# HOW NWD/ADRC SYSTEMS HAVE ADVANCED EQUITY DURING THE COVID-19 PANDEMIC AND BEYOND



# Why is Equity Important?

"Advancing equity is at the core of everything ACL does. Our work advances inclusion, integration, and independence throughout life, which includes ensuring equitable opportunities for education, employment, self-determination, and all other elements of American life. Most of our programs focus on those in greatest need, which often includes people who – in addition to being marginalized due to age and/or disability – face additional barriers due to race, ethnicity, sexual orientation, gender identity, poverty, language spoken, or other factors." <u>Administration for Community Living: Celebrating 10 years of advancing independence, integration and inclusion (page 4)</u>

### **Equity Starts with Access**

Nine years before the formation of the Administration for Community Living (ACL), Aging and Disability Resource Centers (ADRCs) started as a systems change effort in several states funded jointly by the Administration on Aging (now part of ACL) and the Centers for Medicare and Medicaid Services (CMS). Aging and disability organizations came together to forge partnerships to support access to long term services and supports (LTSS) for older adults and individuals with disabilities. Recognition that LTSS access systems involve multiple payers and providers emerged as the number of participating states grew, evolving the ADRC program into a larger systems change initiative known as the No Wrong Door (NWD) System. A NWD System is a network of community-based organizations, such as ADRCs, Area Agencies on Aging (AAA) and Centers for Independent Living (CILs), as well as state agencies, coordinating efforts to provide streamlined access and better coordination for older adults, individuals with disabilities, and their caregivers.

NWD Systems are at the heart of connecting people with the right services at the right time. They empower individuals to make informed decisions, to exercise control over their LTSS needs, and to achieve their personal goals and preferences. This can't be done well without understanding how age, disability, race, ethnicity, sexual orientation, gender identity, poverty, language spoken, and other factors influence a person's values and preferences.

#### **Additional Reading**

- ACL Ensuring Equity and Inclusion
- <u>Diverse Elders Coalition</u>
- The Future of Family Caregiver Support Is Diverse and Inclusive: AARP Blog March 2020
- One Size Doesn't Fit All: Recognizing Diverse Caregiver Experiences: Rita Choula, Rani Synder, Hartford Foundation, December 2020

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## **NWD System Examples of Advancing Equity to Increase Vaccine Access**

See some examples below of how NWD Systems have engaged with local communities and advanced health equity during the pandemic. Visit the <u>ACL TA Community and Vaccine Access Discussion Board</u> for additional health equity strategies.

Massachusetts increased COVID-19 vaccinations among Haitian adults. Ethos AAA and the Boston Aging and Disability Resource Consortium (ADRC) coordinated four vaccination clinics in January and February of 2021 at senior housing sites in Hyde Park and Mattapan. Both Boston neighborhoods with large Haitian communities have been disproportionately affected by COVID-19. The clinics facilitated vaccinations for 64 Haitian speaking older adults and were staffed by an Options Counselor from the ADRC fluent in Haitian Creole, as well as volunteers from the AAA, including a receptionist who speaks Haitian Creole. Materials available in Haitian Creole were critical to improving their reach into the Haitian communities.

Rhode Island increased COVID-19 vaccination rates among Black and Hispanic individuals. The Point ADRC led almost 50 vaccine outreach events in culturally diverse communities and reached over 4,000 individuals. These outreach events took place at Black Lives Matter offices, the Center for Southeast Asians, supermarkets, bodegas, senior centers, and schools. The Point ADRC team includes staff fluent in Spanish, Portuguese, and Creole, which helped build trust between individuals who speak these languages and the ADRC.

Louisiana utilized the CDC COVID data tracker to target areas for a door knocking campaign. To identify target areas, Louisiana used the CDC COVID-19 Vaccination Equity interactive map that provides a county-level score based on vaccination rates and the Social Vulnerability Index (SVI). The CDC SVI uses 15 social factors, including socioeconomic status, household composition by age and disability, minority status, housing type, and transportation. Louisiana targeted areas with low housing and transportation scores to help individuals with rides to vaccination sites. Door knocking volunteers shared information and FAQs about the vaccine and set up appointments for people willing to get the vaccine.

<u>Delaware created a COVID hotline with the ability to warm transfer.</u> The ADRC has supported people with disabilities needing accommodations at vaccine sites throughout Delaware. Once a person reaches out to the Public Health COVID Vaccination Hotline (operated by 211) requesting accommodations, the caller is warm transferred to the ADRC, where specially trained staff work with the individual to set up the vaccine appointment and requested accommodation.

<u>Ohio conducted outreach to increase vaccines.</u> Community-based partners at the local level continue to offer transportation, host clinics, and visit shelters and rural homeless camps to support vaccine access. One region developed a partnership with a local interpreter who is well-known in their Latino community. They included this individual's image on print materials distributed within their Latino population community and are now seeing an increase in vaccine rates.

Closing the equity gap for vaccine access has given NWD System across the country a roadmap to continue important equity work. Share with <a href="mailto:NoWrongDoor@acl.hhs.gov">NoWrongDoor@acl.hhs.gov</a> on how your vaccine outreach efforts can advance equity in your state's NWD System.