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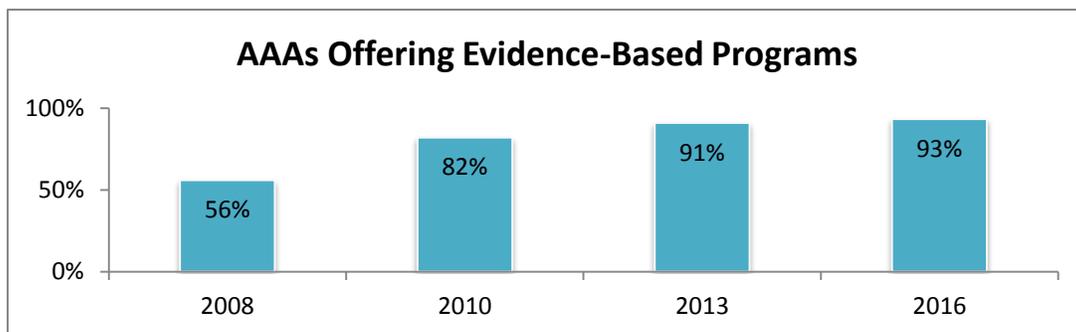
Information and Planning Issue Brief Evidence-Based Programming

Introduction

An evidence-based program is one that has been proven to be effective in achieving its intended outcome. The Administration for Community Living (ACL) has been promoting evidence-based programs in the Aging Network for over a decade. As a focal point for the delivery of a wide range of services and supports, Area Agencies on Aging (AAAs) deliver evidence-based health programs as part of the value they offer to individuals and communities. Federal fiscal year 2012 marked the first time that Congressional appropriators included an evidence-based requirement in an annual funding measure. This was taken a significant step further on October 1, 2016 when the Aging Network was required to use Older Americans Act Title III D funds (Disease Prevention and Health Promotion Services) only for programs determined to be evidence-based. This issue brief explores evidence-based programming in the Aging Network and how AAAs are engaging in this work. Data for this report was gathered through the 2014 AAA National Survey.¹ Data from the 2016 AAA National Survey, to be published in summer 2017, was included when possible.

More AAAs Are Offering Evidence-Based Programs

There has been rapid growth in the number of AAAs offering evidence-based programming. In 2008, over half of AAAs offered these types of programs. By 2016 that number jumped to 93 percent of AAAs. Included in these numbers are AAAs that offer evidence-based programs directly or by contracting the service to a partner organization. Since survey data was completed prior to October 1, 2016, 2016 data was collected prior to the requirement that Title III D funds be only used in the provision of evidence-based programs.

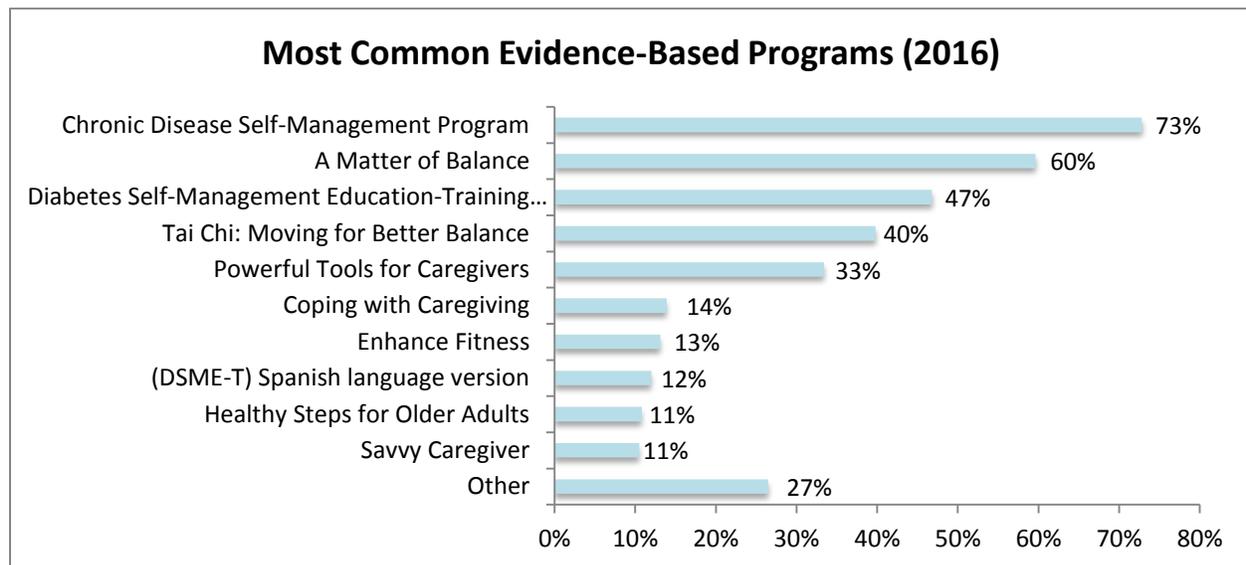


¹ <http://www.n4a.org/files/AAA%202014%20Survey.pdf>

Additionally, the average number of evidence-based programs that each AAA offers continues to grow. In 2013 the average number of evidence-based practices offered by AAAs was two, and by 2016 this number had increased to an average of four. This data does not include those AAAs that did not offer evidence-based programs at the time of data collection (approximately 7 percent in 2016).

Most Common Evidence-Based Programs are CDSMP and A Matter of Balance

The Chronic Disease Self-Management Program (CDSMP) and A Matter of Balance are the most commonly offered evidence-based programs. In 2013, 77 percent of AAAs offered CDSMP. While there was a slight dip with 73 percent of AAAs offering CDSMP in 2016 it is still the most common evidence-based program offered by AAAs. The second most commonly offered program is A Matter of Balance, which was provided by 60 percent of AAA respondents in 2016 and by 45 percent in 2013.



The Administration for Community Living (ACL) has provided funding to the Aging Network in the areas of chronic disease self-management and fall prevention. The CDSMP program, developed by Stanford University, serves people with a variety of chronic conditions such as diabetes, heart disease and lung disease and has been shown to be effective in improving areas such as physical health, cognitive symptom management, self-reported health and communication with health care personnel. ACL funded CDSMP in 2012 through its “Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs” initiative which was financed through the Affordable Care Act’s Prevention and Prevention and Public Health Fund (PPHF). ACL released further funding through the PPHF fund to award additional CDSMP grants in 2015.

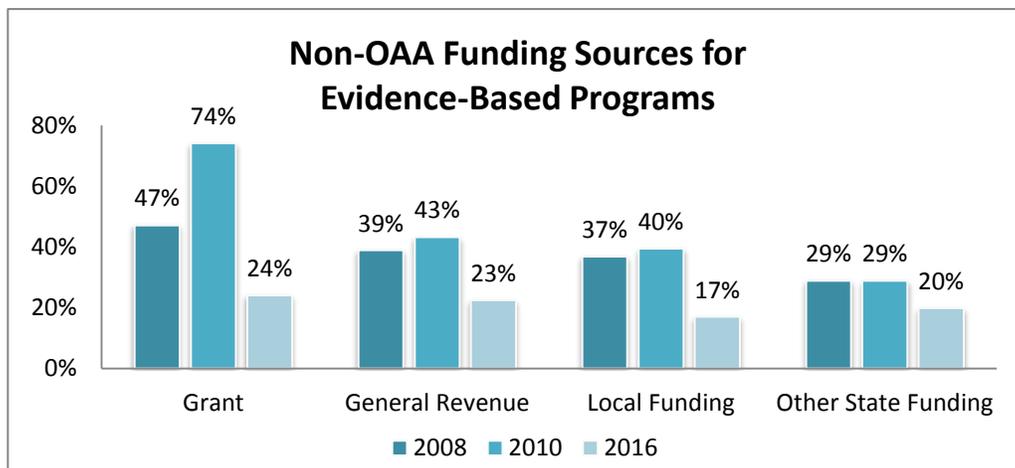
A Matter of Balance is a nationally recognized program with the goal of reducing the fear and incidence of falls among older adults. A workshop-based program, it is offered by AAAs across the country across eight two-hour sessions and has been shown to improve participants’ comfort in addressing their fears about falling, helping participants make changes to their environment,

increasing their level of activity and encouraging them to continue exercising. ACL has funded a Falls Prevention Initiative since 2014 which has provided over \$8 million in grants financed by the PPHF. A Matter of Balance is one several programs that have been proven to reduce falls or fall risk among older adults that have been implemented through this funding stream.

Beyond CDSMP and a Matter of Balance, Diabetes Self-Management Education Training (DSMT), Tai Chi: Moving for Better Balance and Powerful Tools for Caregivers were other programs that were most commonly reported by AAAs in 2016.

AAAs Have Varied Funding Sources for Evidence-Based Programs

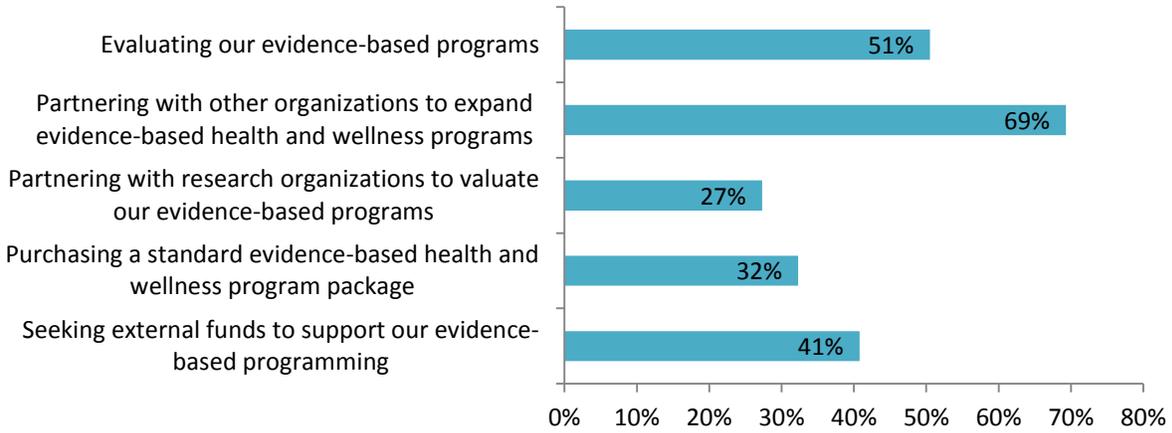
In addition to Older Americans Act Title III D funding for evidence-based disease prevention and health promotion programs, the following figure shows other common funding sources that AAAs utilize to support evidence-based programs. The chart below presents the average number of AAAs that receive these sources of funding and does not reflect the budget proportions for these funding sources.



AAAs Take Steps for Further Action

In the 2010 AAA National Survey, respondents were asked about their business practices related to evidence-based programming. As shown below, a significant portion of AAAs reported utilizing their involvement in evidence-based programs to expand their business practices.

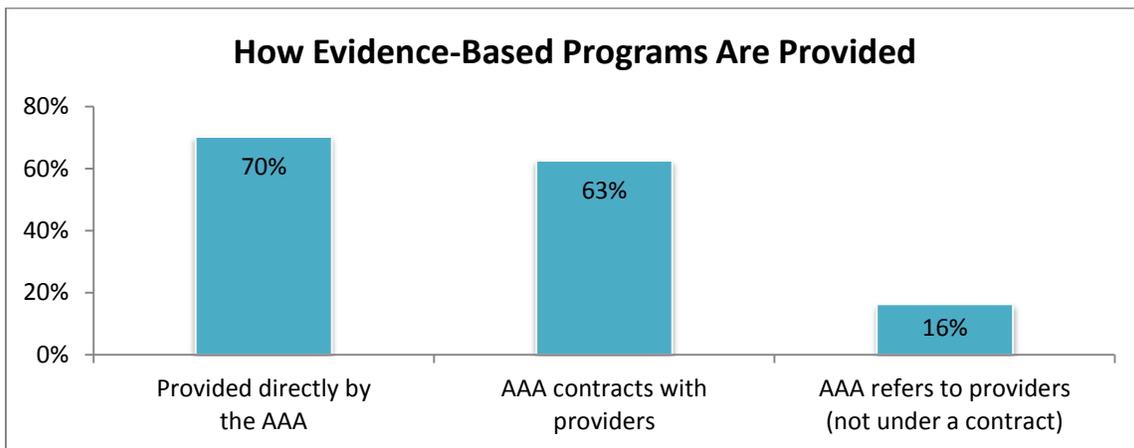
Business Practices Are Evolving to Support Evidence-Based Programming (2010)



Evidence-Based Programs Are Provided Through AAAs and Sub-Contractors

AAAs provide evidence-based programs directly, as well as contract with providers to provide these programs. Some AAAs (16 percent) also make referrals to providers of evidence-based programs. The figures in the chart below add to more than 100 percent since respondents were able to select more than one response option. In some cases, AAAs provided the evidence-based program directly and also contracted with a provider or made an external referral.

How Evidence-Based Programs Are Provided



Summary

With the Administration for Community Living promoting evidence-based programs in the Aging Network for over a decade, AAAs are now well-prepared to meet the requirement that Older Americans Act Title III D funds (Disease Prevention and Health Promotion Services) be used only for programs that are considered evidence-based. More than ever before, AAAs are offering multiple evidence-based programs, whether through their own agency, or by contracting with providers in their community. Programs related to chronic disease self-management as well as falls prevention have been the most commonly offered AAA programs due to targeted federal funding availability. Nationally, AAAs are offering a vast array of evidence-based programs in their communities. AAAs are increasingly seeking funding sources outside of the Older Americans Act to support these efforts, as well.

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