



UNITED STATES MISSION
TO THE UNITED NATIONS AND OTHER INTERNATIONAL ORGANIZATIONS
IN GENEVA

August 6, 2015

Ms. Rosa Kornfeld-Matte
Independent Expert on the Enjoyment of All Human Rights by Older Persons
Office of the High Commissioner for Human Rights
Geneva, Switzerland

Dear Ms. Kornfeld-Matte:

Attached is the U.S. response to your letter referencing HRC resolution 24/20, which asks the Independent Expert on the Enjoyment of All Human Rights by Older Persons to assess the human rights implications of implementing the Madrid International Plan of Action on Ageing. The letter requests member states to provide information on how they are achieving the objectives of the Madrid Plan. We appreciate the opportunity to highlight a number of U.S. policies and programs on this subject.

Sincerely,

A handwritten signature in blue ink, appearing to read "Keith M. Harper". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Keith M. Harper
Ambassador
U.S. Representative to the United Nations
Human Rights Council

Cc: Mr. Khaled Hassine
Office of the High Commissioner for Human Rights
Geneva, Switzerland

Question 1. Please provide information as to how your Government has incorporated a human rights-based approach in the implementation framework of MIPAA and how this translated into concrete policies and normative actions? How does your Government monitor and evaluate the impact of MIPAA implementation on the enjoyment of all human rights by older persons?

The United States has a strong history of policies, legislation, and programs that have focused on establishing and protecting the rights and dignity, while promoting the independence and self-determination of older people. The framework for these protections comprises four cornerstones – the Social Security Act passed in 1935, and the passage in 1965 of Medicare, Medicaid, and the Older Americans Act – that have served as the foundation for economic, health, and social supports for millions of seniors, individuals with disabilities, and their families. Because of these programs, millions of older Americans have lived more secure, healthier, and meaningful lives.

The focal point of older adults and aging within the U.S. government is the Administration for Aging (AoA), a division of the Administration for Community Living (ACL), in the U.S. Department of Health and Human Services (HHS). Led by the Assistant Secretary for Aging, AoA administers the Older Americans Act (OAA), which relies on a philosophy of planning from bottom to top by listening to older adults, their families, and communities. Our programs are created through the priorities set at the national level, together with the needs expressed in states and local communities. Through the OAA, we empower our citizens by giving them more choices and greater control over their own health. This philosophy has been expanded to include other types of services and benefits that lead to independence. The U.S. approach to promoting the human rights of older persons calls attention not just to the needs of older people and how society should react in response to those needs, but has highlighted the tremendous resource that older individuals represent to our communities. They represent a wealth of knowledge and experience and contribute to the continued vitality of every sector of our local, state, and national communities and economies.

In addition to the programs (mentioned further in our report) under the OAA, the United States demonstrates a particular commitment to the goals of MIPAA by including older adults as a focal point for international advocacy to raise the visibility of older persons across existing human rights

platforms. The following are example of recent U.S. efforts at the United Nations and other international fora on the human rights of older adults:

- At the June 2015 Human Rights Council session, the U.S. co-sponsored a side event marking World Elder Abuse Awareness Day. During the discussion period, the U.S. delegation outlined U.S. responses to address violence against older women, elder abuse as a public health challenge, and financial exploitation.
- At the 59th session of the Commission on the Status of Women, the United States co-sponsored a side event organized by HelpAge International and Argentina, and HHS Assistant Secretary for Aging Kathy Greenlee spoke about violence, abuse, and neglect toward older women, noting that older women are visible throughout the Beijing Declaration and Platform for Action.
- At the 2015 World Health Assembly, HHS Assistant Secretary Kathy Greenlee spoke on a panel at a side event sponsored by Canada on the topic of violence against older women and elder abuse as a public health concern with human rights implications.
- Kathleen Otte, Regional Administrator for the HHS Administration on Community Living, participated in a 2014 Commission on Social Development panel on the family. Her presentation covered U.S. domestic responses to elder abuse.

U.S. Policies and Programs to Protect the Rights of Older Persons

The U.S. government has a number of programs for protecting the rights of older persons and empowering them to protect themselves from abuse, fraud, and financial exploitation.

- Legal Assistance and Rights of Older Persons: Legal assistance and elder rights programs under the Older Americans Act (OAA) are instrumental in addressing the harmful consequences of elder abuse, including financial damage caused by exploitation and fraud. There are approximately 1,000 OAA-funded legal services providers nationwide, which provide over one million hours of legal assistance per year, and can protect older persons against the direct challenges to independence presented by elder abuse. These cases involve complex legal issues which may include: cases of financial exploitation, fiduciary abuses, and consumer fraud; cases of physical abuse; and cases of neglect/self-neglect.

- National Legal Assistance and Elder Rights Projects (NLAERP): NLAERP grants comprise a comprehensive national legal assistance support system for aging individuals and legal service providers and advocates, including those involved in addressing elder abuse. Currently, five organizations in partnerships comprise the National Legal Resource Center (NLRC). These organizations provide case consultation, training, technical assistance, and other informational resources to both aging and legal networks. Elder abuse is a priority legal subject matter area addressed by the NLRC.
- Long-Term Care Ombudsman Program: ACL provides federal leadership and administers funding, through the OAA, for states' Long-Term Care Ombudsman Programs, which serve residents of long-term care facilities (nursing homes, board and care, assisted living, and similar settings) and work to resolve resident problems related to poor care, violation of rights, and quality of life. Ombudsmen also advocate at the local, state, and national levels to promote policies and consumer protections to improve residents' care and quality of life. Training and technical assistance are provided to state and local ombudsmen by HHS/ACL's National Long-Term Care Ombudsman Resource Center.
- The Elder Justice Act: The Elder Justice Act (EJA) was signed into law in 2010 to address weaknesses in federal and state responses to elder abuse. The EJA contains a number of provisions, including ones to improve and enhance adult protective services programs; enhance the long-term care ombudsman program; and receive reports of crimes in long-term care facilities. In addition, the EJA establishes the Elder Justice Coordinating Council (EJCC). Comprising the leadership of 12 federal agencies, the EJCC engages with stakeholders to receive individual, expert, and community input on how the federal government can improve responses to elder abuse, neglect, and exploitation and other crimes against elders. For more information on the EJCC, including white papers from expert researchers, practitioners, and physicians, visit: http://www.aoa/acl.gov/AoA_Programs/Elder_Rights/EJCC/index.aspx.
- National Center on Elder Abuse (NCEA): HHS/ACL also funds the NCEA, which provides relevant information, materials, and support to enhance state and local efforts to prevent and address elder mistreatment. It makes available news and resources; collaborates on research; provides consultation, education, and training; identifies and provides information about promising practices and interventions; answers inquiries and requests for information; operates a

listserv forum for professionals; and advises on program and policy development.

- National Adult Protective Services Resource Center: In response to the growing need for APS programs to improve investigation and response, train APS staff, and develop and disseminate best practices for interventions into reported incidents of elder abuse, neglect, and exploitation, in 2011 ACL established the first-ever federal grant program to provide a National APS Resource Center (NAPSRC). The goal of the NAPSRC is to provide current and relevant information and support to enhance the quality, consistency, and effectiveness of APS programs across the country.
- National Indigenous Elder Justice Initiative: In 2011, ACL established the NCEA National Indigenous Elder Justice Initiative (NIEJI). The NCEA NIEJI addresses the lack of culturally-appropriate information and community education materials on elder abuse, neglect, and exploitation in Indian Country, including the establishment of a resource center on elder abuse to assist tribes in addressing elder abuse, neglect, and exploitation; identifying and making available existing literature, resources, and tribal codes that address elder abuse; and developing and disseminating culturally-appropriate and responsive resources for use by tribes, care providers, law enforcement, and other stakeholders.
- Enhanced Training and Services to End Abuse in Later Life Program: Since 2000, the Department of Justice has administered the Enhanced Training and Services to End Abuse in Later Life Program, a discretionary grant under the Violence Against Women Act (VAWA) that has addressed elder abuse, neglect, and exploitation, including domestic violence, dating violence, sexual assault, or stalking, against victims who are 50 years of age or older through training and services.

U.S. Government Programs to Evaluate Effectiveness of Aging Programs and Solicit Consumer Input from Older Persons

Providing older adults, their families, and organizations representing their interest the opportunity for input continues to be at the core of our approach to programs and services for older adults and their caregivers. The fundamental purpose of OAA programs, in combination with the legislative intent that the national aging services network actively participate in supporting community-based services with particular attention to serving

economically and socially vulnerable elders, means that ACL focuses on three measures of performance: 1) improving efficiency; 2) improving client outcomes; and 3) effectively targeting services to vulnerable elder populations.

In addition, the U.S. Senate Special Committee on Aging (the Committee) serves as a focal point in the Congress for discussion and debate on matters relating to older Americans, and frequently calls on the expertise of our Assistant Secretary for Aging for testimony. The Committee has explored issues of health care, retirement security, fraud and abuse, housing, and employment. The resulting public hearings, reports and legislation have been invaluable resources for policymakers and other interested parties throughout the years. Private citizens, consumer and industry representatives, and government agencies are called to testify at hearings. The Committee has regularly reviewed health and pension coverage and employment opportunities for older Americans. The Committee has also conducted oversight of the administration of major federal programs like Medicare, Medicaid, Social Security, and the OAA. Finally, the Committee has crusaded against fraud targeting seniors and the federal programs on which they depend. Other federal departments, such as the Social Security Administration (SSA), also ensure user participation. The SSA has hosted public forums concerning Section 504 of the Rehabilitation Act. Under this legislation, federal agencies are required to provide meaningful access to their programs, activities, and facilities.

The following U.S. government programs are administered to continually monitor and evaluate the effectiveness of aging programs to ensure they are delivering meaningful services and resources to our country's older adults and their support networks:

- ACL Office of Performance and Evaluation: The office emphasizes measuring program results, including strengthening reporting on programs from the states; developing targeted performance measures; and conducting national surveys. This includes: coordinating ACL activities related to the collection, analysis, and dissemination of national and program data on older individuals and individuals with disabilities; preparing and reporting data for Congress and the public; developing plans and priorities for evaluation of ACL programs; managing evaluation projects and performing intramural evaluation studies; preparing reports of the results of program and impact evaluations; and providing technical guidance on evaluation activities conducted as part of ACL's discretionary grants programs. Additionally, the Office compiles,

publishes, and disseminates information on demographic data and data from other federal agencies on the health, social, and economic status of older persons and persons with disabilities. It also performs routine and special statistical analyses of data for ACL offices, other federal and non-federal organizations, and the general public.

- Federal Interagency Forum on Aging-Related Statistics (Forum): Since 1986, the Forum has convened Federal agencies with a shared interest in improving aging-related data. These include the National Institute on Aging, National Center for Health Statistics, and Census Bureau. Every four years, the Forum compiles a report on older Americans with key indicators of well-being to provide the latest data on five subject areas: population, economics, health status, health risks and behaviors, and health care. Archived reports can be found at www.agingstats.gov.

Question 2. How has your Government taken into consideration the needs of specific groups of older persons in the process of implementation of MIPAA?

The OAA, at its core, is committed to providing for the rights, well-being, health, and dignity of every older adult, with particular emphasis to those in greatest need. These include economically and socially vulnerable elders, elders from racial and ethnic minority communities, older women, LGBT elders, rural elders, those with limited-English proficiency (LEP), and indigenous/tribal elders. As an agency, ACL provides leadership and programming for older adults with disabilities, those with chronic health conditions, and others.

The following U.S. government programs and policies represent those aimed at specific groups of older persons:

Older Adults with Disabilities

- Independent Living Programs: ACL's Independent Living Programs, support community-based organizations' efforts to enable individuals with disabilities to live, learn, work, and play in the communities of their choice, by providing peer support, independent living skills training, information and referral, and advocacy. The national network of more than 350 federally and/or state-funded nonprofit Centers for Independent Living (CILs) are non-residential

offices run by and for individuals with disabilities with a focus on changing the environment, not the person. CILs provide persons with disabilities a variety of resources, including information and referral, independent living skills training, peer counseling, transition assistance, and individual and systems advocacy. When ACL programs work collaboratively with their partners in vocational rehabilitation and other employment-based programs, individuals are empowered to participate to the fullest extent possible in their communities.

- National Institute on Disability, Independent Living, and Rehabilitation Research: The mission of the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) is to generate knowledge and promote its effective use to improve the abilities of people with disabilities to perform activities of their choice in the community, and also to expand society's capacity to provide full opportunities and accommodations for its citizens with disabilities. For more information, please see: <http://www2.ed.gov/about/offices/list/osers/nidrr/new.html>.
- Transportation Research & Demonstration Program: This program provides guidance that states and communities can use across the country to empower persons with disabilities and older adults to be actively involved in designing and implementing coordinated transportation systems in ways that make those systems responsive to the needs of these populations, under the principle that reliable, affordable, and accessible transportation is a necessary component of meaningful inclusion. For more information, please see: <http://www.acl.gov/Programs/CDAP/OIP/Transportation/index.aspx>.
- Assistive Technology: ACL administers State Grants for Assistive Technology to support individuals with disabilities, many of whom are older adults, to obtain assistive technology (AT) devices and services. AT devices are defined as any item, piece of equipment, or product system – whether acquired commercially, modified, or customized – that is used to increase, maintain, or improve functional capabilities of individuals with disabilities. A few examples of AT devices include computer or technology aids, modified driving controls, hearing aids, and durable medical equipment such as wheelchairs or walkers. The AT program supports state efforts to improve the provision of AT to individuals with disabilities of all ages through comprehensive, statewide programs that are consumer-responsive.
- Aging & Disability Resource Centers Program/No Wrong Door System: Aging and Disability Resource Centers (ADRCs) are a collaborative

effort of HHS/ACL, the Centers for Medicare & Medicaid Services (CMS), and now the Veterans Health Administration (VHA). ADRCs support state efforts to streamline access to long-term services and support (LTSS) options for older adults and individuals with disabilities. They also support state efforts to develop more efficient, cost-effective, and consumer-responsive systems of information and integrated access by creating consumer-friendly entry points into long-term care at the community-level. No Wrong Door systems simplify access to LTSS, and are a key component to LTSS systems reform. For more information, please see: <http://www.acl.gov/Programs/CDAP/OIP/ADRC/index.aspx>.

Older Women

- “U.S. Strategy to Prevent and Respond to Gender-Based Violence:” The U.S. State Department and U.S. Agency for International Development jointly produced this strategy to recognize the pervasive role of violence against women and girls of all ages and a hindrance to democratic, stable societies and sustainable development. The Strategy outlines a definition of gender-based violence that articulates the impact of violence and abuse across the life cycle, including elder abuse. The strategy is available at: <http://www.state.gov/documents/organization/196468.pdf>.
- National Education and Resource Center on Women and Retirement Planning: This Center is operated by the Women’s Institute for a Secure Retirement (WISER) and administered by AoA. The mission of the Center is to provide older women with access to a one-stop gateway that integrates financial information and resources for retirement, health, and long-term care planning with Older Americans Act Programs. Often, programs such as OAA Nutrition and Supportive Services Programs become critical to the retirement security of older women. This program also does work to educate women veterans about their financial needs. Through the Center, WISER is making user-friendly financial education and retirement planning tools available to traditionally hard-to-reach women. This includes average and low income women, women of color, women with limited English speaking proficiency, women living in rural areas, and other under-served women.
- National Family Caregiver Support Program (NFCSP): AoA’s NFCSP provides grants to fund a range of supports that assist family and informal caregivers, many who are older women, to care for their loved ones at home for as long as possible. The NFCSP includes five basic system

components: information; access assistance; counseling and training; respite care; and supplemental services. These caregivers are the backbone of America's long-term care system.

LGBT Elders

- National Resource Center on LGBT Aging: Since 2010, AoA has supported the U.S.'s first national resource center to assist communities in providing services and support to lesbian, gay, bisexual, and transgender older individuals. It offers training to service providers and LGBT agencies nationwide and educational tools to LGBT older persons. For more information, visit: <http://lgbtagingcenter.org/>.

Native American/Native Hawaiian and Alaskan Native Elders

- Native American Nutrition and Supportive Services: The OAA supports a broad range of services to older Native Americans, including adult day care, transportation, congregate and home-delivered meals, information and referral, personal care, help with chores, and other supportive services.
- Native American Caregiver Support Services: The OAA supports eligible Tribal organizations to assist family and informal caregivers of Native American, Alaskan Native, and Native Hawaiian elders. This program, which helps to reduce the need for costly nursing home care and medical interventions, is responsive to the cultural diversity of Native American communities and represents an important part of each community's comprehensive services.

Question 3. How has your Government informed older persons about MIPAA, and how are older persons participating in the implementation of MIPAA including in decision-making about MIPAA implementation?

The tenets of MIPAA on ensuring the rights of older persons, promoting their engagement in community and civic life, and protecting their dignity and well-being are enshrined in the Older Americans Act, which provides the authority for the federal aging programs and policies. In the ongoing management of its programs and strategic planning process, HHS/ACL is guided by a set of core values in developing and carrying out its

mission. These values include listening to older people, their family caregivers, and ACL partners who serve them; responding to the changing needs and preferences of our increasingly diverse and rapidly growing elderly population; and producing measurable outcomes that significantly impact the well-being of older people and their family caregivers.

The U.S. Congress periodically reauthorizes the Older Americans Act, and as part of the process, ACL seeks input from older adults, their families and caregivers, to hear directly from stakeholders what improvements they would like to see to the nation's aging programming and policies. Leading up to the current reauthorization, ACL conducted nationwide listening sessions, which allowed for the views of thousands of older adults and their families to offer input in the principles developed to guide the Administration's reauthorization proposals.

The White House Conference on Aging

Additional opportunities for direct engagement and public input concerning the rights of older persons have been made possible with this year's White House Conference on Aging. Every ten years, the White House convenes a Conference on Aging to review progress on aging programs and policies and shape new focus areas for the future. This year's Conference addressed the following topics: 1) elder justice; 2) healthy aging; 3) long-term services and supports; and 4) retirement security.

The 2015 White House Conference included a series of regional forums to engage with older Americans, their families, caregivers, leaders in the aging field, and others on the key issues affecting older Americans. The regional forums were co-sponsored by AARP and co-planned with the Leadership Council of Aging Organizations, a coalition of more than 70 of the nation's leading organizations serving older Americans.

The following activities are highlights from this year's White House Conference on Aging:

- White House Conference on Aging Elder Justice Forum: On June 16, 2015, the White House hosted an expert stakeholder summit on elder justice to bring together leading policymakers, private foundations, older adults, and victim services professionals to identify ways to improve national and local responses to elder abuse, neglect, and exploitation.

- Promoting Equal Futures across the Lifespan: In May 2015, the White House Council on Women and Girls, with the Social Security Administration, the U.S. Department of Health and Human Services, and the White House Conference on Aging hosted a listening forum of expert stakeholders to identify unique barriers impacting older women in the U.S. as a result of age and gender discrimination, and reported new ideas for improving how the federal government's work on women's policy issues can include older women's concerns.
- Roundtable Discussion on Violence against Older Women: In June 2015, the White House Council and Women and Girls and the Vice President's office convened a roundtable discussion of leading advocates on domestic violence, sexual assault, and stalking. Participants explored how organizations working to end violence against women can support older victims. The HHS Assistant Secretary for Aging, Kathy Greenlee, has been a central player in these discussions.

Question 4. What impact has MIPAA implementation had on equality and non-discrimination of older persons?

Practically all U.S. government policies and programs on older persons can be linked to various aspects of the MIPAA. Our policies and programs are geared toward having older persons treated on an equal basis with others, through protections such as the Age Discrimination Act and the Age Discrimination in Employment Act, the Americans with Disabilities Act, and most recently the Elder Justice Act. Specifically, these provide protections against discrimination based on age and disabilities in federal programs; in employment; and against abuse, neglect, and exploitation. They are focused on affording equal access to participate fully in society free from discrimination, as well as to removing barriers to remain productive members of society's mainstream. Most recently, President Obama implemented a Community Living Initiative that charged federal agencies to review programs and policies to enhance community living. As a part of this initiative, we are working across all aspects of government to remove barriers and to enhance the ability of individuals of all ages to live independently in their communities.

Question 5. What impact has MIPAA implementation had on the fulfillment of the rights of older persons to an adequate standard of living?

Since its passage in 1965, the OAA has a mission to advocate for rights of older persons, which includes support for an adequate standard of living. Specifically, the vision expressed in the OAA for older individuals includes: 1) an adequate income at retirement; 2) the best possible physical and mental health; 3) suitable, affordable housing; 4) appropriate community based services to keep them in their homes; 5) opportunity for employment without discrimination; 6) retirement with dignity and honor; 7) participation and contribution to civic, cultural, educational and recreational activities; 8) access to transportation; 9) benefit of research that can sustain and improve health and happiness; and lastly, 10) freedom, independence, and free exercise of individual planning and management of their own lives. Title I of the OAA is seen by the U.S. aging network as a “bill of rights” for older people, as it includes the aspirations of policymakers and programs designed to help meet older persons’ basic needs, and to promote their maximum independence in society, such as:

- Nutrition programs to reduce hunger and food insecurity; promote the socialization of older individuals; and promote their health and well-being, including requirements for states to provide assurances that preference will be given to providing services to older individuals with the greatest economic and social need.
- Health programs, including Chronic Disease Self-Management Programs (CDSME) programs to provide education and tools to help older persons manage chronic conditions including diabetes, heart disease, arthritis, HIV/AIDS, and depression, and to avoid falls and injury and better manage their medications.
- In 2010, the U.S. State Department’s Bureau of Population, Refugees, and Migration (PRM) supported research on the physical and mental health needs of the displaced, with a focus on Georgia. Older adults are often overlooked in humanitarian emergencies, and their physical and mental health conditions are poorly measured. In Georgia, the percentage of the population 60 years of age or older is on an upward trend, while there is a declining trend in the number of children. The objectives of the study were to: 1) develop, pilot, and validate an instrument to measure the physical and mental health status of displaced older adults aged 60 or older in Georgia; 2) conduct a prevalence study of 900 older adult internally displaced persons (IDPs), comparing “protracted” populations with “shorter-term” displaced and urban with non-urban (also to

conduct a case study of older Chechen refugees to compare IDP and refugee experiences); and 3) promote guidelines for measuring the physical and mental health status of displaced older adults. For more information, please see: www.jhsph.edu/research/centers-and-institutes/center-for-refugee-and-disaster-response/publications_tools/GEORG.

- Programs to protect from fraud, including the Senior Medicare Patrol (SMP) Program, which gives Medicare beneficiaries information to protect themselves against fraud, errors, and abuse within the Medicare system. The program aims to empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report healthcare fraud, errors, and abuse through outreach, counseling, and education.
- Financial planning and retirement security programs, such as ACL's Pension Counseling and Retirement Planning projects have helped older adults obtain information about their retirement benefits and negotiate with former employers and pension plan administrators for due compensation. Monetary recoveries have helped people achieve and maintain financial security. HHS/ACL currently funds six regional counseling projects covering 29 states and a National Pension Assistance Resource Center.

2015 marks the 50th anniversary of not only the OAA, but also Medicare, and the 80th anniversary of Social Security, programs that are critical for promoting the rights of older adults.

Social Security and Medicare:

- Social Security is one of the most important and successful programs ever established in the United States, and we are committed that it remains solvent and viable in the future. We aim to ensure that any reforms will protect retirement security for the most vulnerable, including low-income seniors, and maintain the robust disability and survivors' benefits that help families after they have paid into the system. The United States has initiated the *myRA* program, a new type of savings account that provides additional pathways for Americans to build their nest eggs. We have also called for new rules to require financial advisors to put their clients' interests before their own, so as to ensure that all who responsibly prepare for retirement receive the best advice possible.

- We are committed to expanding access to health care to all our citizens and as such, have made efforts to strengthen and protect our social and health care programs: Medicare for the elderly and disabled, and Medicaid for low-income individuals and families. Under the Affordable Care Act (ACA), Medicare beneficiaries have saved billions of dollars on prescription drugs and have seen no increase in rates since 2013. Additionally, Medicare beneficiaries no longer have to pay cost-sharing for preventive services, and nearly nine million individuals have enrolled in coverage in state-run Medicaid programs since October 2013.

Question 6. Please provide examples of best practices from a human rights perspective identified by your Government in the implementation, monitoring, review, and appraisal of MIPAA.

Please see our responses to Questions 1-5. The policies and programs described there constitute best practices.

Question 7. Please provide information about the main challenges (such as institutional, structural, and circumstantial obstacles) faced by your Government at the various levels of government (communal, provincial, national, etc.) to fully respect, protect, and fulfill the human rights of older persons in the implementation of MIPAA.

The U.S. government is proud of its commitments to promoting the rights of older persons in this country through deeply embedded, historic and widespread policies, programs, and acts of legislation, including the OAA, Medicare, Social Security, and the Americans with Disabilities Act, to name only a few. Globally, more efforts are needed to raise awareness of the concerns of older persons. The United States works to raise the visibility of older persons across existing human rights platforms. For example, HHS Assistant Secretary for Aging Kathy Greenlee has spoken about the concerns of older women, including violence and financial exploitation, at past sessions of the Commission on the Status of Women, Commission on Social Development, and Human Rights Council. At the 2014 and 2015 sessions of the UN Open-Ended Working Group on Ageing, we recommended actions member states can take in UN fora on behalf of older persons. We think these courses of action offer the most effective means to outline progress to date; identify what remains to be done; and suggest best practices to tackle remaining challenges in a timely way.

- Member states can insert language highlighting older persons' concerns and offering practical solutions into UN resolutions, outcome documents, and joint statements. We are pleased to see increasing numbers of references being proposed for UNGA and ECOSOC subsidiary body resolutions – including the Human Rights Council, Commission on the Status of Women, Commission for Social Development, and Commission on Population and Development – most often with broad support.
- Language on overarching objectives and indicators related to ageing can be written into the strategic plans of the UN funds and programmes and other UN organizations. This would encourage UN entities to develop policies and programs supportive of older persons. ILO, UNDP, UNFPA, UN Women, UNAIDS, and WHO are entities whose work can potentially benefit older men and women.
- In submitting reports and appearing before treaty bodies, member states can document their efforts on behalf of older persons. The treaty bodies in turn may discuss these issues in their concluding observations, as appropriate. Bodies whose work may be most relevant to older persons include the Human Rights Committee; the Committee on Economic, Social, and Cultural Rights; the Committee on Elimination of Discrimination Against Women; and the Committee on the Rights of Persons with Disabilities.
- Several existing Special Rapporteurs can be encouraged to focus more attention on older persons. These include the Special Rapporteurs on adequate housing, extreme poverty, health, and violence against women – some concerns which are likely to increasingly affect individuals as they age.
- Member states may wish to use the Universal Periodic Review (UPR) process to generate country-specific observations concerning older persons. The United States reported on programs related to the rights of older persons in our 2015 UPR submission.