

Social Workers Provide Input at White House Conference on Aging



L-R: NASW-MA Chapter members Lisa Krinsky, Kathy Kuhn, and Elise Beaulieu.

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July 13 marked the sixth White House Conference on Aging (WHCoA.) This event has taken place each decade since the 1960s to identify and advance actions that improve the quality of life of older Americans. National NASW submitted written comments before the conference (www.socialworkers.org/practice/aging/whcoa2015comments.asp), which CEO **Angelo McClain** attended.

Between February and May, the White House hosted a series of five invitational regional forums to gather input for the July 13 conference. Each forum included speakers and breakout sessions focused on the four 2015 WHCoA themes: elder justice, healthy aging, long-term services and supports, and retirement security. The NASW national office, working in collaboration with NASW chapters, successfully nominated social workers to participate in every forum. NASW-MA Chapter members **Frank Baskin**, **Elise Beaulieu**, **Lisa Krinsky**, and **Kathy Kuhn**, joined by NASW-NH Chapter Executive Director **Steve Gorin**, participated in the regional forum in Boston on May 28. These social workers' reflections on the Boston forum follow.

Long-Term Services and Supports (LTSS)

The Boston forum included a breakout group that addressed long-term services and supports. This group of dynamic professionals worked together to identify the areas of highest priority in future planning for aging Americans. This group addressed several topics:

- Workforce development. By 2030, more

than 2 million workers will be needed in long-term care. A well-trained, competent workforce is essential to support the vast needs of older adults and family caregivers. Public education and training in healthy aging, health care (including mental and behavioral health), and chronic illnesses is key to attracting and retaining LTSS workers and provider organizations. So, too, will addressing both ageism and disability-related stigma that surround working with older adults.

- Cultural competence. The group highlighted this issue as integral to person-centered care delivery. Participants also noted that LTSS recipients who are from historically dominant cultures would benefit from learning more about the various cultures with which LTSS providers identify.
- Culture change within LTSS. A radical challenge to the medicalization of aging was suggested—that is, shifting from a system that pays for and supports care for illness and “dependent” care to one that also supports and pays for positive and resilient aging interventions.
- Home- and community-based care. The group emphasized the need for community-based care, expressing a desire to increase alternatives to nursing home care. Related points included a multiple-option approach, care coordination, consumer input and participation, accessible and appropriate health care, a variety of housing options, and a biopsychosocial framework.
- Mental and behavioral health. After discussion, members of the group agreed that elder mental and behavioral health is an integral priority for LTSS

provision across settings.

Healthy Aging

The 60 participants in the Healthy Aging breakout session discussed the greatest health issues older adults face, barriers to addressing those issues, and recommendations. The group generated broad recommendations focused on the need to see health holistically, reflecting the World Health Organization's definition of health as “a complete state of physical, mental and social well-being, and not merely the absence of disease or infirmity.” At the same time, participants expressed concern that society focuses predominantly on physical health, often overlooking issues such as depression, substance use, and suicide among older adults. Barriers to holistic health included the stigma related to aging and mental health. An example cited was the Substance Abuse and Mental Health Services Administration's (SAMHSA's) lack of current funding for grant programs dedicated specifically to older adult mental health and substance use. Participants also expressed concern that responsibility for older adult mental health and substance use programs is spread across numerous federal and state agencies, without clear designation of accountability.

Retirement Security

Senator **Elizabeth Warren's** comments on retirement security framed an afternoon breakout session on the topic. The 35-person breakout group was in accord on the need to strengthen and expand retirement security, especially Social Security. Earlier in the day, Senator Warren also discussed not only a proposed regulation by the U.S.

Department of Labor to address investment advisers' conflicts of interest, but also how threats to Medicare, Medicaid, and the Affordable Care Act could reduce retirement security

Conclusion

NASW members and staff worked on multiple levels to influence the 2015 WHCoA. The social workers who participated in the Boston regional forum particularly influenced the proceedings by advocating strongly for workforce training, culturally sensitive service provision, and older adult mental and behavioral health.

Visit <http://whitehouseconferenceonaging.gov/blog/post/boston-regional-forum-summary.aspx> to access a summary and video archive of the Boston forum; www.whitehouse.gov/the-press-office/2015/07/13/fact-sheet-white-house-conference-aging for a fact sheet of announcements made at the July 13 conference; and www.whitehouseconferenceonaging.gov/happening/video.html to access videos of the July 13 conference.

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L-R: James Roosevelt Jr., Kath Allen, Patrick Carroll, Charlie MacEachern and Steve Gorin participated in the retirement security breakout session.