**Post-Event Summary Report** 

Name of Event: BWICA Educational Fund, Inc. Independent Aging Agenda Event

Date of Event: April 18, 2005 & May 6, 2005

Location of Event: <u>Fort Greene Albany Senior Center, Brooklyn, NY</u>
<u>Amico Senior Center, Brooklyn, NY</u>

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**Number of Persons Attending: 350** 

Sponsoring Organization(s): <u>BWICA EDUCATIONAL FUND, INC.</u>

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Please follow this format for each priority area, with the most important listed first. Please ensure that your organization's name and contact information is provided at the bottom of each page submitted.

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Page 1

#### Priority Issue #1: CARING FOR OUR SENIORS IN THE COMMUNITY

#### **Barriers**

- seniors should have an adequate and seamless continuum of care after being discharged from the hospital; and
- there is a shortage of personnel ratio to patients in hospitals across the nation; and
- home attendant hours have been curtailed drastically for seniors in need of long term care; and
- many seniors are being discharged from the hospital into the community with inadequate or no care resources.

# **Proposed Solutions**

**Institute** policies that will **Regulate & Monitor** hospital discharge plans that ensure proper quality of care and follow-up care for patients in and out of the hospital.

**Advocate** with federal healthcare agencies to enforce a staff to patient ratio that would ensure proper care for patients.

**Expand** long term care hours that will ensure sufficient and appropriate care for frail and ill seniors living in the community.

# Priority Issue #2: FINANCIAL SUPPORT FOR OUR CAREGIVERS

#### **Barriers:**

- grandparent caregivers are 60 percent more likely to live in poverty than are grandparents not raising grandchildren; and
- between 20% & 40% of caregivers are members of the "sandwich generation; and
- women on an average provide 50% more hours of informal care per week than me; and
- older Americans have the greatest need for long-term care and support, including formal caregiving; and
- informal caregivers curtail their professional opportunities and thereby imperil their financial security in retirement; and
- it is estimated that caregivers lose an average of \$550,000 in total wage wealth, and that their Social Security benefits will decrease an average of \$2,100 annually as a result of caregiving; and
- the value of informal caregiving provided each year is estimated at nearly \$200 billion; and
- informal caregivers provide more care in the home free of charge than the federal government provides in all settings combined; and
- one-third of informal caregivers consider themselves to be in fair to poor health; and
- since most informal caregivers work in the paid labor force, informal caregiving is an important issue for employers.

## **Proposed Solutions:**

**Institute** programs that compensate caregivers financially and with respite hours in order to maintain seniors living in the community as well as preserving the best care available to frail seniors:

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**Establish** policy that will grant grandparents caring for their grandchildren much needed economic resources as well as case assistance with issues such as education, social services and social support for senior and youth issues so as to provide a comprehensive support network and stability for these families.

#### **Priority Issue #3:**

# GAP / HEALTH CARE COVERAGE UNTIL RETIREMENT AGE / AGE DISCRIMINATION ELIMINATION

#### **Barriers:**

- 44 million people living in the United States were uninsured in 2002 a 6 percent increase over 2001 representing 15 per cent of the nation's total population; and
- the numbers of underinsured are growing exponentially as companies continue curtailing health coverage of employees; and
- for the near elderly ages 55 to 64 health problems reduce a person's ability to work and consequently their income declines\*; and
- many non-retirees, particularly those with low (less than 200% of the Federal poverty level) or middle incomes (between 200% and 400% of poverty) have difficulty obtaining health insurance. Among low-income non-retirees, rates of employer-sponsored insurance are relatively low, access to public programs is limited, and private non-group coverage is generally too expensive for them; consequently, their uninsured rates are over 35 percent\*; and
- middle-income non-retirees have higher rates of employer-sponsored insurance, but even less access to public programs, leaving almost 17 percent uninsured\*; and
- uninsured rates for middle-income near-elderly Americans in general, are higher for those who do not report being in excellent or very good health\*; and
- companies are downsizing leaving middle-aged near elderly workers with no jobs, incomes, or health insurance to access until they reach the age of retirement; and
- uninsured near-elderly will not seek healthcare and enter into their older years with more chronic and expensive conditions to be covered by Medicare.

## **Proposed Solutions:**

**Create** a transitional program that will cover uninsured and underinsured health coverage program for that will provide adequate and appropriate coverage for the near-elderly who are about to reach the age of retirement and qualify for senior healthcare coverage programs. **Collaborate** with federal and public agencies to combat age discrimination in the work place and healthcare coverage policies through awareness campaigns, wellness initiatives, and worker re-training programs.

• Source: Kaiser Family Foundation "Health Insurance Coverage for the Near Elderly" report July 2004

# **Priority Issue #4: SOCIAL SECURITY**

# **Barriers:**

workers have contributed to the Social Security funds consistently throughout their lives;
 and

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Page 3

- Social Security is a family protection program that prevents poverty in the most vulnerable homes; and
- the proposal to privatize Social Security threaten the promises and wellbeing of those who have paid into this fund; and
- the proposal to privatize Social Security places a safe and secure fund at the mercy of stock markets which also incurs trillions of dollars in new debt and accounts management fees; and
- the debt that will be incurred will be assumed by younger generations which will be entering the job market with less benefits and comparable income; and
- under the current privatization plans of Social Security retired people collecting benefits by 2050 will receive 50% less in benefits than those collecting them today.

# **Propsosed Solutions:**

**Advocate and Reject** the proposal of privatizing Social Security which will cut benefits and put the secure funds of Social security in an insecure market.

**Increase** the cap of taxable Social Security taxable income from \$90,000 to \$148,000.

# **Priority Issue #5: HEALTHCARE COVERAGE**

#### **Barriers:**

- the Medicare Modernization Act of 2003 has altered the Medicare healthcare system as
  we know it by: raising costs to seniors for healthcare coverage, privatizing a system that
  was accessible to all seniors over 62, creating a doughnut hole which will grow with
  years to come, and specifically prohibiting government agencies from negotiating with
  pharmaceuticals; and
- Universal Healthcare would ensure that all persons in need of prescription drugs and healthcare would receive the same services and medication for the same price; and
- patients could pay up to a 170% difference in cost for prescription drugs; and
- pharmaceutical companies spend billions of dollars marketing their products to the public threatening the optimal care that patients may receive; and
- employers are increasingly cutting healthcare and prescription drug coverage for their employees and retirees.

# **Proposed Solutions:**

**Advocate** for the passage of a bill that permits safe and regulated importation of drugs at affordable prices;

**Implement** a community education and outreach program regarding to educate seniors and the community in general about 2003 Medicare Modernization Act that would help the consumer to make educated choices regarding his or her healthcare.

**Advocate** for a reversal to the privatization aspects of Medicare thereby ensuring that all beneficiaries are entitled to the same benefits, including a Single Payer Health System.

**Limit** the amount of dollars that pharmaceutical companies can spend on advertising.

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Tel.: (718) 686-1333 Fax: (718) 686-1336 E-mail: kathiem6@aol.com **Create** an incentive programs whereby companies who do not discontinue their healthcare and prescription drug benefits (or those that institute them) get tax breaks

**Advocate for a** Universal Health Care system which would grant the same healthcare services to all patients nationwide.

# **Priority Issue #6: HOUSING**

#### **Barriers:**

- the real estate boom experienced in the nation's main urban areas has caused a shortage in affordable housing for seniors and the cost of rents to increase exponentially; and
- federal, state, and city housing authorities are curtailing housing benefits programs such as Section 8 Section 202 Housing; and
- housing developments, constructed with taxpayer dollars and meant to house low income families and seniors are currently changing their guidelines and practices to exclude low income families and seniors from residing in these facilities; and
- the cost of living and inflation in New York City have been consistently outpacing the federal guidelines of poverty as well as the increase given by Social Security forcing NYC seniors into poverty in greater numbers than in the rest of the country; and
- there is a lack of senior housing adequate for low income and middle income seniors in need of assisted living, social services and safety in their housing situations.

# **Proposed Solutions:**

**Raise** income guidelines ensuring more access to seniors in senior housing with social services.

**Allocate** funding for construction of more senior housing that is affordable and with assisted living, including housing specifically for grandparents who care for their grandchildren.

**Design** a program that would grant seniors living in higher cost of living markets such as New York City more economic wherewithal in order to be able to afford living on a fixed income.

# Priority Issue # 7: NUTRITION & EDUCATION & RECREATION

#### **Barriers:**

- education on issues such as nutrition, entitlements & benefits, health and social issues are paramount to the health and well-being of seniors;
- physical activities such as arts & crafts, music, exercise and outside trips greatly contribute the physical, emotional, and mental well-being of seniors;
- activities conducted in a congregate setting such as meals, recreation and education (as described above) are crucial to prevent depression, improve the quality of life of seniors living in the community, and diminish healthcare costs.

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Page 5

# **Proposed Solutions:**

**Develop** an incentive program and community network for local businesses that provide access to discounts for recreational and educational activities, transportation, facilities, nutrition for seniors and senior organizations.

**Increase** funding for outreach and education programs that will inform seniors on proper nutrition & health facts and procedures.

**Increase** funding for an aggressive outreach and education program to inform seniors about the latest developments of entitlements and benefits.

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Page 6