# CASE STUDIES

Innovations from the Field: AAAs Work to Improve Diversity, Equity and Inclusion

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Introduction

The issues of racial equity and inclusion moved to the forefront of the national conversation in recent years, largely due to the disproportionate impact of COVID-19 on older adults of color, increases in racially motivated attacks on Asian Americans, and the greater attention paid by the public to police killings of Black Americans. Due to systemic racism, other forms of discrimination and historical inequities, there is a strong correlation between race and ethnicity with both lower socioeconomic status and poorer health; these disadvantages are experienced by some populations within the lesbian, gay, bisexual, transgender and queer (LGBTQ) community as well. Members of racial, ethnic and other minority groups often have worse health outcomes and more unmet social needs compared to their majority peers.1,2 Area Agencies on Aging (AAAs) have, since their inception, targeted older adults who have the greatest socioeconomic need to provide a broad range of supportive services that address the social determinants of health.

While AAAs have always been deeply engaged in addressing the needs of older adults from historically marginalized and underserved communities, many are bringing new intentionality to their diversity, equity and inclusion (DEI) efforts. In a February 2021 USAging poll of AAAs, 39 percent of respondents reported that they were implementing strategies to address equity and inclusion within their organization and staffing, and 54 percent were implementing such strategies with regard to their service provision. To learn more about what these internal and external-facing initiatives involved, USAging interviewed seven AAAs.

These examples are not a complete picture of AAA involvement in this space and there are hundreds of additional examples we could share. This publication contains a point-in-time snapshot illustrating the activities of AAAs at the time this survey was conducted. There is much work to do. Our goal is to provide a range of examples so that no matter where an agency is at the moment, they can find ideas to evolve their own work to promote culturally competent services and equitable access for all.
San Francisco Department of Disability and Aging Services: Standing Up for Racial Equity and Anti-Racism

San Francisco, CA
www.sfhsa.org/about/departments/department-disability-and-aging-services-das

The San Francisco Department of Disability and Aging Services (DAS), the AAA that is housed within the San Francisco Human Services Agency (SFHSA), coordinates services for San Franciscan older adults, veterans, people with disabilities and caregivers to maximize safety, health and independence. San Francisco is a diverse city with approximately 34 percent of the population of Asian/Pacific Island descent and, in the metro area, the highest percentage of adults who identify as LGBTQ in the U.S.

The San Francisco Dignity Fund, approved by voters in 2016, is a protected funding stream for social services to support older adults, people with disabilities and caregivers. As part of the initial needs assessment, DAS undertook equity analyses\(^3\) to evaluate and compare service use among demographic groups to identify disparities in service provision and access. In 2018, DAS published equity analyses focusing on older adults and people with disabilities from communities of color and those who identify as LGBTQ. In 2021, San Francisco DAS surveyed LGBTQ older adults and conducted listening sessions with communities of color to gather information about how COVID-19 has impacted these communities. These data were used to determine how to allocate resources and address unmet needs. The strategic planning process for the AAA\(^4\) is aligned with the Dignity Fund to ensure that Older Americans Act (OAA) services reach those with the greatest need.

In fall 2020, the San Francisco DAS Commission passed “A Resolution to Advance Racial Equity and Condemn and Combat All Forms of Discrimination and Racism.”\(^5\) According to Executive Director Kelly Dearman, this resolution put into words the policies, procedures and actions that were already underway within the department. “We felt strongly that it was important to take a stand on this in light of all the racial hate and violence in particular, and also hate and violence against the LGBT+ community and the Asian population. San Francisco is a city that appreciates that and wants us to put it in the forefront, and in that way we’re really lucky. It was important for government agencies and nonprofit organizations to stand up against hate and be able to back it up.” The resolution addressed the city’s internal and external initiatives to advance equity.
Advancing racial equity is a core value of SFHSA. The agency is committed to creating a culture of inclusion and belonging for all employees and to enacting policies that address workforce disparities. Key focus areas include staff recruitment and hiring, including review of job descriptions; staff leadership development and promotion; and organizational culture. DAS staff participate in training to understand and work within and across communities of culture and color. DEI learning resources include internal newsletters, lunch-and-learn sessions, external speakers and other resources. One activity was a 21-day challenge which provided staff with reading materials to reflect on or discuss each day. By providing training and learning opportunities in both group and independent formats, San Francisco DAS found that staff can engage with the topics in different ways.

San Francisco DAS continually reviews progress and outcomes of its DEI work and adjusts course as needed. Partner agencies and providers play an important role in reaching underserved populations. One success has been the openness and willingness of its partner community-based organizations (CBOs) to address equity and access. The San Francisco AAA has built strong relationships with several small CBOs that provide culturally responsive services to hard-to-reach populations. Some of these smaller CBOs lack the infrastructure to increase their capacity. DAS seeks to provide technical assistance to these CBOs for grant application and reporting requirements, organization of internal systems and other support to ensure the CBO can fulfill government requirements and receive funding for their critical work.

San Francisco DAS reports frequent requests from other AAAs across the country looking to learn more about the agency’s DEI efforts.

Partnering to Increase Safety and Social Engagement of Asian Americans

Harassment and violence aimed at San Francisco’s Asian American and Pacific Islander communities increased during the COVID-19 pandemic. DAS partnered with Self-Help for the Elderly, a community-based organization which began serving older adults in Chinatown in 1966, to provide an escort service for older Asian adults. Through this service, an older adult can request an escort for their trip to the pharmacy, a grocery store or other activity. More than 1,000 unique escorted trips have taken place, allowing Asian older adults to move about the community more safely and confidently. New groups, such as walking clubs, have formed as a result, thereby increasing social engagement and combating social isolation.
Iowa’s Connections Area Agency on Aging serves a largely rural service area with residents who are predominantly White and speak English as their first language; however, there is also a substantial and growing Spanish-speaking population.

To date, the AAA has served Spanish-speaking consumers with the assistance of contracted language translators. AAA staff have found that, at times, using a translator can impede referrals and service provision by interrupting the easy flow of conversation. Connections AAA plans to hire a bilingual service navigator to help the agency communicate more effectively with the Hispanic population in its planning and service area. This would enhance the ability to communicate with Spanish-speaking consumers in real time and help the agency build trust with this population. The major challenge that Connections AAA has faced in adding a bilingual service navigator is a shortage of applicants.

“\nThe best thing you can be as a AAA is flexible and continue to improve. Our staff are continually identifying needs, assessing and trying new things to serve our PSA the best we can.”

Kelly Butts-Elston, CEO, Connections AAA

A second initiative of Connections AAA is diversifying the meal options available through its congregate nutrition program. All six Iowa AAAs are implementing the “Iowa Café” program in which congregate meals are provided at local restaurants. This model offers low-cost meals that provide adequate nutrition for older adults and focuses on geographic areas that lack congregate meal service locations. Connections AAA is calling its model the “Connections Café,” and one goal is to partner with restaurants serving Latin American cuisine and meals that appeal to a broader range of cultural and dietary preferences. During the COVID-19 pandemic, a challenge was the reluctance or inability of restaurants to resume previous staffing levels. Funding for the Connections Café model is provided by COVID-19-relief funding via the federal OAA.

Both the hiring of a bilingual service navigator and the Connections Café model are part of the AAA’s DEI initiatives. The executive staff of Connections AAA is committed to exploring DEI options, making continuous systemic assessments, and enhancing its planning and services delivery. While the hiring and staffing issues may be challenging, Connections AAA is committed to serving its participants in culturally appropriate ways.
The mission of the Southern Maine Agency on Aging (SMAA) is to empower older adults, adults with disabilities and caregivers to reach their fullest potential. Agency leadership believes that the AAA’s work to meet the goals of the OAA—specifically, serving older adults with the greatest economic and social need—can be viewed as social justice in action. SMAA is implementing several external and internal measures to become more culturally sensitive and create sustainable change to improve equity and inclusion.

For SMAA, as for AAAs everywhere, responding to the COVID-19 pandemic required swift action and a move away from business as usual. In particular, the urgency of reaching older adults quickly as vaccines became available forced everyone into action—“there was no time to think or over-analyze, just do!” SMAA reached out to partners and communities that it had and had not worked with previously to help ensure equitable access to COVID-19 vaccines. SMAA formed new partnerships with Catholic Charities Immigrant and Refugee Services and the Unified Asian Communities in Greater Portland. Through conversations, SMAA learned how to serve its consumers in culturally appropriate ways, such as providing private vaccination clinics for certain communities. Together with their health care partner, Northern Light Homecare & Hospice, SMAA considered the best approach to reach people unable to leave their homes. With Northern Light, SMAA developed videos in five languages about receiving vaccination at home. These videos were designed to be easily viewed on cell phones and shared online.

Four Best Practices for Working with Older Adults from Historically Marginalized or Underserved Communities

1. Adopt person-centered policies.
2. Commit to disaggregated data collection to inform planning, evaluation and resource allocations.
3. Build relationships with diverse communities.
4. Provide language access.

Source: National Consortium on Aging Resources for Seniors’ Equity
As trust grew between SMAA and its partners and communities, an opportunity to improve and provide additional supportive services followed. For example, due to the stronger relationship between the AAA and a partner, SMAA learned that traditional home-delivered meal options were not suited to the dietary preferences of some consumers. As a result, the agency’s nutrition director expanded meal options to include halal meals. SMAA partnered with senior housing to deliver culturally appropriate meals from restaurants recommended by residents, which were funded by temporary flexibilities in the use of OAA funds during the pandemic. The nutrition program became a conduit for introducing consumers to other agency services, such as conducting balance checks or other assessments during meal delivery or having a benefits counselor visit the meal site. SMAA is currently partnering with the Maine Council on Aging, which received funding to host focus groups with older adults from underserved communities, to learn more about their needs.

The board and the organization’s advisory council exhibit a high level of commitment and engagement, as well as a great desire for training and education. The SMAA executive team, board members and advisory council drew on resources from the National Consortium on Aging Resources for Seniors’ Equity, in particular the best practices for working with older adults, to establish a DEI committee for the agency. This action-oriented charter serves as an accountability structure to establish metrics related to each of the four areas of best practice (see sidebar on the previous page). As part of this effort, SMAA developed a demographic dashboard which is updated and reviewed quarterly. Through the dashboard, staff track demographic data on current and new participants and the programs and services that they access. This allows staff to see which populations are being served—or not—and helps them develop an action plan.

Megan Walton, CEO of SMAA, is also committed to greater employee engagement, empowerment and education. “Just as we’re doing work externally, we also need to build a strong culture and community of belonging internally,” says Walton. To break down hierarchical structures, a cross-program team of 11 employees, called the “One SMAA” team, meets regularly to discuss needs, issues and strategies. An ongoing challenge is centering community voices in all decision-making efforts. SMAA’s leadership approaches the entire process as creating long-term sustainable change. Like other AAAs, SMAA often faces funding constraints, but SMAA considers this internal and external work to improve diversity, equity and inclusion as essential investments that must be made to ensure it is meeting the goals of the OAA.

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Trellis uses the following understanding of equity:

The term ‘equity’ refers to fairness and justice and is distinguished from equality: Whereas equality means providing the same to all, equity means recognizing that we do not all start from the same place.


For older adults and their caregivers, inequities are the by-product of a lifetime of inequities and inaccessibility of resources and systems. Trellis acknowledges these imbalances.
Trellis: Taking a Multi-Faceted Approach to Equity

Arden Hills, MN
trellisconnects.org

Trellis serves as the AAA for the seven-county Twin Cities metro area of Minneapolis–Saint Paul, MN. While the agency felt it had a “solid track record” in its OAA Title III programs and services in reaching indigenous elders and caregivers and people of color, who represented 30 percent of Title III service recipients, agency leadership and staff felt they could be doing more to support older adults who have experienced lifelong disadvantages and discrimination.

In 2019, Trellis conducted a strategic planning process and identified advancing equity as one of the agency’s four core strategies. Trellis began an equity analysis to better understand who it was not reaching in the community with Title III funds, why and what the AAA could do about it. During this time, the spotlight shone on Minnesota due to the murder of George Floyd only reinforced the need for this equity advancement. Trellis re-committed to changing the way it works, both internally and externally, to address systemic issues of racism and inequity and to be a leader in this area.

The board and leadership of Trellis developed an integrated DEI roadmap with the aim to become an equitable organization. The roadmap goals include: develop capacity for transformation among board and staff, increase diversity among staff and board members, align communications with DEI goals and complete an equity assessment of OAA funding. Trellis engaged consultants to work with its board and human resources department to develop the DEI roadmap and action plans toward each goal. Trellis intentionally reached out to consultants with roots in the diverse communities the agency serves. These consultants continue to help Trellis focus on communication strategies and data analytics to reach their goals. A critical component of this work to address equity, diversity and inclusion is that board and staff see it as transformational rather than transactional. This means that a focus on DEI is reflected in every aspect of the agency’s work, from the board of directors to its workforce as well as in the way staff interact with the communities they serve and will produce long-lasting improvements to access and health equity.

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The term ‘equity’ refers to fairness and justice and is distinguished from equality: Whereas equality means providing the same to all, equity means recognizing that we do not all start from the same place.


For older adults and caregivers, inequities are the byproduct of a lifetime of inequities and inaccessibility of resources and systems. Trellis acknowledges these imbalances. Adjustments meant to address these imbalances are ongoing, requiring us to identify and overcome intentional and unintentional barriers arising from bias or systemic structures.
In addition to working with consultants for the equity analysis, Trellis learned from the previous work of other AAAs. Trellis reviewed the needs assessments and demographic analyses conducted by the San Francisco Department of Disability and Aging Services and used aspects to model its own analysis, *Equity Assessment on Access to Title III Services for Native Americans and Minority Older Adult Populations*,¹⁰ which was released in June 2021.

The introduction to the report states: “The Older Americans Act Title III funds that Trellis administers are intended to help low-income and minority adults age in their communities. The results of this assessment show that broader inequities in income, health, housing and more make our work to fund Title III services a critical first step in helping Black, Indigenous, and People of Color (BIPOC) elders age in their communities—but only a first step.”

Trellis also aims for more diversity on its board, advisory committees and within its workforce, and has made concerted efforts to reach and involve community leaders of color in its efforts. Trellis has added new staff to its Outreach Team who represent the diversity of the agency’s client base. Trellis reasons that if the communities it serves can see themselves reflected in members of the Trellis team, they will feel welcomed and safe in asking questions and accessing services.

Trellis continues to develop tools to evaluate the knowledge, growth and training around its DEI efforts. Trellis has also created an internal diversity action council, a staff initiative that circulates a newsletter about in-house DEI information, invites speakers and identifies additional areas for training. The AAA also invites speakers to host workshops to discuss issues on wide-ranging topics such as gender inequality and ageism. While Trellis has historically provided DEI training for staff, it is now more intentional about linking the training to the mission of the agency.

In accordance with recommendations from the equity assessment, Trellis is revising the application process for vendors responding to requests for proposals to make the process more transparent and improve access to funding opportunities. This has resulted in an application process that has been simplified by using plain language, offering alternative ways to access the application, and providing clear information about funding priorities and expected pay rates. In addition, Trellis is expanding its outreach efforts to raise awareness of funding opportunities to more organizations, particularly those who serve BIPOC and low-income individuals.

“We can’t think about this in a siloed manner, or as short-term work that only certain revenue streams support. We need to think big to become an equitable organization. We have to approach this work as being transformational work, and not just transactional.”

Dawn Simonson, President and CEO, Trellis
The Aging and Independence Services (AIS) Group of the Atlanta Regional Commission (ARC) is the AAA for the 10-county Atlanta metropolitan region. This region is diverse racially and economically, and access to health care, transportation and other social needs varies greatly across and within counties. Researchers at ARC noted great differences in life expectancy across the region; for example, residents of one ZIP code live, on average, 24 years longer than residents of a ZIP code just seven miles away.

ARC has developed the Live Beyond Expectations (LBE) framework, led by the AIS group, to identify and address inequities that result in disparities in life expectancy. Year one of the framework focused on research and outreach. Using a place-based approach, ARC researchers analyzed social and economic factors that impact life expectancy and produced county fact sheets which detail their findings at the census tract level. Scatter maps have been another useful tool to visualize disparities and identify target areas. Armed with this knowledge, ARC is engaging with service providers and residents to implement focused interventions in the places where gaps exist.

These targeted interventions address the social needs of individuals; impacting the community-level social determinants of health takes time. Years two through five of the framework focus on implementing place, policy and practice interventions, focusing on locations where residents experience the most inequity, advocating to advance policies that promote equity and providing services that address unmet needs. Some of the challenges that ARC anticipates include keeping partners engaged for the long-haul and identifying the most appropriate outcome measures when change in life expectancy will be slow and incremental. Currently, yearly progress is tracked with four key metrics: life expectancy, quality of life, financial stability and health care access. County snapshots will be updated every five years.

The AAA has dedicated staff for the LBE initiative, including one researcher supported by OAA administrative funds. This position is critical for the OAA-mandated planning and implementation activities. ARC is hosting a Lead for America fellow whose time is fully dedicated to LBE. Two additional staff members in the AAA have part-time responsibilities for this strategic plan.

Reducing disparities in life expectancy requires addressing issues of equity. Increasing the life expectancy of people in disadvantaged communities will likely take decades and requires intentional interventions in factors as disparate as public health, the environment and education.

...while ARC’s work may not impact all of these factors, we are committed to identifying which factors we can influence—and how we can make a difference.

This plan is the first phase of a long-term, agency-wide commitment to provide new support and resources to existing efforts, coordinating processes for maximum impact and innovating where there are gaps. When we pool our strengths and knowledge, we can create substantial change, together.

Source: Live Beyond Expectations Regional Strategic Plan Framework 2020-2025
Gwinnett County is home to 142,057 people 60 years or older.

The Provider Network serves 1,930 clients* in Gwinnett County.

### Census Tract Zip Code Area Life Expectancy Number of Older Adults Number of Clients

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<td>1</td>
<td>30047</td>
<td>Lilburn</td>
<td>73.7 years</td>
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<td>2</td>
<td>30045</td>
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<td>74.4 years</td>
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<tr>
<td>3</td>
<td>30518</td>
<td>Rest Haven</td>
<td>74.5 years</td>
<td>728</td>
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*Clients include those receiving Material Aid in FY21, Respite Care in FY21, Congregate Meals in FY20, Personal Care Services in FY21, Homemaker Services in FY21, or Transportation Services in FY20.

**Data Sources: DDS and ACS 2019 5-year Estimates**

This Provider Network Client map displays the location of senior centers, service recipients and census tracts with lower life expectancy. It is a useful visual tool to better understand if services are reaching those with the greatest need in the county. Source: Atlanta Regional Commission.

"There is nothing more rewarding or more important than this work. It is an opportunity to make a difference not only to current but also future clients."

Mary Blumberg, Manager, Strategic Planning and Quality Unit

In addition to the LBE Strategic Plan efforts, ARC has developed an internal steering committee called IDEA (Inclusion, Diversity, Equity and Anti-Racism) whose members include a representative from each group within ARC. They have begun regular staff learning opportunities such as a monthly IDEA newsletter and optional book club with external facilitators. The committee has also engaged a consultant to assist with the review of its organizational structure and operations.

ARC has built upon research linking social determinants of health with life expectancy to identify geographic areas where disparities exist. The agency leverages this information to develop data trackers and produce fact sheets and scatter maps, which are used to engage partners and policymakers in their work. One year into this five-year strategic plan for LBE, ARC is committed to staying the course to reduce disparities and create opportunities for all Atlanta residents to live healthier, longer lives.
The Washington County Disability, Aging and Veteran Services (DAVS) is a part of the Health and Human Services Department and serves suburban and rural areas on the west side of Portland, OR. The agency provides programs and services to improve the quality of life for Washington County's older adults, veterans and people with disabilities. DAVS prioritizes diversity, equity and inclusion in its area plan process and agency operations to ensure culturally responsive and equitable services.

As part of the area plan process, which AAAs conduct every four years, AAAs undertake community needs assessments and outline their future activities. DAVS set out to create an area plan that addressed disparities and culturally specific gaps. Together with its advisory council, DAVS formed an ad-hoc group to guide the agency's needs assessment. Over the course of four planning meetings, it framed the community needs assessment survey with the Equity and Empowerment Lens, developed by neighboring Multnomah County (see sidebar on the right) and identified priority populations. Phone interviews and surveys were conducted with older adults in the AAA's service area to better understand the needs of and current gaps in service provision to communities of color. DAVS was intentional about its sampling strategy and oversampled underrepresented groups and was successful in reaching a more diverse client base in 2020 compared with 2016. The 2016 area plan needs assessment survey was offered only in English and Spanish, and 92 percent of respondents were non-Hispanic White. The 2020 survey was offered in several languages and respondents were able to select their ethnicity from a much larger list of choices. Sixty-seven percent of respondents identified as White and non-Hispanic, and six percent identified as LGBT+. The larger range of languages and expanded list of ethnicities has helped to “unhide people” and gives the agency a more accurate representation of who lives in its community.

The needs assessment uncovered areas where DAVS would like to expand its evidence-based health promotion programs, specifically in managing chronic pain, diabetes and HIV/AIDS. The agency is developing plans to support long-term HIV survivors when a flare up occurs and the individual requires short-term assistance as they heal.

**Equity and Empowerment Lens**

The Equity and Empowerment Lens (with a racial justice focus) is a transformative quality improvement tool used to improve planning, decision-making and resource allocation leading to more racially equitable policies and programs. At its core, it is a set of principles, reflective questions, and processes that focuses at the individual, institutional and systemic levels by:

- deconstructing what is not working around racial equity;
- reconstructing and supporting what is working;
- shifting the way we make decisions and think about this work; and
- healing and transforming our structures, our environments, and ourselves.

Source: Office of Diversity and Equity of Multnomah County, OR
In addition to revamping the area plan, another priority area for DAVS is developing culturally specific contracts to attract a more diverse provider applicant pool and to require all providers to state how they would meet the cultural needs of diverse groups. However, systemic procedures often prevented this. For example, in Washington County, to receive a contract for nutrition services, the provider had to be able to provide both congregate and home-delivered meals. This requirement had the unintended consequence of disqualifying providers who could serve culturally specific meals in congregate settings, but not provide home-delivered meals. Washington County has removed this requirement so DAVS will have the flexibility to contract with additional nutrition service providers beginning in 2022.

DAVS also took advantage of the flexibility of the OAA funding provided during the COVID-19 pandemic to create new programs and partnerships that reflect DEI principles. These short-term flexibilities allowed DAVS to offer more culturally relevant nutrition services by varying the type of nutrition services they could offer. This allowed the agency to increase the funding it provided to an existing provider partner, Immigrant and Refugee Community Organization, which then provided enhanced food boxes that included culturally diverse ingredients and meals aligned with consumer preferences, as well as gift cards for families to select and buy their own groceries. As a result of being in an emergency response hub during the pandemic, DAVS made new and strengthened existing connections with other CBOs such as the Muslim Educational Trust, Title VI Native American Aging Programs, Asian Health & Service Center, Centro Cultural and other culturally specific organizations.

In addition to building trust with and expanding service provision to these communities, DAVS is working with partners to translate program materials. In the past, the agency translated materials when requested. Now the agency has a goal to provide translated materials concurrent with its English-language publications. The county identified and has prioritized for translation the most common languages spoken by consumers with limited English proficiency in its area—Spanish, Russian, Arabic, Korean, Vietnamese, Chinese and Somali.

Washington County Health and Human Services has also started an equity work group which hosts trainings provided by a consultant on topics such as implicit bias and microaggressions. Coaching was provided for supervisors on addressing equity issues in the workplace. The equity workgroup at DAVS is developing a definitions guide to help ensure that staff can work from the same understanding of terms. The County Office of Equity and Inclusion and Community Engagement is holding internal and external cultural and educational events to commemorate Asian American and Pacific Islander Heritage Month, Pride Month and Black History Month. These events create opportunities for education and healing spaces. Events are staff driven along with some community involvement.

Through these various DEI efforts, Washington County is exemplifying leadership that it hopes will result in attracting a broader pool of job candidates who are committed to reducing inequities and health disparities. DAVS is committed to relationship-building which is an elemental part of the growth and change process to end disparities, as well to nurture the commitment to continued creation of coalitions and community partnerships.

“The organizations we’re developing relationships and contracts with have been doing this work and serving the community for decades and with little support from government. DAVS, like many government entities, has been able to remove some of the structural barriers to procurement, as well as fund work that doesn’t neatly fit into OAA or other federal programs. We’re starting to be able to do the right things, but we have a long way to go.”

Rebecca Miller, Director, Washington County Area Agency on Aging
Wayne County Department of Aging and Youth: Demographic Dashboards Help Identify Gaps in Service Provision

Lyons, NY
ny-waynecounty.civicplus.com/157/Aging-Youth

The Wayne County Department of Aging and Youth is the AAA in this rural, upstate New York county where the population is 95 percent non-Hispanic White. Older adults outnumber children and represent the fastest-growing demographic segment, with a younger generation that is becoming more racially diverse. Wayne County uses demographic dashboards and conducts outreach to both local partners and potential job candidates to ensure it is meeting the needs of all consumers.

The New York State Office for the Aging provides New York AAAs with census-derived demographic information about their planning and service areas. AAAs track service and demographic data in a state data system to ensure that the demographics of service recipients reflect the area population overall. These comparisons are made not just on race, but also other statuses such as having a low income, living alone and/or in a rural area, frailty and disability. Wayne County reviews and reports on its demographic dashboard quarterly to identify any gaps in service provision. To date, the state does not require tracking LGBT+ status but the agency is looking to add this to its dashboard. In addition, Wayne County AAA has begun to break this demographic and service data down to the ZIP code level. This disaggregation of data will allow the agency to identify and target any areas that may be underserved.

Wayne County AAA faces major challenges to increasing the diversity of its workforce. The county civil service hiring policy mandates that candidates must live in the county and that only the three applicants who score highest on civil service exams can be offered positions. With a fairly homogenous population in Wayne County, there are few non-White applicants, and it is challenging to convince people from out of the area to consider relocating to a rural small town for work. Furthermore, the job application process is cumbersome and not well understood by many potential applicants, regardless of background.
To address these challenges, Wayne County conducts outreach to bring in social work students from historically marginalized backgrounds for a professional mentoring program sponsored by the agency’s mental health department. By introducing master's and doctoral level interns to life in Wayne County, the agency hopes to increase the likelihood that interns would consider Wayne County for post-graduation employment opportunities. Another strategy to break down barriers to employment for applicants of all backgrounds is to disseminate information on how to apply for county jobs and to publicize test opportunities and dates.

A benefit of working in a small county-based agency is the strength of partnerships characterized by a high level of information sharing. The AAA partners locally with organizations and departments such as The Arc, public health, mental health, local social services, Child Protective Services and Adult Protective Services. The agencies serve on each other’s advisory groups and boards, and having these strong relationships allows the agency to keep other organizations apprised of AAA services, programs and waitlists. Another active partnership is with the Police Reform Initiative, which supports diversity and unity festivals and sponsors Dr. Martin Luther King, Jr. Day events with the Wayne County Agency for Racial Equality.

This agency works with the state data system to best serve older adults in its community. The AAA gauges its success on meeting its targets and is continually conducting outreach to ensure it is serving the individuals who need the agency’s services most.
Conclusion

AAAs are undertaking a variety of internal and external initiatives to ensure that access to services and programs is equitable, culturally responsive and accessible to those in need. Every community is different and there is no one-size-fits-all solution. However, each agency interviewed emphasized the importance of getting started, working with partners and not being afraid to make mistakes along the way. As agencies progress in this work, they are looking to strengthen their program evaluation to better demonstrate the impact their DEI efforts have on the health and wellness of their communities.

Each of the executives and staff members that we interviewed expressed a deep personal commitment to support the historically marginalized and underserved communities in their areas, whether they were in largely White rural counties or seeking to build partnerships with communities of color and culture in larger cities. These AAA executives involved their board members, staff and leadership teams in creating committees and establishing DEI guidelines to transform their organizations and expand their outreach to better identify and serve underrepresented populations.

Some of the common activities and initiatives shared by interviewees included:
- Developing DEI community plans, charters, needs assessments, and/or demographic dashboards for accountability and analysis
- Providing greater employee engagement, empowerment, education and training on DEI
- Simplifying the process to respond to RFPs and job applications to encourage a broader range of applicants
- Diversifying meal options to address cultural sensitivities and preferences
- Translating program materials into multiple languages and providing translators on staff for participants with limited English proficiency
- Building and expanding relationships with organizations that serve multicultural communities
- Using federal COVID-19-relief funds and OAA funding to support and expand this work

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References


