About n4a

The National Association of Area Agencies on Aging (n4a) is a 501(c)(3) membership association representing America’s national network of 623 Area Agencies on Aging (AAAs) and providing a voice in the nation’s capital for the 256 Title VI Native American aging programs.

n4a is dedicated to supporting the success of our members by:

• Advocating on behalf of the Aging Network,
• Raising the visibility of AAAs and Title VI programs nationwide,
• Offering training and educational events to build the capacity of our members, and
• Working to drive excellence in the fields of I&R/A, transportation, livable communities and volunteerism
Survey Process

- Grant from ACL
- Partnership between n4a and Scripps Gerontology Center
- In the field from February 2014 to June 2014
- Launched online and completed almost exclusively through telephone interviews with Title VI administrators (via Shelly Zylstra)
- 88.7% response rate
Survey Topics

• Connections to the larger tribal infrastructure;
• Key features and services of the Title VI programs;
• Innovative care delivery;
• Elder abuse prevention and intervention;
• Expanding services and sustainability; and
• Training and technical assistance needs.
Grantees for the Title VI Program

- **74.9%**: Individual Tribe
- **20.3%**: Tribal Consortium
- **4.8%**: Inter-tribal Council
Who Do Elders Call When They Need Services?

- Title VI program: 54.0%
- Tribal health: 17.7%
- Tribal social services: 10.6%
- Other tribal department: 8.1%
- IHS: 6.1%
- Title III organization: 2.5%
- Tribal Administration: 1.0%
## Areas Served by Title VI Program

<table>
<thead>
<tr>
<th>Area</th>
<th>Percentage of Title VI programs</th>
<th>Number of sites (average)</th>
<th>Miles to most distant site (average)</th>
<th>Miles to most distant elder (average)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predominantly remote/frontier</td>
<td>3.3%</td>
<td>13</td>
<td>44</td>
<td>44</td>
</tr>
<tr>
<td>Predominantly rural</td>
<td>13.8%</td>
<td>4</td>
<td>254</td>
<td>166</td>
</tr>
<tr>
<td>Mix of suburban and rural</td>
<td>11.4%</td>
<td>2</td>
<td>51</td>
<td>48</td>
</tr>
<tr>
<td>Mix of urban, suburban, and rural</td>
<td>9.0%</td>
<td>3</td>
<td>85</td>
<td>92</td>
</tr>
<tr>
<td>Mix of urban and suburban</td>
<td>59.0%</td>
<td>2</td>
<td>142</td>
<td>64</td>
</tr>
<tr>
<td>Predominantly urban*</td>
<td>2.4%</td>
<td>1</td>
<td>N/A</td>
<td>9</td>
</tr>
<tr>
<td>Predominantly suburban*</td>
<td>1.0%</td>
<td>1</td>
<td>N/A</td>
<td>26</td>
</tr>
</tbody>
</table>

*Programs have only one service site
Most Common Funding Sources (in addition to Title VI) Used to Provide Title VI Services

- Nutrition Services Incentive Program (NSIP): 64.4%
- Tribal council funding: 48.0%
- Indian Health Service: 22.8%
- Older Americans Act – Title III: 22.8%
- Fundraising: 18.3%
- Revenue from gaming: 16.8%
- Grant funds: 15.3%
- Consumer donations for services: 11.4%
- Tribal Transit transportation funding: 10.9%
Services Offered to Elders in the Community (2011 & 2013)

- Congregate meals: 96.2% (2013) vs 96.1% (2011)
- Home delivered meals: 94.8% (2013) vs 97.1% (2011)
- Information and referral/assistance: 93.9% (2013) vs 93.7% (2011)
- Social activities: 91.8% (2013) vs 93.0% (2011)
- Health and wellness: 90.1% (2013) vs 83.6% (2011)
- Assistive devices: 88.4% (2013) vs 90.1% (2011)
- Transportation (medical): 91.8% (2013) vs 87.3% (2011)
- Senior center: 88.9% (2013) vs 87.3% (2011)
- Medication management: 87.4% (2013) vs 86.4% (2011)
- Assessment for long-term services and supports eligibility: 87.4% (2013) vs 84.1% (2011)
Health Promotion Services and Programs Available in Title VI Communities

- General health promotion activities: 97.5%
- Routine health screenings: 96.5%
- Diabetes management and prevention programs: 94.5%
- Caregiver support program: 91.0%
- Medication management: 90.0%
- Mental health screening or programming: 89.5%
- Home injury prevention: 88.5%
- Disease-specific support program: 82.0%
- Evidence-based programs: 58.0%
Evidence-based Health Promotion Services and Programs Offered by Title VI Programs*

- Healthy Eating for Successful Living: 42.5%
- Heart Healthy: 41.5%
- Diabetes Self-Management Education Training (DSME-T): 38.7%
- Chronic Disease Self-Management Program: 37.9%
- EnhanceFitness: 37.7%
- Powerful Tools for Caregivers: 34.9%
- Healthy Moves for Aging Well: 34.9%
- Healthy Changes: 33.0%
- EnhanceWellness: 31.1%
- Active Living Every Day: 19.8%

(*of those Title VI Programs that offer evidence-based health promotion services and programs)
Funding Changes Over Previous Two Years

- Decreased: 58.8%
- Remained flat: 29.9%
- Increased: 11.3%
## Specific Changes in Response to Financial Constraints

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>Proportion of Title VI Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Proactive and Strategic Reorganization Measures</strong></td>
<td></td>
</tr>
<tr>
<td>Reorganized the program</td>
<td>34.9%</td>
</tr>
<tr>
<td>Explored new funding opportunities</td>
<td>30.2%</td>
</tr>
<tr>
<td>Explored new partnerships</td>
<td>16.1%</td>
</tr>
<tr>
<td>Increased program evaluations to determine time/money better spent</td>
<td>16.1%</td>
</tr>
<tr>
<td><strong>Changes to Operations</strong></td>
<td></td>
</tr>
<tr>
<td>Cut or eliminated business travel</td>
<td>42.3%</td>
</tr>
<tr>
<td>Cut or eliminated staff training</td>
<td>32.9%</td>
</tr>
<tr>
<td>Reduced total number of staff by not replacing those who left</td>
<td>26.8%</td>
</tr>
<tr>
<td>Increased caseloads</td>
<td>18.8%</td>
</tr>
<tr>
<td>Cut the budgets of at least some departments</td>
<td>14.8%</td>
</tr>
<tr>
<td><strong>Changes Directly Affecting Staff and Clients</strong></td>
<td></td>
</tr>
<tr>
<td>Reduced total staff hours by converting some positions from full-time to part-time</td>
<td>30.9%</td>
</tr>
<tr>
<td>Froze staff salaries</td>
<td>28.9%</td>
</tr>
<tr>
<td>Eliminated or reduced staff salary increases</td>
<td>24.2%</td>
</tr>
<tr>
<td>Instituted waiting lists</td>
<td>13.4%</td>
</tr>
<tr>
<td>Restricted the number of clients served</td>
<td>12.8%</td>
</tr>
</tbody>
</table>

National Association of Area Agencies on Aging
Building Infrastructure to Expand Services and Sustainability

- Improving our information and referral/assistance system: 76.7%
- Improving the way we maintain information about elders: 74.2%
- Providing a seamless intake, assessment, and eligibility determination process for the elder: 68.7%
- Developing collaborations with our local Title III organization: 63.9%
- Positioning our program as a point of entry for long-term care in our area: 37.9%
- Developing technology to improve elder access to services: 29.1%
- Developing a data system to implement electronic medical or health records: 29.0%
Business Practices to Enhance Capacity

- Having culturally competent staff: 86.8%
- Conducting a needs assessment in our area: 78.7%
- Using information about elder outcomes: 74.5%
- Conducting outreach: 73.2%
- Acquiring Tribal Council support for providing...: 67.0%
- Developing a system to provide supportive services to...: 61.9%
- Expanding the types of programs and services we offer: 56.5%
- Having enough staff: 53.0%
- Writing grants for programs and services: 52.9%
- Fiscally sustaining programs and services if no...: 52.5%
- Expanding the target groups we serve: 52.3%
Training and Technical Assistance Needs

- Locating funding sources: 41.8%
- Strategic planning: 38.0%
- Learning more about Medicaid: 36.2%
- Resource development: 33.3%
- Grant writing: 32.9%
- Developing outcome measures: 29.6%
- Understanding the long-term services and supports system: 28.6%
- Partnerships: 28.2%
- Learning more about Medicare: 27.7%
- Volunteer management: 27.7%
Contact

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