



Maine Council on Aging Introduction

130th Legislature's Joint Standing Committee on Health & Human Services

February 9, 2021

Greetings, Senator Claxton, Representative Meyer, and members of the Joint Standing Committee on Health & Human Services:

My name is Jess Maurer. I'm the Executive Director of the Maine Council on Aging (MCOA). The MCOA is a broad, multidisciplinary network of more than 100 organizations, businesses, municipalities, and older Mainers working to make sure we can all live healthy, engaged, and secure lives with choices and opportunities as we age in our homes and communities.

Established in 2012, the MCOA is a unifying force across sectors that is creating a new narrative about aging and older people in Maine with the goal of building local, statewide, and national support for the systemic changes needed to support our new longevity.

Consider, just a century ago, in just a century, our life expectancy has gone from less than 40 years to 76 today! We've just sworn in a 78 year old man to be our president, and a 73 year old woman leads our great state. These are not anomalies. Today, older people are living active, engaged, and productive lives long into their 80s, 90s and even 100s!

Maine has an incredible opportunity to lead the nation in building new systems that take full advantage of the "Longevity Era". We need new systems because, as we age, the systems that have always worked for us before, like two story homes, single passenger vehicles, and restrictive zoning, don't always work for us as our abilities and finances change.

How well we age is dependent upon how well our housing meets our physical needs, whether we can engage fully in all aspects of life when we can no longer drive, how well our communities are planned, and whether we can still earn a living to supplement our savings. It also depends upon whether we can access the kinds of care we need, if we need care.

The other thing that has come with this new longevity is a strong desire to change the way we live as we age. Today, most people want to age in their homes, and if they can't stay at home, they want to stay in their communities. To do this, though, we have to reimagine all of our systems – community planning, transportation, housing development, and care delivery systems.

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The problem is, we're not making much progress on these big systems changes, and in many ways, we're falling behind. The question is why?

We think the answer is partly because we see aging as personal, something that is happening only to me or to my parents; we see the problems that come with aging as individual, not collective problems. Of course, the best minds in Maine have not solved our workforce shortage, created a new transportation funding strategy, or found the resources to build all of the affordable housing we need, so surely we cannot expect a single person to be responsible for these challenges alone.

COVID-19 has also forced us to start a new conversation that is uncomfortable. We're beginning to explore how our own age-related bias – our own feelings about growing old, and the way we think about older people in later life – influences the policy decisions we make. Last year, we heard prominent law makers from around the country say older people would be willing to die to reopen the economy, and we saw hundreds of thousands of older people die, a majority of them in care facilities, while we argued about whether this virus is real.

Extensive national empirical research conducted by the FrameWorks Institute finds that most Americans hold unproductive and inaccurate thoughts about older people, and that they don't believe ageism is real. What we also know from decades of research, though, is that ageism is not only real, it is very bad for our health and leads directly to a lack of support for systemic change.

For instance, plenty of us have made jokes like, when I get too old to take care of myself, I want someone to take me out behind the barn and shoot me. We really are only joking, only this isn't funny. This message says I don't value my life if I'm dependent on others, and these feelings can transfer to my thinking about the value of others who are dependent, like people in nursing homes, who a Westbrook City Councilor said last year were only waiting to die.

Over the last nine years, the MCOA has supported many multi-sector conversations about aging in Maine, and has been building a transformational shared vision for how we collectively want to age. The [Maine Blueprint for Action on Healthy Aging](#) is the culmination of this work and is our guiding action plan. I urge you to read it if you haven't. As we continue to implement this plan, we're also shifting our focus to combatting ageism as a critical step to creating support for the systemic changes needed in Maine to support the vision in this plan.

While I'll come before you many times this session to ask you to consider structural investments that need to be made to solve the collective challenges older people are experiencing in Maine – challenges we cannot solve on our own, today I invite you to consider your own personal feelings about growing old, and how they might influence your thinking on these issues. This is work I'm doing, I'm asking my board to do, and we're asking our members and the media to do as well. It's the start of a deeper conversation we hope will lead to a brighter future for us all.

We look forward to working with this committee on bills that advance healthy aging, and encourage you to reach out to us if you would like to discuss any aging policy issues, or if you'd like to be a part of any of our efforts outside of the legislative session.

Finally, I invite you to join our bi-weekly Member and Partner COVID-19 meetings on Tuesday mornings at 8:00, and to join the Legislative Caucus on Aging meetings that are on the first

Monday of each month at 11:30. Thank you for your attention and good work on this committee.

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