

Senior Centers

2011 Older Americans Act Reauthorization

Background

In order to effectively engage and address the needs of the aging population, it is crucial that the expertise of multipurpose senior centers be fully tapped to leverage resources and partnerships to achieve the goals of the Older Americans Act in communities across the nation.

Current Status

The first modern senior center was developed in 1943 to provide recreational and educational opportunities for elderly persons in their communities. The senior center movement grew rapidly in the post-war years and received a major boost from the 1965 passage of the Older Americans Act. Today there are an estimated 11,000 multi-purpose senior centers throughout the nation – in urban, suburban and rural communities, and on Indian reservations – providing a broad, coordinated array of services to over ten million older adults and their families annually.

The OAA defines a multipurpose senior center as “a community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals.” In practice, the array of activities and services currently provided by senior centers include: nutrition services, health and wellness programs, employment assistance, intergenerational initiatives, community service and civic engagement opportunities, public benefits counseling, socialization and educational opportunities, transportation, peer counseling, financial and retirement counseling, arts programs and case management services. Senior centers serve the diverse spectrum of multigenerational older adults, from the vibrant to the frail, and those of all socio-economic and educational backgrounds.

By providing a broad mix of services, senior centers are generating positive outcomes for older people that can be seen qualitatively and measured quantitatively. Older adults who participate in senior centers find tools, information and options that support them in their own self-care, prolonging independence and delaying institutionalization. Participation in senior center programs empowers older adults to lower their risk of disease and disability, maintain high levels of mental and physical functioning, and engage actively in their communities. Older adults who access civic engagement opportunities at senior centers are also serving as part of the solution for community needs: helping children, families (including kinship families) and other seniors as caregivers, tutors, and Aging Services Network volunteers. Anecdotal and intuitive evidence already suggests that cumulative positive outcomes for individuals impact the nation in two major ways: healthy, active seniors make enormous contributions within their communities, and healthy, active seniors reduce the overall federal budget by lessening the demand for Medicare and Medicaid expenditures.

Opportunities in the Older Americans Act Reauthorization

Adequate resources to respond to current needs of older adults as well as mobilize for the dramatic increase in the aging of the population continue to be a struggle for the entire Aging Services Network. Senior centers draw their funding from multiple sources, including federal, state and local government; foundations; businesses; community fundraising; and participant contributions. They are creative, diverse, and entrepreneurial in their approaches to generating revenue, with earned income from sources such as member and program fees, facility rentals, ad sales, and product sales. All told, most centers rely on 3 to 8 different revenue sources. However, just over half of multipurpose senior centers receive any direct Title III OAA funding, even as overall appropriations continue to fall far short of the need. The funding scramble is a crucial fact of life in a senior center, usually claiming large amounts of staff and volunteer time.

There is a growing concern among senior centers and other community-based organizations serving older adults that they are shut out of the OAA-related state and local area processes to assess needs, prioritize services and programming, and identify and develop potential local providers. In effect, they feel powerless to influence decisions regarding how to spend the precious OAA resources that are available, despite their significant experience serving seniors.

New or enhanced systems that encourage greater sharing of information on these processes and ensure that community experts and seniors themselves have a seat at the table can help foster an improved sense of ownership or acceptance of state and local area plans, especially when there are not enough resources to meet all needs. In reauthorization, the first step should be requiring public hearings at the state and local levels, which, accompanied by ample notice, would provide opportunities to review and provide input into pending OAA plans. The Administration on Aging would play an important role monitoring these opportunities for fair and open dialogue.

Language in the current OAA authorizing resources for capacity building of multipurpose senior centers, including improvement of facilities, is not universally applied across the nation. In seeking to appeal to, and serve, the boomers-becoming-seniors, senior centers must make changes that connect them in new ways with their communities, e.g. by upgrading their facilities and equipment and expanding their hours during evenings and weekends. Senior centers need to be strategic in sharing their experience, knowledge and best practices with others, establishing a “systematic diffusion of innovation.” Senior centers also need to attract and train new professional leaders and volunteers who can build community partnerships and thrive within a collaborative and holistic framework.

Reauthorization of the OAA should create dedicated funding for a multipurpose senior center modernization fund to foster innovation, leadership, and capacity-building. There is already acceptance among senior center leaders that centers that would receive such an investment would be held to a certain level of accountability, standards or accreditation. We should help the “innovators” to continue to develop and test new models and provide technical assistance and training so that the majority of senior centers can modernize themselves.

Summary

Senior centers that have paved the way toward modernization, adapting to the demands of current and future older Americans, have developed new models and approaches that promote independence and facilitate healthy aging. They identify local needs and create a synergistic blend of activities and events appropriate to the community served. They collaborate with other community organizations, mobilize resources, and coordinate technical expertise. Through reauthorization of the Older Americans Act, we should ensure that these successful efforts are embraced in state and local plans, and can be replicated in communities across the nation.