

Age-Friendly Public Health: The Podcast

Addressing Ageism in the Community – October 2024

Guest: Jess Maurer, Executive Director, Maine Council on Aging

Host: Dr. J. Nadine Gracia, President & CEO, Trust for America's Health

Interview Transcript

[00:00:00] **Jess Maurer:** This is terrific work and it's very personal. We need to create more space and opportunity to talk about aging, period.

[00:00:14] **Dr. Nadine Gracia:** That's Jess Maurer, Executive Director of the Maine Council on Aging. I'm your host, Dr. Nadine Gracia, President and CEO of Trust for America's Health, also known as TFAH. Hello, and welcome to the fourth episode of Age-Friendly Public Health: The Podcast.

[00:00:31] This segment of the podcast addresses an important public health issue: ageism. Combating ageism has been noted as one of the four action areas of the Decade of Healthy Aging from 2021 to 2030 by the World Health Organization. Since 2021, TFAH has held an annual training on ageism as part of the Age-Friendly Public Health Systems Monthly Training Series.

[00:00:56] I'm excited to welcome our guest today, who has deep experience in working on this important issue. Our guest is Jess Maurer, the Executive Director of the Maine Council on Aging, also known as MCOA. Jess leads efforts to initiate and support data-informed policy change efforts through direct advocacy with federal, state, and municipal leaders.

[00:01:19] She also collaborates with coalition members and partners to convene processes and events geared toward action on key issues related to ageism and equity, housing and food security as these issues relate to older adults within the state. MCOA has committed to ending ageism in Maine by 2032. We are excited to learn from Jess about this commitment and the Leadership Exchange on Ageism initiative that is helping Maine's leaders take action on ageism.

[00:01:50] Jess, welcome.

[00:01:52] **Jess Maurer:** I'm so excited to be here. Thank you for having me.

[00:01:54] **Dr. Nadine Gracia:** Well, let's jump right in, Jess. What prompted you to start focusing on ending ageism in Maine? And what were some of the early programs and activities that you developed related to ageism?

[00:02:07] **Jess Maurer:** Well, I like to say COVID. COVID hit us over the head with a two-by-four.

[00:02:12] And we were a pretty effective advocacy organization, but only so far. And when COVID hit and we started hearing the rhetoric around the country, but closer to home, we had a city counselor in a pretty big town say we shouldn't count deaths in nursing homes because those people were only waiting to die.

[00:02:35] And so many other pieces that it finally sort of sunk in. And we had been doing a lot of work for many years on reframing aging, right? And so we are very connected to the FrameWorks Institute research about what Americans thought about ageism. And, you know, what we know from that, right, is that Americans don't actually think ageism is real, and if it is real, it's not as bad as other forms of bias.

[00:03:01] And so, you know, really, I mean, COVID just shined a light on that reality for us, and we knew we had to take action. So we started really with the FrameWorks Institute information, right? So we said, what we know from FrameWorks, particularly in relation to ageism, is that while Americans don't believe it's real, if you give them an example, a concrete example, right, it's not right for a 50 year old who's otherwise qualified for a job to not even get an interview because an employer thinks that person will be too expensive or won't get your technology will take too long to train- all of those things, by the way, we've heard from Maine employers directly- that if they understand that they say, "That's not fair. That's not right," right? And then they're less likely to act. They're less likely to act on their own negative stereotypes related to age if they understand what ageism is.

[00:03:59] So we say it's simple math, right? One, is that most people don't believe it's real. Two, if you give them concrete examples, they not only believe it's real, but they're more likely to not act on their own stereotypes and assumptions about older people. And so that's where we started. We started with conversations with the media because the Associated Press had come out with some recommendations about how to talk about older people in the media to start to change the culture of how we talk about older people.

[00:04:31] And those conversations were so rich and led us to understand what we were grappling with. We actually started a formal program called The Power in Aging Program and started posting a series of conversations essentially about ageism and how it's holding us back as a state from meeting our goals and how it's holding organizations back from meeting their goals.

[00:04:56] **Dr. Nadine Gracia:** Well, thank you, Jess, for sharing that. There's so many lessons learned from the COVID-19 pandemic and just as you highlighted, I mean, the disproportionate impact of the pandemic in terms of health on older adults, but you've just really articulated how it impacts so many other sectors and certainly in this realm around ageism.

[00:05:14] You know, ageism and its impact that it has on older adults is being discussed more at the national level, including recently in the Strategic Framework for a National Plan on Aging.

[00:05:26] Tell us more. What are the impacts of ageism and why should policymakers pay attention?

[00:05:33] **Jess Maurer:** Oh, well, the impact of ageism impacts every system we have.

[00:05:38] And so whatever goal we have, if we're not talking about age in relation to that goal, right, even if it's related to any other population. I unfortunately have to say on an almost daily basis, "You know black and brown people get old, LGBT people get old, people with disabilities get old, women get old, right?"

[00:06:01] All of the things, like the people we're advancing all kinds of issues and talking about, we sometimes forget, right? That older people are still in those groups. And so we leave them behind, right? As we're talking about implementing solutions that work for other people. And so employment is obviously one place where ageism is big.

[00:06:26] And again, when we started this work, I will be totally transparent. We thought we would go in and talk about implicit bias. And so like three conversations in. We were talking about illegal age discrimination that is rampant within our systems and our employers, and it's remarkable that the folks we were talking to, which are some HR directors sometimes, or people who are making higher decisions within organizations, were happy to tell us about the illegal age discrimination they were engaging in.

[00:07:00] So it's pretty interesting, but you think about the impact, right? So just a person in their 50s, right, who left- and this is a normal thing that happens, right- a person is working and their older parent needs some help. So they might take time off from the workforce, and so they leave their job. They're coming back in a couple of years later. They can't come back in at the wages that they used to earn because all of these messages are out there saying, "You're not enough," right?

[00:07:27] You don't have the skills we want, or you're going to be too expensive. I hear that a lot, you know, "Older workers are so expensive," or you're going to want flexibility in your workplace, all of these things, and so then they make less, they're paying less into social security, they're paying less into the retirement system, and ultimately they have less money later in life to meet their basic needs when they're older, and that has an impact on health, right?

[00:07:50] So you have to look at the through line on a lot of these things, so it's not simply employment and discrimination, but employment and discrimination has, you know, the end result of leaving someone less well-off later in life without the capacity to meet their basic needs.

[00:08:07] But also we've got ageism in healthcare. And you can start with the idea that most providers aren't adequately trained to provide care to older people, the care that older people need. But then we get into under treatment and over treatment. We get into the idea that drugs that are intended for older people aren't actually tested on them. We have no handle on polypharmacy.

[00:08:28] I mean, the list is so long. In relation to ageism in healthcare, just from a systemic point of view. But from the user's point of view, we hear every single day from older people who say, "They don't talk to me. They only talk to my daughter. They don't listen to my concerns." I've had three or four 94-year-olds or five-year-olds say, "They say, 'Well, you know, you are 94,'" like, "You know, you've come to the end of your life," or "This is normal aging."

[00:08:59] They've actually been told "This is normal aging," right? There's no diagnosis of normal aging. So we hear consistently from older people that their ailments are just being ignored because providers have this stereotype that if you reach the end of your life, right, at 90, 95, you can't be productive anymore. You should just be happy you've lived this long.

[00:09:20] **Dr. Nadine Gracia:** And you're pointing to something important here, Jess, about how, you know, ageism is really prevalent across systems. And you're pointing to employment and healthcare and so many other systems, and I wanted to also uplift something that you said at the beginning of this comment, which was around the populations that are aging.

[00:09:39] We're all aging. And you have intentionality around equity and understanding that reaching diverse older adults is equally important and recognizing that there's some intersectionality there. So you may be aging, you're aging as a person of color, you're aging as a person with a disability, you're aging as a person with low incomes.

[00:09:59] Can you talk about what that means to center equity in addressing ageism? Because we do that in the Age Friendly Public Health Systems Initiative, we center equity to advance healthy aging.

[00:10:11] **Jess Maurer:** Absolutely. And I mean, literally, I'll just offer an example from the conversation I just had with the Office of Population Health Equity here in Maine.

[00:10:21] And so, you know, we were talking about how they built these great partnerships with organizations that could help people immediately get the things they needed during COVID and they don't have any partnerships at all, they said, with aging services providers in Maine. And so, you know, we just talked about COVID being disproportionately impacting older people, but of course it disproportionately impacted BIPOC older people, right?

[00:10:49] I mean, you know, overwhelmingly. And so to think that we had, you know, sort of this network set up to try to provide immediate services to people of color in mostly Southern Maine who were experiencing COVID and that they weren't connecting to aging services. There's just a perfect tiny little example of how we really compartmentalized, when in fact, we carry these experiences of discrimination and injustice along with us as we age, and so these are compounded.

[00:11:25] And so it's not about shifting what you're doing as any organization, it's about expanding your view, because older people are workers, right? One in four, one in four working families rely on an older person to provide free child care in this country, right? Critically important function. So these are the things we have to know that older people, they're everything in the world, and they are a critically meaningful part of our future.

[00:11:58] And we have to invest in them in the same way, right, that we're investing in youth.

[00:12:02] **Dr. Nadine Gracia:** And to your point, what you're saying, articulating, is about expanding our view, right? The message is about expanding our view, and it sounds like that was part of the impetus for this leadership exchange that you began.

[00:12:15] You know, we'd love to learn more about the Leadership Exchange on Ageism and the impact that this program is having in Maine. Why did you decide to engage from a leadership perspective?

[00:12:26] **Jess Maurer:** Well, I had an opportunity to participate in a similar program called the Leadership Learning Exchange on Equity, which really was for white leaders to understand more

fully, first of all, racism, the history of racism in this country and the current impacts, and the impact of white privilege and what white privilege is and how it operates within us and within systems.

[00:12:49] And it really created a safe place for people to come together and talk about really challenging issues, make mistakes, by the way, and safely learn how to do better, right? So, we need to know more to do better and to learn collectively.

[00:13:06] And so I actually approached someone, and I'll say, the why piece is that the power and aging conversations we were having were really powerful, they really were, but they were an hour, they were an hour and a half, worst case scenario sometimes would be like 50 minutes. Ugh, you know, how do you cover all that is ageism and its impacts in 50 minutes?

[00:13:25] So, you know, we went to the guy, one of the designers of the Leadership Learning Exchange on Equity and said, "Would you help us design a similar class?" So he helped us design this program. And what we knew was that we wanted to end ageism in Maine and we couldn't do it alone. That's why leaders, right? But when we talk about leaders, we're talking about leaders of all kinds.

[00:13:45] So we're traditional, right? Commissioners have been through, sheriffs, police chiefs, town managers, CEOs, legislators, anybody you would traditionally think of as a leader and lots of nonprofit leaders have been through, but also community leaders. We do volunteer leaders and what we knew is we needed them to begin to take action.

[00:14:10] And to move people to action, we needed to give them, much like I learned, the space and time to learn and to share and to contemplate because our busyness in our life, it's one of the barriers of our time. We don't have time to reflect and learn in a meaningful way. And one of our evaluators talks about this course itself saying it creates a disrupting dilemma, which results in the opportunity for transformed learning, meaning that, you know, it goes deep.

[00:14:42] And we have absolutely heard that. At the end we ask people to make commitments. What they will do. You're leaders. You've come through this leadership class. Now, what are you going to do? And we let them know, "By the way, six months from now, we're going to ask you, did you do it? What action did you take?"

[00:14:57] And people, you know, cry. I mean, they become very emotional that this course has really shifted inside of them, you know, sort of something big around what it means to grow old and what it means to be valued in old age. And so it's been a very impactful course, but we did it because we need help, right?

[00:15:16] We need everyone from the community level all the way to the federal level, we've actually included, you know, somebody from ACL in one of the cohorts who made really good on her promise, and she's one of the regional directors of our region of ACL and she said her commitment was to bring this training to the other directors of ACL and she did that. Within several months, we did an hour-and-a-half training with them and two of them are signed up for LEA in the fall, so we're pretty excited about it. It's been great.

[00:15:47] **Dr. Nadine Gracia:** That's terrific to hear, Jess. And for our listeners, ACL is the Administration for Community Living, one of the agencies within the U. S. Department of Health and Human Services leads an important body of work as it relates to aging.

[00:15:59] So thank you, Jess. Wonderful to hear those types of federal partnerships. Wonderful to hear the reflection, as you know, just the impact that that has and the dedication and commitment that people engaging in that initiative have.

[00:16:11] You know, often what we find is that You know, when you start one initiative and project, it may lead to something else. Has this work on addressing ageism led to other initiatives to support healthy aging?

[00:16:24] **Jess Maurer:** Oh, yes! Yes, yes, yes. And I don't even know where to start. I guess I will try to narrow it down.

[00:16:31] So I'll just start with us, right? What we've heard really consistently, right, some leader will go through and particularly, by the way, aging services providers are keen to get in to LEA and then get their leadership teams in because a couple of the designers were heads of the area agencies on aging, the initial designers, and they said, "We know our frontline staff are ageist."

[00:16:56] You know, and "We don't want to be, we're the ones people call for answers on aging. We don't want our staff to be ageist," right? So we need to figure out how to, you know, start with us first. And so once they started sending their folks through, we had to say, "Hey, look, you know, we only can accommodate so many people. So why don't we create a training for you?"

[00:17:17] So one of the things we did, based on the fact that people really wanted more, it was to create this day-long program called Disrupting Ageism Intensive that we're now starting to deliver to teams within Maine. But we also took everything we learned and we boiled it down, and now we do an eight-hour or so intensive with teams within organizations.

[00:17:36] We also have created a community conversation. So to start having this conversation at the grassroots, which has been very, very impactful. And again, you know, this is an opportunity. The first one we tested it with was with older LGBT folks. Very powerful, very powerful to have, you know, and we're going to do several with the BIPOC community, different BIPOC communities in Maine. And it's this opportunity to talk with each other around issues.

[00:18:02] **Dr. Nadine Gracia:** Absolutely. Absolutely, and you're just demonstrating how one person can indeed make a difference being that champion, being a catalyst and raising attention, raising awareness. Terrific to hear, and also how receptive to hearing the community's input and voice of what they needed and desired and having to be an authentic partner and member in developing that type of sense of belonging in the community is really admirable.

[00:18:29] Well, you know, we love to foster learning, peer learning. So it would be great to hear some advice from you around what advice you would give leaders in other states on strategies to take action on ageism in their communities.

[00:18:44] **Jess Maurer:** Well, so I'll answer this in a couple of ways. One is to say, we want to help other states think about this. And so we are, by the way, replicating LEA in Oregon. We've actually

started that process, which is very exciting. And they're going to host their first LEA in November. And also we'll be doing New Hampshire in the start of the year.

[00:19:07] We've created a replication manual and are starting that work with some other states as well. So we're happy to be a resource, but the key here is to be intentional and to also see what's not there. I find more often than not, it's the absence of intentionality to include older people, and/or include age, just the word. I mean, actually the definition of equity, this is what we learned in the Administration on Community Living training, they gave us the federal definition, the Biden administration definition of equity in their whole equity plan.

[00:19:45] We use it now as part of our leadership exchange on aging, but it doesn't include age, right? So, you know, it's always about looking to see what's missing. But I would say, you know, the best thing that we, as state leaders, need to be doing is starting with us starting conversations about ageism. I think that's where you have to start.

[00:20:06] Like, what is ageism and how is it impacting our organization? That's what we ask people to start with, right? We'll give you a little bit of information, now we're going to ask you, "How could ageism be showing up in your organization?" It doesn't matter if it's your administration, right? If you're a governor, how is it showing up in your administration? If you're a nonprofit leader, how's it showing up in your organization?

[00:20:30] How is it holding you back from meeting your mission, right? Of serving whoever it is you're serving, addressing whatever issue. One of the things that also happened from LEA is that the state of Maine itself became an age friendly, Certified Age Friendly Employer, and then trained all of their HR policy folks, we did, and then offered ageism training to all state employees, which was really cool, right?

[00:20:56] That's a big thing that happened in all of this, but that's not enough, right? So now we're talking about like, how do we start to do the real hard work? Which is what needs to happen nationally. Stanford's, right, New Map of Life. We need to think differently about how we work. So, we need more workers. We just need to keep people in the workforce longer in a healthy way, not in a punitive way, right? In a healthy way.

[00:21:21] They want to step back. How do we help people step back from being a supervisor, right? How do we help people go to part time? How do we help people stay connected to the work that they love, or, if they hate their work, how do we help them move to something else, right? These are all like systemic issues that employers are going to need help with, and state government is a great way, right, if you can solve that for state employees, then we can start to, you know, use that as a model for other employers in Maine.

[00:21:49] So those are the kinds of things I would say.

[00:21:51] **Dr. Nadine Gracia:** And being intentional, as you're saying. Being intentional about these efforts, absolutely. And understanding the communities that you're serving so that you're not leaving people behind.

[00:22:01] Well, Jess, in closing, is there anything else you'd like to share with our listeners?

[00:22:06] **Jess Maurer:** Just that this is terrific work and it's very personal. We need to create more space and opportunity to talk about aging, period. Because our culture, and this is ageism, right? We live in a culture that says aging, getting old is bad. We equate aging with negative.

[00:22:30] One of the things we do everywhere we go is we do a word cloud. We say, "Okay, well, let's start. What are the words and stereotypes that come to top of mind about aging and older people?" We do that fairly regularly. We've done it with every LEA class, and we do it in the third class after they've had nine hours of introspection and learning, and the result is always the same. It's all negative.

[00:22:57] Maybe you get wise. And maybe you get experience, but when we ask people, and it takes 30 seconds, top of mind, negative, negative, negative, negative. The reality is once we understand that all of the negative impacts that older people experience in relation to ageism- including death, by the way, premature death, and that's definitely one of the pieces- that there's a lot of common ground to be made up in having intergenerational conversations.

[00:23:26] And to start unpacking these things, right? We like to talk about isolation and loneliness among older people. That's a big thing. I hear about it all the time, and it feels very paternalistic. And we got to do something about that. Don't disagree, right? We've got to talk about isolation and loneliness, but all of the data suggests that it's young adults that are profoundly isolated and lonely.

[00:23:49] And what do we say to them? "Oh, come on. The world is your oyster. Rub a little dirt in it," right? "Buck up." So we have to have these hard, hard conversations. And we also have to see that there's so much commonality among us.

[00:24:02] **Dr. Nadine Gracia:** We have more in common together. That is an important message to end on. Thank you so much, Jess. It's been such a pleasure speaking with you. We have learned so much in this conversation.

[00:24:14] For our listeners, please feel free to share this segment on your social media channels. You can also learn more about the Age-Friendly Public Health Systems Initiative and find additional resources on ageism on our website at www.afphs.org. That's A-F-P-H-S dot O-R-G.

[00:24:33] Thanks, everyone.