Diverse Elders Coalition (DEC) advocates for and with older adults who self-identify as racially and ethnically diverse; and/or American Indian/Alaska Native; and/or LGBTQ+ to strengthen aging policies and programs in our communities.

**DIVERSE ELDERS COALITION POLICY PRIORITIES**

1. **ENSURE** all federally funded programs include person-centered, trauma-informed, culturally appropriate and accessible services to reduce disparities in aging services and supports for diverse older adults. When considering accessibility, programs should take into account the conditions where people live, or social influencers of health – including but not limited to housing, transportation, income, education, pollution, discrimination, lack of family or community support, and violence – that contribute to wide range of disparities and inequities impacting people's health, well-being, and quality of life.

2. **IMPROVE** language access by making it easier for older adults with Limited English Proficiency (LEP) to navigate and receive quality language assistance; collecting and better utilizing language data to provide personalized language services across Social Security, Medicare, and Medicaid; and translating applications, notices, and resources into additional languages and improving access to in-language materials.

3. **CLOSE** the digital divide for diverse older adults by bolstering programs that offer expanded eligibility and low-cost access to broadband services; ensuring digital inclusion through best practices on how to reach these communities; providing skills training to promote digital literacy; increasing uptake and utilization of services among those who already have access to broadband; and increasing the supply of affordable broadband.

4. **STRENGTHEN** anti-discrimination protections in all federally funded programs – around race, ethnicity, Tribal affiliation, language, disability, age, sex, sexual orientation, gender identity, sex characteristics, and immigration status – and allow for intersectional analysis. Emerging research has revealed that historical discrimination and racism contribute to increased aging and cognitive decline.

**OUR VALUES**

- **WE BELIEVE** that the services and care our elders receive should be culturally and linguistically accessible.
- **WE BELIEVE** that policies addressing negative social influencers of health and systemic barriers should center equity and social justice—including racial, LGBTQ+, and disability justice.
- **TOGETHER,** we envision a world where all older adults can age with dignity in a more just and equitable society.

**OUR MEMBER ORGANIZATIONS**

Diverse Elders Coalition (DEC) advocates for and with older adults who self-identify as racially and ethnically diverse; and/or American Indian/Alaska Native; and/or LGBTQ+ to strengthen aging policies and programs in our communities.

- WE BELIEVE that the services and care our elders receive should be culturally and linguistically accessible.
- WE BELIEVE that policies addressing negative social influencers of health and systemic barriers should center equity and social justice—including racial, LGBTQ+, and disability justice.
- TOGETHER, we envision a world where all older adults can age with dignity in a more just and equitable society.

**DIVERSE ELDERS COALITION POLICY PRIORITIES**

These core advocacy pillars of the Diverse Elders Coalition are intended to serve as a guidepost for federal policymakers in recognizing and addressing the distinct, priority needs of diverse older adults and their caregivers when designing effective, equitable policy solutions for the communities represented by the DEC.
2 Provide Adequate Resources to Enable Diverse Older Adults to Age in a Place of their Choice, within Age-Friendly Communities

- **ESTABLISH** federal standards for measuring and ensuring equitable access to Home and Community Based Services (HCBS) in Medicaid. Medicaid HCBS has turned into a patchwork of programs with wide variation among and within states. This has led to inequities in access and services needed to live in the community, that often leave institutional settings as the only available option for receiving care.

- **INVEST** in long-term, linguistically robust and culturally appropriate care to enable diverse older adults to self-determine how to age – in place; in congregate care; or as determined by their loved ones. Place special emphasis on Tribal lands, rural areas, and other hard-to-reach communities.

3 Address the Needs of Diverse Caregivers for Older Adults

- **ENSURE** that the eligibility criteria for programs and services designed for caregivers offer an inclusive definition of “family” to include siblings, aunts, uncles, cousins, nieces, nephews, grandparents, grandchildren, domestic partners, youth, members of the same tribe, friends, and/or community members that are not related by blood, but whose close association with the care recipient is the equivalent of a family relationship.

- **EXPAND** access to programs, services, and resources for diverse caregivers, including low-income and LEP individuals, those with disabilities, and people in rural areas. Respite care, for example, is particularly important for caregivers for people with dementia. Likewise, recognize that a lack of technological literacy in rural, urban, and suburban areas alike may present a challenge for caregivers accessing formal supports.

- **PROVIDE** comprehensive, universal paid family and medical leave to family caregivers that includes a broad and inclusive definition of “family.”

4 Expand Data Collection, Disaggregation, and Reporting both among and within Diverse Populations

- **CREATE** and promote a federal demographic data collection standardization requirement, modeled after DEC Members’ and expert partners’ best practices. Apply these standards to establish demographic data collection, analysis, and reporting to better understand how all programs along the continuum of care are serving individuals, particularly those who are most marginalized, including LEP older adults.

- **DISAGGREGATE** available data in order to collect more detailed information on population subgroups. The absence of specific subgroups for race, ethnicity, LGBTQ+ status, and disability has meant that many diverse older adults have fallen through the cracks. Disaggregated and intersectional data collection and reporting are crucial to identify community needs and target programs effectively and efficiently. Oversampling should also be given strong consideration in all government surveys to help identify the needs of smaller sub-ethnic groups.

- **PROVIDE** strong consumer protections by safeguarding the data that has been collected to ensure that it cannot be used for discriminatory, profiling-related actions such as immigration or law enforcement, redlining or targeting of specific groups. Implement strict federal standards around maintaining collected data safely and securely.