



## National Association of Nutrition and Aging Services Programs

1612 K Street, NW Suite 400 Washington, DC 20006

(202) 682-6899 (202) 223-2099 fax

www.nanasp.org

### **NANASP President-Elect Paul Downey's Testimony** **AOA Listening Session – March 3, 2010**

Assistant Secretary Greenlee, members of the AOA staff. . . Good morning, my name is Paul Downey. I am the President-Elect of the National Association of Nutrition and Aging Services Programs – NANASP – and am President/CEO of Senior Community Centers in San Diego.

On behalf of NANASP, I appreciate the opportunity to participate in this forum and want to commend Assistant Secretary Greenlee for her already demonstrated commitment to collaborating with the Aging Network on important initiatives such as the reauthorization of the Older Americans Act.

On behalf of Senior Community Centers, I want to publically thank the President and the Assistant Secretary for the ARRA funding that helped us maintain vital services and save the jobs of staff members who faced layoff because of funding shortfalls. How vital are our services? More than 75% of our seniors live at or below the Federal Poverty Level and the rest below California's Elder Index created by the Insight Center and UCLA Center for Health Policy Research. As an aside, I would encourage efforts to revamp the FPL – it is a woefully inadequate measure of whether a senior's basic needs are being met.

I see the faces of seniors living in poverty every single day. Our Older Americans Act meals – 1,700 daily, six and soon seven days per week – are literally, in far too many cases, the only food these seniors have to eat. In addition, we provide social work, healthcare and mental healthcare along with our 350 units of affordable housing with support services and 37 units of transitional housing for homeless seniors. Without this safety net – especially affordable housing and food -- even more seniors would fall through the cracks into homelessness or worse.

This safety net for seniors on the cusp of failure is why this reauthorization is the most important in the act's history. A reauthorization is about more than extending an expiring law. It is seizing an opportunity to shape its direction and increase its impact for next five years and beyond – we all know that one in four Americans will be eligible for its programs and services by 2030. The process also involves assessing what is working — and why — and do nothing to impede that.

Nutrition is my focus today. It is the largest program in the Act representing almost 40% of total funding and the most visible. Nutrition's purpose is as sound today as when the OAA began:

- To reduce hunger and food insecurity
- promote socialization among older people

- provide meals to homebound
- delay the onset of adverse health conditions that relate to poor nutritional health
- provide income support for many poor and near poor by providing food they might otherwise purchase

It is about solidifying and building the link we all know exists between nutrition and health. As we have said in NANASP for years, it is more than just a meal.

Let's look closer at this linkage based on AOA numbers:

- 73% of those served were at high nutritional risk
- 62% received half or more of daily food intake from home delivered meal
- 73% of congregate and 85% HDM say they eat healthier due to program.

As someone on the front lines let me tell you how important food is to both physical and mental health and hunger prevention. Food is truly medicine for the body and the soul. The seniors I work with daily are healthier, more vibrant and able to enjoy life because of the breakfast and lunch they receive at Senior Community Centers. For our congregate seniors, the meals also provide an opportunity for our social work and healthcare staff to interact proactively to take care of other problems before they evolve into crises. The socialization with other seniors and staff is vital to overall mental health.

For home delivered clients, the all important contact with our drivers is important from a socialization perspective as well. It is also an early warning system. All of our drivers are trained to look for significant changes in appearance or behavior in HDM clients. They report to a social worker who follows up – again our goal is to proactively avoid crises whenever possible.

As we look for possible changes to the Act in 2011, we at NANASP have some principles to be considered:

- Of course funding is central to the future. Absent the ARRA increase, funding for the nutrition programs have increased by only 20% in past decade. Inflation especially food, energy and fuel prices have gone up considerably more.
- We believe the base funding level for Older Americans Act programs should be the level it reached with the ARRA funds.
- We also believe that some recognition needs to be made for those programs which serve a disproportionate number of low income seniors. It seems unfair for a program in a wealthy area to be reimbursed the same as one in a very poor one.
- We need to improve our data collection in the nutrition program. It is counterproductive for us to have only anecdotal information on the unmet need for nutrition services -- especially waiting lists. That impedes advocacy efforts.

***NANASP's vision is to reshape the future of nutrition and healthy aging.  
NANASP's mission is to strengthen advocacy and education those who help older Americans.***

- We need to examine the current funding pattern. According to FY 2006 data about 59 percent of meals were home delivered and 41 percent congregate. Yet funding decisions made by Congress still strongly favor congregate over home delivered. We think there should be more parity in the baseline funding for both programs.
- One idea is to consolidate the current Title IIIC. NANASP supports this but believes legislative language must be written carefully to ensure local nutrition providers have sufficient input into decisions made at the State and Area Agency levels on how much funding goes to congregate and home delivered meals.
- Another solution on funding relates to the current transfer authority in the law. Using FY 2008 data, a total of almost \$78 million was transferred from congregate into IIIB and home delivered meals – about half to each. That brought funding for congregate from \$406 to \$328 million.
- NANASP believes it is time to reexamine the transfer authority. It could be eliminated entirely, or could be modified to require that any transfer of funds from a nutrition program only go to a program that benefits nutrition programs, such as transportation.
- Let us not forget that NANASP was very supportive of President Obama's budget which provided nearly \$50 million for IIIB. If that can continue, it will clearly reduce the need to support B through transfers from nutrition.
- We need to more closely look at the existing Title IIID disease prevention and health promotion program and consider folding it into the nutrition programs since a lot of what is done in this area relates to nutrition and nutrition education. One approach could be a new section within Title III with new funding for model nutrition programs that actively support health promotion, wellness, prevention, physical activity and disease prevention.
- We need to better recognize the essential role of transportation in the provision of nutrition services and have this reflected in the 2011 reauthorization. This can include a separate title or possible set aside of funds.
- We should look for and provide support for best practices in nutrition programs that have succeeded in recruiting and retaining first wave boomer participation in addition to existing clientele.
- If a process goes forward where there is any effort to advance proposals to have Medicare trust funds used to enhance aging network activities, we would expect that nutrition services would be prominently included.
- And finally, Assistant Secretary Greenlee, knowing of your strong interest in elder rights and elder justice, I just want to lend NANASP's support to comments made by our Executive Director Bob Blancato on elder rights in Alexandria.

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- We believe nutrition programs can play a stronger role in preventing elder abuse. We therefore support the further integration of Title VII services into the nutrition programs. We can do a better job of helping to educate our seniors on how to avoid elder abuse and we can stand to train our staffs especially those doing home delivered meals on how to better detect and report elder abuse.

NANASP stands ready to work with Administration and Congress to make this the best reauthorization ever. Thank you again for the opportunity to speak today.

*Please direct further questions to:*

*NANASP Executive Director, Robert Blancato ([rblancato@matzblancato.com](mailto:rblancato@matzblancato.com))*

*President-Elect Paul Downey ([paul.downey@servingseniors.org](mailto:paul.downey@servingseniors.org).)*

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