



August 9, 2023

Submitted via <https://www.regulations.gov>

Amy Wiatr-Rodriguez  
Director of Regional Operations  
Administration for Community Living  
U.S. Department of Health and Human Services  
330 C Street SW  
Washington, DC 20201

RE: Comment on the Proposed Rule by the Department of Health and Human Services on the Older Americans Act Regulations, RIN Number 0985-AA17

Dear Director Wiatr-Rodriguez:

The American Psychological Association (APA) is the nation's largest scientific and professional nonprofit organization representing the discipline and profession of psychology. APA has more than 146,000 members and affiliates who are clinicians, researchers, educators, consultants and students. Through the application of psychological science and practice, our association's mission is to make a positive impact on critical societal issues across the states. We appreciate the opportunity to submit these comments in response to the Department of Health and Human Services, Administration for Community Living's (ACL) proposed rule on the recommended changes to regulations for programs authorized under the Older Americans Act (OAA). APA Services applauds the ACL for its dedication and commitment to encouraging the independence and health of older adults. The proposed rule offers a strong commitment to those most in need, and as the proposed rule states, those with the greatest social and economic needs.

### **Importance of Social Isolation and Loneliness**

Throughout the proposed rule, the ACL mentions including social isolation in the definition of "greatest social need" to best address the needs of older adults. We strongly support this addition. With the scientific evidence showing that social isolation and loneliness negatively

impact individuals, including causing worse health and higher rates of mortality, it is essential to include social isolation and loneliness into the category of social need. Data shows that social isolation can lead to 29 percent higher risk of mortality.<sup>1</sup> Further studies have shown that social isolation is strongly related to poor health, especially arthritis and depression. It has also been associated with lung disease, heart disease, depressive symptoms and self-neglect.<sup>2</sup>

For older adults, social isolation raises the risk of dementia by 50 percent and stroke by 32 percent. The risk of mental health disorders increases by 26 percent for older adults.<sup>3</sup> Therefore, given the scientifically proven negative mental health and physical health effects of social isolation and loneliness on older adults, it is essential to underscore the need to include “social isolation” in the explanation of “greatest social need” as the ACL has proposed. We wish to underscore this and encourage any further mention of inclusion of social isolation and loneliness into the proposed rule.

## **Family Caregiving**

The proposed rule suggests partners, friends, or neighbors caring for an older adult all be included in the definition of family caregiving. We support this inclusion and any extensions of the immediate family when discussing family caregiving. With the challenges of caregiving, it is better to expand the help to outside the immediate family than to limit what is considered family caregiving.<sup>4</sup> Since this proposed rule is modernizing the Older Americans Act, it is logical to include a broader definition of the family. Therefore, we strongly support expanding this definition as is written in the proposed rule.

There are also instances where caregivers do not define themselves as caregivers or they do not define their actions as caregiving. General outreach would be important to these individuals to be sure they can receive any benefits or aid offered. Raising awareness of the impacts of mental health and trauma experienced by caregivers is also important.<sup>5</sup> In addition, consideration should be given to the fact that the transition into a caregiver role can be a traumatic experience that is not always acknowledged.<sup>6</sup>

Therefore, we support the proposed rule’s codification of a caregiver definition and inclusion as a service population.

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<sup>1</sup> Barone E., Wolfson, E. TIME, SourcePRO, 2020.

<sup>2</sup> Holt-Lunstead, J. et al., Loneliness and Isolation as Risk Factors for Mortality: A Meta-Analytic Review. 2016.

<sup>3</sup> Rubin, E., Elderly Loneliness Statistics. 2023. <https://www.consumeraffairs.com/health/elderly-loneliness-statistics.html>

<sup>4</sup> Shulz R, Beach S, Czaja S, Martire, L, & Monin, J, Family Caregiving for Older Adults. Annual Review of Psychology, 71 (1), 635-659. 2020. <https://doi.org/10.1146/annurev-psych-010419-050754>

<sup>5</sup> Shulz, R., et al.

<sup>6</sup> Patterson, S., Freedman, V., Cornman, J., Wolff, J., Work as overload or enhancement for family caregivers of older adults: Assessment of experienced well-being over the day. Journal of Marriage and Family, 85(3), 760-781. 2023. <https://doi.org/10.1111/jomf.12909>

## Emergency Preparedness and Response

The proposed rule also modernizes the way that emergencies would be considered for older Americans. We think it is important to use the lessons we learned from the pandemic and apply those to address the needs of this population. Since the current regulations only address weather related emergencies, we agree it is important to expand this section of the regulation.<sup>7</sup> There was no mention of emergency or disaster requirements in the current regulation. We also appreciate the proposed rule's inclusion of coordination of various emergency response agencies to help get as much and as broad aid as necessary.<sup>8</sup> Finally, we want to emphasize the importance of access to mental health care for older Americans during times of emergencies, as such times can be especially trying times for everyone<sup>9</sup>. As the proposed rule recommends, we fully support expanded emphasis and services during times of emergencies.

Thank you for the opportunity to comment on this important issue. Should you have any questions, please feel free to contact Serena Dávila at [sdavila@apa.org](mailto:sdavila@apa.org).

Sincerely,



Katherine B. McGuire  
Chief Advocacy Officer  
American Psychological Association

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<sup>7</sup> Bell, S. A., Singer, D., Solway, E., Kirch, M., Kullgren, J., & Malani, P. Predictors of Emergency Preparedness Among Older Adults in the United States. *Disaster Medicine and Public Health Preparedness*, 15(5), 624-630. 2021. <https://doi.org/10.1017/dmp.2020.80>

<sup>8</sup> Thompson A., Little K., & Kim, Y.K. Factors Impacting Emergency Preparedness Among Community-Dwelling Older Adults. *Innovation in Aging*, 6 (Supplement\_1), 621-621. 2022. <https://doi.org/10.1093/geroni/igac059.2309>

<sup>9</sup> Prohaska, T., Peters, K., Impact of Natural Disasters on Health Outcomes and Cancer Among Older Adults. *The Gerontologist*, 59 (Supplement\_1), S50-S56. 2019. <https://doi.org/10.1093/geront/gnz018>