate Office Building
Washington, DC 20510

Senator Bill Cassidy
Ranking Member
Senate HELP Committee
428 Senate Dirksen Office Building
Washington, DC 20510

RE: The Older Americans Act reauthorization [request for information](#)

Dear Chairman Sanders and Ranking Member Cassidy:

On behalf of the American Psychological Association Services (APA Services), I want to thank you for this opportunity to respond to your Request for Information (RFI). APA Services is the companion organization of the American Psychological Association, which is the nation's largest scientific and professional nonprofit organization representing the discipline and profession of psychology, as well as over 157,000 members and affiliates who are clinicians, researchers, educators, consultants, and students in psychological science. Through the application of psychological science and practice, our association's mission is to make a positive impact on critical societal issues across the states. APA Services applauds the Committee for its dedication and commitment to encouraging the independence and health of older adults.

The Committee's RFI comes at a very critical moment in our nation's history, which is both emerging from a global pandemic with a disproportionate impact on older adults and transitioning into greater reliance on technology for news, health care, and social connectivity. As Congress shapes the next iteration of the Older Americans Act (OAA), it is necessarily faced with the role that the programs created under the OAA have in securing a robust infrastructure for the behavioral health wellbeing of our seniors, and how these programs must evolve to meet the current environment. Overall, APA Services recommends that the Committee advance the following policies:

- Continue Medicare coverage of telehealth.
- Enhance access and training opportunities so that individuals of all ages can benefit from emerging technologies.
- Address and support funding for addressing social isolation and loneliness.
- Expand the definition of family caregiving.

- Devote more funding and resources toward generating feasible skill learning opportunities across diverse communities of older adults to address cognitive decline.

Telehealth Access

Older adults represent a disproportionate share of the population in rural areas. According to a 2019 US Census Bureau report, 17.5% of rural populations were aged 65+, compared to 13.8% of urban populations. Accordingly, the challenges facing rural communities in terms of accessing behavioral health services—such as long travel distances to behavioral health facilities—tend to have a more pronounced impact on older patients with behavioral health needs in these communities, who may also face additional barriers to accessing these services, such as transportation difficulties or stigmatizing beliefs about seeking behavioral health treatment.

Our psychologists report that when funding is limited, transportation assistance is cut. In some states the reduction and cancellation of transportation assistance has made it difficult for older adults in rural areas to travel to the city to meet their healthcare needs. Transportation is also important for caregivers. Many behavioral health therapists do not see home-based clients in person anymore because they do not receive time and mileage reimbursed adequately. It is also difficult to staff nursing homes and hospitals in rural areas because of transportation. As of March, 2023, 160 million Americans live in areas with behavioral health professional shortages. In 2018, one study found that counties outside of metropolitan areas had half the supply of psychologists as the more urban areas.¹ While approximately 34.5 percent of U.S. counties reported having no psychologists.²

Telehealth has served as a critical means of bridging these gaps, and preservation of pandemic-era telehealth policies —such as waiving Medicare’s site-of-service requirements, expanding Medicare coverage of telehealth to a greater array of services, and allowing Medicare coverage of new telehealth modalities such as audio-only treatment—must be preserved to continue this forward momentum in expanding access to critical behavioral health services. Additionally, Congress must work to eliminate arbitrary and unnecessary barriers to telehealth services, such as Medicare’s periodic in-person requirement set to go into effect after the end of the year. Together, these policies are essential to ensuring that older adults can continue to receive life-saving behavioral health treatment from the comfort and familiarity of their own homes.

The Digital Divide

Recent [data](#) shows that adoption and use of new technologies, as well as attitudes toward usage of new technologies, continues to improve among many older adults—especially those that are more highly educated or more affluent. An array of emerging evidence-based digital tools is

¹ Counts, N. (2023). Understanding the U.S. Behavioral Health Workforce Shortage. Explainer.

² Lin, L. Stamm, K., Christidis, P. (2016). County-Level Analysis of U.S. Licensed Psychologists and Health Indicators. American Psychological Association Center for Workforce Studies.

emerging to augment the provision of behavioral health services in a variety of ways. Providers are tasked with assessing the patient to determine whether any of these tools are appropriate for the patient and, like any person asked to use some new form of technology, some degree of patient education and orientation, as well as regular oversight, is required to ensure that the device is functioning properly and being used correctly. Accordingly, coverage of these digital tools must adequately compensate for the time spent by providers in furnishing this assessment, instruction and monitoring.

Despite these promising trends, one of the biggest challenges for many older adults continues to be the use of technology, and there is still much work to be done to reduce the age-related digital divide. Although we've made substantial strides over the past few years, older adults tend to own and use digital technologies at a significantly lower rate compared to younger adults. In a world dominated by digital technology, many tasks are now either extremely difficult or impossible to accomplish without access to and proficiency with technology, putting many older people at a serious disadvantage. Racial and ethnic older adults are even more disadvantaged in terms of technology adoption.³ Priorities should include enhancing access and training opportunities so that individuals of all ages can benefit from existing and emerging technologies, as well as programs to encourage technology designers to consider the needs, abilities, and preferences of diverse groups of older people.⁴ Through creative means, technology can support the health, wellbeing, quality of life and social connectivity of older adults.⁵

Importance of Addressing Social Isolation and Loneliness

One of the top priorities for the OAA reauthorization should be an emphasis on preventing social isolation and loneliness. In the last reauthorization of the OAA in 2020, Congress expanded the role of the aging network in addressing social isolation and loneliness through screening, prevention and research. Psychological science offers valuable insights and strategies to combat social isolation and loneliness, which can significantly impact our well-being. Research shows that social isolation and loneliness increase the risk of premature mortality. We support continued support for these programs.⁶

Data shows that social isolation can lead to 29 percent higher risk of mortality.⁷ Further studies have shown that social isolation is strongly related to poor health, especially arthritis and depression. It has also been associated with lung disease, heart disease, depressive symptoms and self-neglect.⁸ For older adults, social isolation raises the risk of dementia by 50 percent and

³ Suntai, Z., & Beltran, S. J. (2023). The intersectional impact of race/ethnicity and sex on access to technology among older adults. *The Gerontologist*, 63(7), 1162-1171.

⁴ Boot, W. R., Charness, N., Czaja, S. J., & Rogers, W. A. (2020). *Designing for older adults: Case studies, methods, and tools*. CRC Press.

⁵ Charness, N. (2020). A framework for choosing technology interventions to promote successful longevity: Prevent, rehabilitate, augment, substitute (PRAS). *Gerontology*, 66(2), 169-175

⁶ Van Orden, K. A., Areán, P. A., & Conwell, Y. (2021). A Pilot Randomized Trial of Engage Psychotherapy to Increase Social Connection and Reduce Suicide Risk in Later Life. *American Journal of Geriatric Psychiatry*, 29(8), 789–800. <https://doi.org/10.1016/j.jagp.2021.03.009>

⁷ Barone E., Wolfson, E. TIME, SourcePRO, 2020.

⁸ Holt-Lunstead, J. et al., Loneliness and Isolation as Risk Factors for Mortality: A Meta-Analytic Review. 2016.

stroke by 32 percent. The risk of behavioral health disorders increases by 26 percent for older adults.⁹

We strongly support increases in the authorized funding levels for programs to expand multigenerational support services included in community programs and for programs that expand access to evidence-based disease prevention and health promotion services.

Given the scientifically proven negative behavioral health and physical health effects of social isolation and loneliness on older adults, it is essential to underscore the need to include social isolation in the reauthorization of the OAA.

Family Caregiving

We recommend that partners, friends, or neighbors caring for an older adult all be included in the definition of family caregiving. We also support any extensions of the immediate family when discussing family caregiving. With the challenges of caregiving, it is better to expand the help to outside the immediate family than to limit what is considered family caregiving.¹⁰ Since the reauthorization is seeking to improve the Older Americans Act, it is logical to include a broader definition of the family. Therefore, we strongly support expanding this definition.

There are also instances where caregivers do not define themselves as caregivers or they do not define their actions as caregiving. General outreach would be important to these individuals to be sure they can receive any benefits or aid offered. Raising awareness of the impacts of behavioral health and trauma experienced by caregivers is also important.¹¹ In addition, consideration should be given to the fact that the transition into a caregiver role can be a traumatic experience that is not always acknowledged.¹²

Skill Learning Programs

Engagement in learning new skills can provide cognitive stimulation for older adults, which could help increase cognitive abilities and prevent future or further cognitive declines.^{13 14} Formal skill learning opportunities for older adults are scarce and not encouraged enough.

⁹ Rubin, E., Elderly Loneliness Statistics. 2023. <https://www.consumeraffairs.com/health/elderly-loneliness-statistics.html>

¹⁰ Shulz R, Beach S., Czaja S, Martire, L, & Monin, J, Family Caregiving for Older Adults. Annual Review of Psychology, 71 (1), 635-659. 2020. <https://doi.org/10.1146/annurev-psych-010419-050754>

¹¹ Shulz, R., et al.

¹² Patterson, S., Freedman, V., Cornman, J., Wolff, J., Work as overload or enhancement for family caregivers of older adults: Assessment of experienced well-being over the day. Journal of Marriage and Family, 85(3), 760-781. 2023. <https://doi.org/10.1111/jomf.12909>

¹³ Bugos, J. A., & Wang, Y. (2022). Piano Training Enhances Executive Functions and Psychosocial Outcomes in Aging: Results of a Randomized Controlled Trial. *The Journals of Gerontology: Series B*, 77(9), 1625–1636. <https://doi.org/10.1093/geronb/gbac021>.

¹⁴ Leanos, S., Kürüm, E., Strickland-Hughes, C. M., Ditta, A. S., Nguyen, G., Felix, M., Yum, H., Rebok, G. W., & Wu, R. (2023). The impact of learning multiple real-world skills on cognitive abilities and functional independence in healthy older adults. *The Journals of Gerontology: Series B*, 75(6), 1155–1169. <https://doi.org/10.1093/geronb/gbad053>

Therefore, there is an urgent need for more programs on learning new skills to be developed and implemented aimed for older adult learners at different skill levels.

Novel programs that provide learning opportunities for older adults should be created or tailored keeping in mind the barriers that some individuals might have to participating. Individuals who are low income and underprivileged racial and ethnic minority older adults may have difficulties.¹⁵ For instance, older adults who have lower financial resources might struggle to pay for the classes or materials needed for learning a new desired skill. As such, classes and materials need to be offered at low to no cost to increase feasible participation. Online-only programs may be limited to only those who are more technologically savvy. Learning programs should also take into account potential time, physical/health, language, and transportation barriers by accommodating and providing resources to older adult learners as needed.¹⁶

Policymakers, community leaders, and researchers can work together to help disseminate the benefits of learning new skills, reduce barriers to learning, and increase learning opportunities for older adults of all backgrounds. Therefore, we are proposing that more attention, funding, and resources be allocated toward generating feasible skill learning opportunities across diverse communities of older adults. Upon creating such opportunities, the importance of learning in older adulthood alongside the programs available to engage in learning need to be well advertised and reach older adults all around the country.

Thank you for the opportunity to comment on this important issue. Should you have any questions, please feel free to contact Serena Dávila at sdavila@apa.org.

Sincerely,



Katherine B. McGuire
Chief Advocacy Officer
American Psychological Association

¹⁵ Rodriguez, T. M., Sheffler, P., Ferguson, L. E., Rebok, G. W., & Wu, R. (2022). Cognitive and functional improvement via novel skill learning for low-income minoritized middle-aged and older adults. *Prevention Science*, 24, 926-935. <https://doi.org/10.1007/s11121-022-01413-0>

¹⁶ Rodriguez, T. M., & Wu, R. (2024). Identifying learning barriers, engagement, and interests among low-income Latino older adults. Manuscript under review at *Journal of Aging and Health*.