

## White House Conference on Aging

### Presentation: Mary Jo Riley, Connecticut Association of Senior Center Personnel

- Senior Centers provide a valuable resource for seniors in our communities. No longer are centers meals sites that also offer bingo and card games. Centers have developed into community centers for those over age 55 that provide health and fitness programming, education and enrichment programs, arts programs and social and benefit services. We are often the front line people who help seniors in distress in our communities. They know the staff so they are willing to ask for help whether it be financial questions, medical concerns or even family matters. Senior Center Staff come from varied backgrounds to direct senior centers or to develop programs at centers. Certification for Directors and Programming staff is a need for Senior Centers. Certifying staff will bring a level of professionalism to our centers. It will also provide recognition for the knowledge and skills we have.
- Research and development of Evidence Based Programs has increased over the past decade. They provide research based program that has proven to improve fitness levels, reduce falls, improve skills in managing chronic illness. Title III money is tied into centers providing evidence based programs. Yet for many centers, the cost of providing evidence based program is out of reach. The developers of Evidence Based Programs like the Live Well Chronic Disease Management program have an excellent product but it is based on training volunteers which are difficult to find so results in center's utilizing staff for this very time intensive program. Costs for training for programs such as this, or fall prevention programs can be astronomical when you have a limited programming budget. The cost of providing the best programs for seniors will keep centers from offering these opportunities. Grant funds are shrinking so cannot always be used to fund training and program implementation. In addition, for some centers, we are required to have a cost recovery for programs that then make it impossible for seniors to afford the program.
- Preventive health programs such as fitness programs and fitness centers within senior centers has also risen over the past twenty years. We know that exercise reduces the risk of heart disease, Type II Diabetes and Pulmonary Disease. More senior focused programs are being marketed because of the growing senior population. Baby Boomers have grown up with Jim Fix and the running craze and the Tennis boom of the 70s. We have exercised to Jane Fonda and Richard Simmons. The fitness field has developed into a multimillion dollar business. The positive result over the decades is that we exercise saver and smarter. And we exercise throughout our life span. Silver Sneakers is a prime senior program offered to many seniors in our communities and often in for profit fitness centers. A draw for seniors to Silver Sneakers is that for many seniors they are able to get insurance reimbursement for attending a Silver Sneakers program. Senior Centers who are often municipally owned or not for profit also offer fitness programs that are not able to provide the insurance reimbursement. Yet, Senior

Centers hire certified fitness instructors that are trained to offer fitness programs similar to the Silver Sneakers program. Being able to offer a draw like insurance reimbursement to participants would aid senior centers in increasing participation and also encourage seniors to join these preventive health programs. The Area Agencies on Aging could work with senior centers in their regions to have lists of certified instructors that could be used for fitness centers as many instructors teach at more than one site. This could also be part of centers becoming a focal point of senior services if they offer programs with certified fitness instructors.

- Lastly, the Meals On Wheels program and Congregate Meals program was developed over forty years ago. We have seen over the past 10 to 15 years a decline in the use of both these programs across the country. This program needs to be reviewed and overhauled. We need to address again, the change in the senior population. What do they expect from a meal that is their main meal of the day? What are their eating habits versus how seniors in the 1960's ate? If this is their main meal, is 1/3 of the daily requirements what they should be given or should it be 1/2? One of the common reasons why seniors, at least in Groton do not want to sign up is the Form 5. They feel that it is very intrusive and they don't want to provide information including their income, social security, and health information. We provide our seniors with information on identity theft, and they hear about people who have had their information stolen, that if information is online it is at risk. We need to come up with a better solution to a form that actually drives people away from using MOW. In addition, persons who attend congregate meal sites also do not want to complete this form in order to get a meal. They can go to the store, local food pantry and soup kitchen without having to provide private information. We need to develop a system where seniors feel comfortable in providing information that is needed but not personal enough to be used by identity thefts or to have seniors feel at risk.