Age-Friendly Public Health Systems

Age-Friendly Public Health: The Podcast
A Vision for Health Aging: Grounded in Partnerships

Featuring: Dr. J. Nadine Gracia, President & CEO, Trust for America's Health in conversation with Rani E. Snyder, President, The John A. Hartford Foundation

[THEME MUSIC]

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Siloed work doesn't work, at least not in sustainable ways. And so we've seen this in our healthcare efforts. We can improve delivery systems, but if we don't also create public health, population level approaches, the strong, very community-based services to meet social needs and other things that are related to what people want to need in their own lives, we're not going to improve outcomes and lives.

[THEME MUSIC ENDS]

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
That's Rani Snyder, president of the John A. Hartford Foundation. I'm your host, Dr. Nadine Gracia, president and CEO of Trust for America's Health, also known as TFAH. Welcome to Age-Friendly Public Health: The Podcast, a production of the Age-Friendly Public Health Systems Initiative. I'm excited to introduce our guest today, who is one of our incredible partners. Our guest is Rani E. Snyder, president of the John A. Hartford Foundation, a national philanthropy dedicated to improving the care of older adults. Throughout her career, Rani has been a leading voice in advancing healthy aging, age-friendly health systems, and cross-sector partnerships that improve the health and well-being of older adults. Before being named president, she served as the vice president of program at the foundation, helping shape its strategic vision and investments in healthy aging, caregiving, and public health. Welcome, Rani.

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
It's so good to be here.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Well, let's jump right in. After serving in leadership roles at the John A. Hartford Foundation for many years, Rani, you are now setting the course for its next chapter. What excites you most about the opportunity to shape the future for all of us as we age, and what are the priorities you'll be focused on?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Thank you, Nadine. Listen, let me just start by saying a huge thanks to you and to TFAH for both your leadership and your partnership, because I'm going to be talking a lot about partnership, and that is a big piece of what excites me. Yours is such an important organization for the nation at a time when public health needs you more than ever. So just a little bit of background. You may have heard me say this before, Nadine, but this is a real full-circle career journey moment for me. My first job was at the John A. Hartford Foundation right out of college. And then I went away to do other work, including education in public administration and doctoral work in public health. So right back to TFAH. And then

about 10 years ago, I came back as VP of the foundation, as you've referenced. And so now I'm really excited to be able to continue building the momentum on the work that we've been doing.
So we're going to keep the same mission, which is to improve the care of older adults. We will be holding to our three priority areas: build age-friendly health systems, support family caregivers, and improve serious illness and end-of-life care. And I'm planning on not slowing down at all. We've got some big goals to expand impact, to broaden and embed our work, and to form new partnerships to add to our already fabulous set of partners.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Well, thanks for that vision, Rani. It really is something that we embrace hearing and have experienced ourselves: your commitment to partnership, that this requires so many of us being at the table, working shoulder to shoulder together, and we greatly appreciate that vision and partnership that you certainly embrace. The John A. Hartford Foundation has helped transform the national conversation around age-friendly care, family caregiving, and improving end-of-life care for older adults. As you look ahead, where do you see the foundation making its greatest impact? And keeping in that theme of partnerships, are there new partnerships or areas of innovation you're especially excited to explore?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Thank you. That's such a great setup. I appreciate that. We are anticipating even stronger growth and a real transformation in quality and safety in healthcare through the Age-Friendly Public Health Systems work that we are doing. As you know, Age-Friendly Care is grounded in the 4Ms framework, and those Ms are what matters to older people and the people who care for them. Medications, mentation, which is anything cognitive, and mobility, which is very much about function. This particular evidence-based approach helps healthcare teams to reduce harm and align care with what matters most to older people and their family caregivers. So there are a variety of ways that it improves outcomes, and some of those depend on site and setting, but we've seen some amazing results across different age-friendly sites on decreased lengths of stay. Of course, we've seen some greater job satisfaction on the part of clinicians who are learning how to deliver this set of care, decreased hospital admissions, those kinds of things.
So since 2017, the Age-Friendly Health Systems Movement, as we now call it, has really taken off thanks to the efforts of the Institute for Healthcare Improvement, IHI, and the American Hospital Association and other partners as well. We now have over 6,000 different sites of care - hospitals, ambulatory practices, nursing homes, and other sites too - that have been recognized for delivering age-friendly care in the US. And that's just the US. There are sites beyond this country as well. And over the next decade, we are going to focus our work on spreading 4M's care to every older person wherever they are seen in any system. Another important piece of that is getting embedded in policy. This has begun already. We're really grateful to a variety of our partners and to CMS because there's a still fairly new Age-Friendly Hospital Measure. I know I just said our work is broader than hospitals, but this measure is specific to hospitals, and we see that as a step in the right direction.

We're really excited to work on additional accreditation, regulation, and payment activities along with the system widespread to see reductions in harm in healthcare and greater satisfaction among older people and their providers as well. And, not to leave out our really fantastic Age-friendly Public Health Systems work with you, we anticipate even more progress in that area thanks to TFAH. As you know, we have just authorized a new grant in March of 2026 with the goal of reaching all 3,300 local and tribal health departments with training. Similar to Age-Friendly Health Systems, TFAH will be working with the Public Health Accreditation Board to embed Age-Friendly principles into the fabric of public health. A

couple of our other areas that I'll reference: in family caregiving, we are very eager to see continued actions stemming from the national strategy to support family caregivers. The update to that strategy was just announced last week, and there's a new goal now that is specific to direct care workers. We should see impact from our integration of family caregiving into both the Age-Friendly Health Systems work and the Age-Friendly Public Health Systems work. Thanks to TFAH again for producing fantastic policy briefs and incorporating training on family caregivers as a public health issue, which it most certainly is. In our serious illness and end-of-life care, we've seen a lot of impact in hospital-based palliative care, and now we're going to be thinking more about moving into community-based palliative care. So across all of this, I want to expand our partners, get into communities, and dive into innovation. And there's a couple of specifics I can add to what that means or what that looks like in our thinking. We have funded the American Library Association to get more into communities and to understand where people, especially older adults, go to get their information. We have a still fairly new grant with the US Conference of Mayors to understand what they're seeing in their communities with regard to caregiving. And we've got some emerging new work in AI, which is of course what we're hearing about in every meeting we ever go to lately. And rural work and the changes that are happening in rural environments is growing into an even more important area for us.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Rani, that's just so incredibly impressive. And to see how the foundation is really being intentional and strategic in terms of thinking about the partners, the sectors that they represent, and where they have influence and can make an impact. And you talked about the areas of innovation. You also talked about something that's unique, I think, to the John A. Hartford Foundation as a philanthropy is that partnership and relationship with federal agencies and engaging in policy. That is something as well to see that transformational systems change that you really have embarked on even more so in your leadership as president.

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Thank you. I think that's exactly right. This is about cross-sector collaboration. Siloed work doesn't work, at least not in sustainable ways. And so we've seen this in our healthcare efforts. We can improve delivery systems, but if we don't also create public health, population level approaches, the strong, very community-based services to meet social needs and other things that are related to what people want to need in their own lives, we're not going to improve outcomes and lives. I mentioned the national strategy to support caregivers previously because that is very much about cross-sector work. We need an age-friendly ecosystem, and thank you to TFAH for your really vital work in helping us to create that. Public health organizations and professionals are, themselves, natural conveners. In fact, you know this: convening is one of the successes of the Age-Friendly Public Health Systems framework. And for public health leaders to do this cross-sector work in their own communities, they should look to you, at TFAH, for guidance.

The early work that you and your colleagues at TFAH did in Florida to build this whole concept of an Age-Friendly Public Health System gave us a lot of lessons - lessons that local government agencies often don't even know what their colleagues are doing. So coming together with the time and the space to share is critical. I'm thinking when I say that about public health, for example, and aging services, which are two very complementary areas that didn't know enough about each other at that time, and that you are helping to build those bridges between. Thinking about how public health leaders can strengthen

partnerships, I would say using shared community values and goals as a way to bridge sectors is one way. Using data to bridge sectors is another, and using the voices of real people in real communities.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Well, those are great insights really to our listeners and to public health as a field as we think about how to go forward. And this focus and commitment to partnerships, this is not new for you. Throughout your career, you have emphasized the importance of collaboration across philanthropy, healthcare, public health, and community organizations. And you've even described this approach, and I quote, "Coordination is amplification." And you talked about this in an Aging in America news article that you were featured in earlier this year. And to our listeners, if you haven't read that piece, I really encourage you to do so. You've lifted up some examples. Why is cross-sector collaboration so important, and how can public health leaders really strengthen these partnerships in their own communities?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Well, I think what we're seeing nationally is that while there has been a retraction in certain resources, many of the folks in the field are recognizing, "We've got to build together. We have to weave together the work that we are doing, stop being territorial, and really think very carefully across sectors so that we can bring the strengths of one sector or one industry to the strengths of another." And that really is that coordination is the amplification piece that I was referring to. I mentioned shared community values and goals also, and I'll add one more point before we move on, which is don't forget philanthropy. At all levels, national, state, local, there are funder partners who can be really helpful.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Excellent. Absolutely. And we see that every day in our own work. And I would say, as you were describing the Age-Friendly Public Health Systems Movement, it's really demonstrated how public health practitioners can be essential partners in helping people age well. And we have done that in partnership with the John A. Hartford Foundation. Looking ahead 5 or 10 years, what would success look like for this movement? You've talked about the new work and area that we're engaged in now. What role do you hope state, local, tribal, and territorial public health agencies will play in really achieving that vision?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Oh my gosh, there's quite a list for what we aim to see in 5 or 10 years. So I'll sort of lay out a vision for that. When we get this right, and it is exactly what we're striving for, we will have healthy aging as a fully recognized core function of public health, with agencies routinely integrating older adult health and wellbeing into their planning, their policy, their accreditation, and ultimately community health improvement efforts as well. That's one. That's just one point. Another is that every public health department has the knowledge, tools, and workforce capacity to apply Age-Friendly principles in this 5-to-10-year future using the Age-Friendly Public Health Systems Succeeds framework to guide their action, even in the absence of dedicated aging funding streams. Because so many of these actions can be deployed with what exists, and need to be really very much, again, about that cross-sector work.

A third is that healthy aging will be embedded in public health accreditation standards and performance expectations. This is about sustainability. So ensuring that Age-Friendly practices will be sustained regardless of leadership changes or shifts in funding priorities is going to be really important because we need leadership to get this started. We shouldn't need those same people to be in place to keep it

going. Fourth, in this vision for the future, I would say every state, territory, tribe, and community has identified public health champions who can advance the healthy aging policies, build the local expertise, and mentor a next generation of leaders. In addition, policymakers will increasingly view Age-Friendly Public Health strategies as practical and evidence-based investments. Not just nice to have things that are over there, but really meaningful and necessary investments. And then sixth, success means moving beyond isolated programs, just as we're discussing, to a nationwide culture change in which healthy aging considerations are incorporated into all public health decisions, from emergency preparedness and chronic disease prevention, to social connection, and brain health, and caregiving support.

And I'll land on this comment. I think that ultimately, our big win is going to be a future where every older adult, regardless of geography, income, race, sexual orientation, background, any of those kinds of things, lives in a community that supports health and independence, purpose and wellbeing, with public health really serving as a key catalyst for that vision.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
That is a compelling and beautiful vision, and one that is achievable with the way in which we're laying forward this movement and working across sectors. And what I just greatly appreciate, Rani, is the commitment that you have: that it's every older adult in every community. It's not just in certain parts of the country, it's not in certain communities and only certain groups, but that it's every older adult in every community. And that truly is transformational about this movement and this ecosystem, if you will. As TFAH works to help shape a vision for the future of public health, and you've really been laying out what we should be thinking about in terms of that roadmap for the future, one of the key questions is how we build systems that are prepared to meet the needs of an aging population. So in addition to some of the lessons and the advice that you have provided already, when you look ahead, what do you believe are the most important investments or policy changes that are needed today to support older adults in the future?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
Well, I think I hinted at this before, but I'll say it very directly. Healthy aging has got to be treated as a core public health responsibility, not as a separate or short-term initiative. And so to achieve that, we need strong policies and public investments in public health more broadly. And that's especially at the federal level, but not only at the federal level. We saw substantial increases in funding levels during COVID. And now the pendulum has swung the other way with the federal government, both deferring funding and public health responsibilities themselves to states, where we see, I think it's fair to say, high degrees of variability in per capita spending. So all of us need to be advocating for increased public health funding, whether that's federal or state or other; that's actually very much aligned with the current administration's focus on prevention and wellness. Those federal public health investments are needed in several key areas.

So workforce is one of those, data is another, and more funding for public health research with a focus on innovations and technology is definitely another. So to get there, we've all got to communicate the value of public health work to the public and also to policymakers. It's not one or the other. And thank you to TFAH for already doing that, for helping us and others to do that in an aging space as well. And I'm going to end with something that I think is a little bit more remote, at least in sort of the history of public health thinking and planning. I want to end with storytelling. Storytelling has an important role to play in all of the work that I just sort of laid out. Data and practice show us where progress is happening;

that's really important. And stories bring them to life. So we need stories because if you think about it, the human brain processes information through narrative rather than through raw data.

Key reasons for that are what? Emotional engagement, memory retention, and just plain personal meaning for all of us. So data tells us what is happening, but a story tells us why it matters. And people change their minds and take action because a story moved them, not because of a spreadsheet. So as I think about the places where we really need to build sort of that muscle, build new string, I think it's true both as an investment that we need to make and also in addition to the policy discussion.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Excellent points, Rani. And the areas of investment that you talked about, as you said, that is core public health: the functions to have a strong system that then is able to really care for all populations, and as we're talking about, an aging population, older adults and people across the lifespan. So when you lift up issues around workforce and data and other areas, that really is addressing those core public health foundational capabilities. And indeed, we need to do an even better job of telling the story, telling the story and demonstrating the value and the impact of public health. Well, in closing, is there anything else you'd like to share with our listeners today?

Rani E. Snyder, MPA, President, The John A. Hartford Foundation:
I'm just so grateful for the work that you do, Nadine. You have a fabulous team at TFAH. I mean, I'm telling you what you already know, and probably so does everyone listening. We are not done with this work. This is ongoing meaningful work. And I would just invite anyone who's listening to find ways to step in to be a part of this because again, cross-sector, cross-collaboration, that's where it's at, and that's where we're headed.

J. Nadine Gracia, MD, President and CEO, Trust for America's Health (TFAH):
Well, thank you, Rani. We do indeed have an amazing team at TFAH, and we have truly wonderful partners like the John A. Hartford Foundation, which is so fortunate to have your leadership in this time. It's been a pleasure speaking with you, Rani. For our listeners, please feel free to share this segment on your social media channels and look for an announcement for our next segment, which will be released in the next few months. You can also learn more about the Age-Friendly Public Health Systems Initiative on our website at afphs.org. That's A-F-P-H-S.org. Thanks, everyone.

[THEME MUSIC]