



The White House Domestic Policy Council should establish an Office on Aging Policy to provide cross-government leadership for a rapidly aging U.S. population.

Why an Office on Aging Policy?

Policy activity in more than 25 federal agencies affects older people directly, and while many elements of robust aging policy exist within them, there are redundancies and gaps. The aging policy in the United States lacks centralized leadership and vision and needs a strong federal presence that brings together health; long-term care; housing; economics; environment; labor; education; budget; technology; agriculture; international/global issues; homeland security; veterans affairs; and other government policy that affects older people, their family members, and the hardworking people who serve and care for them.

The demographics make the case. In 2018, 52 million people aged 65 and older lived in the U.S. – which was 16% of the population. In 2026, the oldest baby boomers will turn 80. The older population in 2030 is projected to be more than twice as large as in 2000, growing from 35 million to 73 million and representing 21% of the U.S. population. ¹

Economic declines in the over-65 group complicate the increasing numbers of older people, as older individuals have been disproportionately impacted by the pandemic. Despite a relatively large social security increase for the cost of living in 2023, many older adults will continue to face financial hardships even in their retirement. The safety net for aging Americans and their families is frayed and full of gaps.

The demographic trends are evolving in an environment that includes significant issues like climate change, pandemics, changes in housing and transportation patterns, rapid technology advancements, and growing inequity based on race, gender, age, income, and geography.

We are not prepared.

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In 1935, President Roosevelt was the first president to take bold steps to provide federal assistance for older people when he signed the Social Security Act. Thirty years later, in 1965, President Johnson recognized that an employment-based health insurance system did not serve

people well in retirement and took the next bold step by providing health coverage through Medicare.

As the baby boomers enter their longer third age, it is time for President Biden to take the third bold step, beginning with establishing a robust, visible aging policy presence in the White House. The Biden Administration has demonstrated its commitment to older people—now let's establish a unified, whole-of-government vision by a White House team that is up to the task.

Like the White House Office of Disability Policy, the White House Office on Aging Policy (WHOAP) could fall within the Domestic Policy Council. Establishing it would demonstrate that aging policy development and coordination are on par with climate, health, education, and racial justice. We believe the work of the WHOAP should begin with a Comprehensive National Aging Plan, like [California's Master Plan for Aging](#) which prepares the state for demographic shifts and ensure all are valued and afforded equitable opportunities to thrive.

Across the government, individual agencies handle aging issues differently and with varying levels of resources. Few maintain focus on older people and the implications of the demographic trends. Even in rare exceptions where entire offices focus on aging issues such as the Administration on Community Living's Administration on Aging, only a slice of the cross-departmental challenges is addressed, which include:

- **Preventing poverty and assuring retirement income.** Increased age is associated with higher rates of poverty, particularly among non-white households.
 - One in three, or 15 million, older Americans has an income below 200% of poverty. ²
 - Half of older black or Latinx adults' income is below 200% of poverty, raising significant equity concerns. ²
 - The Congressional Budget Office forecasts that the Social Security Trust Fund will run short in 2031. Roughly 56 million people receive Old-Age, Survivors, and Disability Insurance (OASDI), with 68 million expected to need this vital income support in 2030. ²

- **Shifting patterns of employment, access to jobs for older people who work, and retirement.** Unlike earlier generations, older people in the 21st-century United States are heterogenous in their choices about work and retirement. Many older Americans keep working because they have no savings and no retirement resources. Older adults are working longer, and they are retired longer. There is no centralized function to support employment, address workplace age discrimination, identify new models of work for older people, and assist with retirement planning. The pandemic took a disproportionate toll on older people economically, although many chose to retire early or leave the workplace altogether. Several federal departments and agencies address

one piece of this complex puzzle, but there is no overarching vision or centralized function to support employment, address workplace age discrimination, identify new models of work for older people, and assist with retirement planning.

- **Ensuring equitable access to adequate housing.** The development of affordable housing must be accelerated to avoid homelessness among the growing older population. Many older adults need significant home modifications to ensure successful aging in their homes and communities.
 - The growing population of the oldest age groups will lift the share of U.S. households over age 65 from 26% in 2018 to 34% in 2038. ³ Still, two out of three very low-income older people who qualify for assisted housing are on waiting lists that can last for years because the programs are too small to meet the need.
 - 59% of renters and 29% of homeowners in the age 80 or older category have housing cost burdens.

The Department of Housing and Urban Development (HUD), the USDA's Rural Housing Service, and the Treasury oversee more than three million affordable senior housing homes, but the need continues to outpace the affordable housing supply. Going forward, we need to consider a universal design in the construction of new homes, both owned and rental.

- **Services and housing.** Support services combined with housing to preserve independence in the community should be the norm – and requires complex agreement across federal departments.
 - Service coordinators are government-funded in half of the available affordable senior housing sites, which helps connect residents with the help they need. A small number of special pilots and demonstrations are also available in limited numbers around the country.
 - Older people living in low-income senior housing supported and governed by HUD have very low incomes (generally \$15,000 or less) and are in more frail health and in need of services to stay home than other community members. With limited options for support and services, these adults are placed in nursing homes even though many do not need the level of care the setting provides.
- **Food security.** In 2019, 5.2 million older adults faced food insecurity, a problem that was exacerbated by the pandemic. Multiple federal departments address this problem but there are still gaps.
 - The Supplemental Nutrition Program (SNAP), run by the Department of Agriculture, serves 4.8 million older adults, but three out of five eligible seniors do not receive benefits.

- In 2018, programs funded by the Older Americans Act, run through the Administration on Community Living, served 1.5 million older adults in congregate nutrition programs and 871,000 with home-delivered meals.
- **Eliminating barriers to transportation.** The vision and hearing loss that accompanies aging can impede driving and even the use of public transportation. But older adults must still travel to essential medical and other appointments, remain social and active to reduce isolation, and have the opportunity to participate in and contribute to the economy. Numerous barriers to transportation exist, especially for one out of four people over age 65 who live in rural areas with little to no access to public transportation.
- **Need for long-term care.** Half the people turning 65 each day will need paid long-term care services at some point in their lifetime, whether at home or in a residential setting. Unfortunately, the majority of Americans do not qualify for Medicaid or have the means to cover their long-term care needs out of pocket. They rely on family and friends –but as the aging population grows, so will caregiving demand and the availability of these informal caregivers will decrease.

President Biden took some important steps in proposing to expand home and community-based services for older people using Medicaid and focusing on nursing home residents in his 2022 State of the Union address. But nursing home residents represent less than 1% of the population of people over age 65. Older adults, who are more likely than other age groups to experience multiple chronic conditions and acute exacerbations, need a more integrated care approach that coordinates acute, primary, long-term, and end-of-life care.

- **Protecting seniors against abuse including financial scams.** Numerous government entities manage programs related to elder abuse, neglect, and exploitation, such as the Department of Health and Human Services (HHS) Administration on Community Living (ACL), Consumer Financial Protection Bureau (CFPB), Federal Deposit Insurance Corporation (FDIC), and Department of Justice (DOJ) Office for Victims of Crime (OVC). In some cases, Congress directed several agencies to work together, and we believe programs would be far more streamlined and potentially more effective if they were routinely coordinated from the top.
- **Environmental threats may harm older people first.** People are less able to compensate for environmental effects as they age, with high temperatures and poor air quality also exacerbating existing health conditions. Medications can even make it harder for older people to adapt to climate effects in some cases. The Environmental Protection Agency (EPA) educates on climate change adaptation, several federal departments like

FEMA and HHS step in when severe natural disasters strike, and the Centers for Disease Control and Prevention (CDC) has a specific focus on the role of public health in addressing the needs of people living with dementia and their family caregivers/care partners during climate-related disasters and other emergencies.

- **Inequity for older people, particularly those of color.** Pervasive ageism manifests itself as discrimination in the workplace and in policymaking. With a rapidly aging society, all policies must be viewed through an aging lens to ensure equity and avoid inadvertent discrimination against what will soon be 20% of the U.S. population.
- **Data to support policymaking are incomplete.** Policymakers looking to improve economic and social policy, infrastructure, and services to serve an aging nation quickly discover gaps in available data, particularly because clinical trials often fail to include older adults, especially the oldest of old. For instance:
 - the government does not collect and analyze information on the number of older people who need functional support for daily living (like help bathing or using the bathroom)
 - we do not know how many people need accessible transportation or affordable housing or how many are on waiting lists for housing
 - gaps in health utilization by those enrolled in Medicare Advantage plans complicate reform efforts
 - areas where federal leadership on data related to older people would minimize costs and reporting burden and maximize the information available, such as federal data on the impact of natural disasters on older adults or empirical information on the number and location of older adults with no broadband access or poor access

The items detailed above are not the only critical programs and issues disconnected from the top of the executive branch. The changing demographics of the nation mean that it will no longer serve us to leave it to individual staff within multiple departments to find each other on an ad hoc basis or coalesce for one emergent need. This work cannot be done by one department or spread across 25 or more federal agencies. The White House Domestic Policy Council should provide unified and clear leadership and vision.

Most developed countries have an aging office at the highest level of government enabling them to take a whole-of-government approach to an aging population.

The U.S. is not ready to address the demographic challenges and opportunities of its aging population. Other developed countries, such as Singapore, Japan, Israel, and Germany have taken a whole-of-government approach to ensuring programs and supports are in place, and to maximize on the ability to reap the dividends of population aging. The first step of such a strategy is to provide a strong centralized vision and provide leadership from within the heart of government. One motivation for the UN Decade of Healthy Aging (2021-2030) and the Healthy Ageing Collaborative, which was launched in September 2022, is to bring attention to important issues around aging and to support national and international coordination.

As noted in an EU report on aging more than 15 years ago, just as delaying planning and saving for retirement harms an individual worker, delays at the government level will lead to increased costs and shift the economic burden to the next generation of workers and taxpayers. A more recent EU Report focused on changes needed in the social care sector to address a growing older population – a holistic approach.

Why focus on older adults and aging?

- We are all aging. In our lifetime, more than half of us will need long-term care services and support – as well as many of those we love and care about in our communities.
- People over age 65 are a large and rapidly growing group within the U.S. population.
- Four of five deaths from COVID-19 were people over age 50, and those over 85 experienced rates of death from COVID that were 330 times higher than those age 18-29. ⁴The pandemic continues to impact every aspect of the lives of older people. They are also more likely to experience the devastating impact of Long COVID.
- The needs of older people will require increasing resources as the number of individuals over age 65 (and over age 85 especially) grows.
- Today:
 - One in ten older Americans lives with dementia
 - 80% of older adults have at least one chronic condition and 68% have two or more
 - 20% of older adults experience a mental health disorder or neurological condition
 - The older an individual gets, the more likely it is that they are single and living alone
 - Six of ten people over 85 are widowed

Many parts, but no whole.

The federal government's focus on aging has developed idiosyncratically and been coordinated mostly from the bottom up. Informal networking with no designated, centralized leadership creates confusion and leaves gaps – at best. At worst, it shortens the lives of older Americans and significantly impairs their quality of life. The lack of coordination takes an extraordinary toll on families. And it hits older black and brown adults disproportionately.

It is time to join the rest of the developed world and intentionally coordinate the government's focus on aging, currently in special units or divisions within departments. It is time to recognize the massive structural, economic, and social benefits an aging population brings to the country. Equally, it is time to ensure the country is prepared to address important equity considerations and address the shifting demographics.

Just like the Office on Disability Policy, coordinating policy across multiple, diverse agencies, the Domestic Policy Office should have an Office on Aging Policy.

The Biden Administration has the historic opportunity to drive change and demonstrate its commitment to the value of the growing American population. An Office on Aging Policy at the highest level of government will demonstrate a commitment to equity and allow this Administration, and those that come after it, to coordinate diverse facets of policy that affect older people.

Regardless of department or agency, we can take a whole-of-government approach aligned to a single strong, unified vision that ensures America is a great country to grow old.

Sources

1 Older Americans 2020: Key Indicators of Well-Being (agingstats.gov)

2 How Many Seniors Live in Poverty? | KFF

3 Harvard_JCHS_Housing_Americas_Older_Adults_2019.pdf

4 Risk for COVID-19 Infection, Hospitalization, and Death By Age Group | CDC