

87 Stat. 45; amended Pub. L. 95-478, title I, §104(a)(1), Oct. 18, 1973, 92 Stat. 1537, related to Congressional statement of purpose in developing and implementing a national manpower policy for the field of aging, prior to the general amendment of this subchapter by Pub. L. 97-115.

Another prior section 3031, Pub. L. 89-73, title IV, §401, July 14, 1965, 79 Stat. 224; Pub. L. 90-42, §5(b), July 1, 1967, 81 Stat. 107; Pub. L. 91-69, §7, Sept. 17, 1969, 83 Stat. 111, related to description of activities, prior to repeal by Pub. L. 93-29, title IV, §401, May 3, 1973, 87 Stat. 45.

A prior section 401 of Pub. L. 89-73 was classified to section 3030aa of this title, prior to the general amendment of this subchapter by Pub. L. 106-501.

#### PART A—GRANT PROGRAMS

### § 3032. Program authorized

#### (a) In general

For the purpose of carrying out this section, the Assistant Secretary may make grants to and enter into contracts with States, public agencies, private nonprofit agencies, institutions of higher education, and organizations, including tribal organizations, for—

(1) education and training to develop an adequately trained workforce to work with and on behalf of older individuals;

(2) applied social research, aligned with evidence-based practice, and analysis to improve access to and delivery of services for older individuals;

(3) evaluation of the performance of the programs, activities, and services provided under this section;

(4) the development of methods and practices to improve the quality and effectiveness of the programs, services, and activities provided under this section;

(5) the demonstration of new approaches to design, deliver, and coordinate programs and services for older individuals;

(6) technical assistance in planning, developing, implementing, and improving the programs, services, and activities provided under this section;

(7) coordination with the designated State agency described in section 101(a)(2)(A)(i) of the Rehabilitation Act of 1973 (29 U.S.C. 721(a)(2)(A)(i)) to provide services to older individuals who are blind as described in such Act [29 U.S.C. 701 et seq.];

(8) the training of graduate level professionals specializing in the mental health needs of older individuals;

(9) planning activities to prepare communities for the aging of the population, which activities may include—

(A) efforts to assess the aging population;

(B) activities to coordinate the activities of State and local agencies in order to meet the needs of older individuals; and

(C) training and technical assistance to support States, area agencies on aging, and organizations receiving grants under subchapter X, in engaging in community planning activities;

(10) the development, implementation, and assessment of technology-based service models and best practices, to support the use of health monitoring and assessment technologies, com-

munication devices, assistive technologies, and other technologies consistent with section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d) that may remotely connect family and professional caregivers to frail older individuals residing in home and community-based settings or rural areas;

(11) conducting activities of national significance to promote quality and continuous improvement in the support provided to family and other informal caregivers of older individuals through activities that include program evaluation, training, technical assistance, and research, including—

(A) programs addressing unique issues faced by rural caregivers;

(B) programs focusing on the needs of older individuals with cognitive impairment such as Alzheimer's disease and related disorders with neurological and organic brain dysfunction, and their caregivers; and

(C) programs supporting caregivers in the role they play in providing disease prevention and health promotion services;

(12) building public awareness of cognitive impairments, such as Alzheimer's disease and related disorders with neurological and organic brain dysfunction, depression, mental disorders, and traumatic brain injury;

(13) in coordination with the Secretary of Labor, the demonstration of new strategies for the recruitment, retention, or advancement of direct care workers, and the soliciting, development, and implementation of strategies—

(A) to reduce barriers to entry for a diverse and high-quality direct care workforce, including providing wages, benefits, and advancement opportunities needed to attract or retain direct care workers; and

(B) to provide education and workforce development programs for direct care workers that include supportive services and career planning;

(14) the establishment and operation of a national resource center that shall—

(A) provide training and technical assistance to agencies in the aging network delivering services to older individuals experiencing the long-term and adverse consequences of trauma;

(B) share best practices with the aging network; and

(C) make subgrants to the agencies best positioned to advance and improve the delivery of person-centered, trauma-informed services for older individuals experiencing the long-term and adverse consequences of trauma;

(15) bringing to scale and sustaining evidence-based falls prevention programs that will reduce the number of falls, fear of falling, and fall-related injuries in older individuals, including older individuals with disabilities;

(16) bringing to scale and sustaining evidence-based chronic disease self-management programs that empower older individuals, including older individuals with disabilities, to better manage their chronic conditions;

(17) continuing support for program integrity initiatives concerning the Medicare pro-

gram under title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.) that train senior volunteers to prevent and identify health care fraud and abuse;

(18) projects that address negative health effects associated with social isolation among older individuals; and

(19) any other activities that the Assistant Secretary determines will achieve the objectives of this section.

**(b) Authorization of appropriations**

There are authorized to be appropriated to carry out—

(1) aging network support activities under this section, \$14,514,550 for fiscal year 2020, \$15,385,423 for fiscal year 2021, \$16,308,548 for fiscal year 2022, \$17,287,061 for fiscal year 2023, and \$18,324,285 for fiscal year 2024; and

(2) elder rights support activities under this section, \$15,613,440 for fiscal year 2020, \$16,550,246 for fiscal year 2021, \$17,543,261 for fiscal year 2022, \$18,595,857 for fiscal year 2023, and \$19,711,608 for fiscal year 2024.

(Pub. L. 89-73, title IV, §411, as added Pub. L. 106-501, title IV, §401, Nov. 13, 2000, 114 Stat. 2257; amended Pub. L. 109-365, title IV, §402, Oct. 17, 2006, 120 Stat. 2552; Pub. L. 114-144, §5(a), Apr. 19, 2016, 130 Stat. 341; Pub. L. 116-131, title I, §§104(3), 119, 120, title III, §§301-304, Mar. 25, 2020, 134 Stat. 243, 247, 263.)

**Editorial Notes**

**REFERENCES IN TEXT**

The Rehabilitation Act of 1973, referred to in subsec. (a)(7), is Pub. L. 93-112, Sept. 26, 1973, 87 Stat. 355, which is classified generally to chapter 16 (§701 et seq.) of Title 29, Labor. For complete classification of this Act to the Code, see Short Title note set out under section 701 of Title 29 and Tables.

The Social Security Act, referred to in subsec. (a)(17), is act Aug. 14, 1935, ch. 531, 49 Stat. 620. Title XVIII of the Act is classified generally to subchapter XVIII (§1395 et seq.) of chapter 7 of this title. For complete classification of this Act to the Code, see section 1305 of this title and Tables.

**PRIOR PROVISIONS**

A prior section 3032, Pub. L. 89-73, title IV, §412, as added Pub. L. 97-115, §11(a), Dec. 29, 1981, 95 Stat. 1601; amended Pub. L. 98-459, title IV, §404, Oct. 9, 1984, 98 Stat. 1782; Pub. L. 100-175, title I, §§105(e)(2), 134(c)(4), 146(c), 156(b), Nov. 29, 1987, 101 Stat. 930, 941, 950, 954; Pub. L. 102-375, title I, §102(b)(10)(I), title IV, §405, title IX, §904(a)(17), Sept. 30, 1992, 106 Stat. 1202, 1245, 1308; Pub. L. 103-171, §3(a)(13), Dec. 2, 1993, 107 Stat. 1990, related to establishment and support of multidisciplinary centers of gerontology and gerontology centers of special emphasis, prior to the general amendment of this subchapter by Pub. L. 106-501.

Another prior section 3032, Pub. L. 89-73, title IV, §402, as added Pub. L. 93-29, title IV, §401, May 3, 1973, 87 Stat. 45; amended Pub. L. 95-478, title I, §104(a)(2), Oct. 18, 1978, 92 Stat. 1537, related to appraisal and assessment of personnel needs of field of aging, prior to the general amendment of this subchapter by Pub. L. 97-115.

Another prior section 3032, Pub. L. 89-73, title IV, §402, July 14, 1965, 79 Stat. 224, related to payments of grants, providing in: subsec. (a) for contribution by recipients; subsec. (b) adjustments, advances or reimbursement, installments and conditions; and subsec. (c) consultation of Secretary with State agency prior to making grants or contracts, prior to repeal by Pub. L. 93-29, title IV, §401, May 3, 1973, 87 Stat. 45.

A prior section 411 of Pub. L. 89-73 was classified to section 3031 of this title, prior to the general amendment of this subchapter by Pub. L. 106-501.

Another prior section 411 of Pub. L. 89-73 was classified to section 3035 of this title, prior to the general amendment of this subchapter by Pub. L. 97-115.

**AMENDMENTS**

2020—Subsec. (a)(2). Pub. L. 116-131, §104(3)(A), inserted “, aligned with evidence-based practice,” after “applied social research”.

Subsec. (a)(10). Pub. L. 116-131, §104(3)(B), inserted “consistent with section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d)” after “other technologies”.

Subsec. (a)(12). Pub. L. 116-131, §302, substituted “impairments,” for “impairments” and “, mental disorders, and traumatic brain injury” for “, and mental disorders”.

Subsec. (a)(13). Pub. L. 116-131, §119(2), added par. (13). Former par. (13) redesignated (17).

Subsec. (a)(14). Pub. L. 116-131, §120(2), added par. (14). Former par. (14) redesignated (19).

Subsec. (a)(15), (16). Pub. L. 116-131, §303(2), added pars. (15) and (16).

Subsec. (a)(17). Pub. L. 116-131, §§119(1), 120(1), 303(1), redesignated par. (13) successively as (14), (15), and (17).

Subsec. (a)(18). Pub. L. 116-131, §304(1), (3), added par. (18).

Subsec. (a)(19). Pub. L. 116-131, §§119(1), 120(1), 303(1), 304(2), redesignated par. (14) successively as (15), (16), (18), and (19).

Subsec. (b). Pub. L. 116-131, §301, amended subsec. (b) generally. Prior to amendment, subsec. (b) related to authorization of appropriations for aging network support activities and elder rights support activities for fiscal years 2017 to 2019.

2016—Subsec. (a)(13), (14). Pub. L. 114-144, §5(a)(1), added par. (13) and redesignated former par. (13) as (14).

Subsec. (b). Pub. L. 114-144, §5(a)(2), substituted “carry out—” for “carry out this section such sums as may be necessary for fiscal years 2007, 2008, 2009, 2010, and 2011.” and added pars. (1) and (2).

2006—Subsec. (a)(9) to (13). Pub. L. 109-365, §402(1), added pars. (9) to (12) and redesignated former par. (9) as (13).

Subsec. (b). Pub. L. 109-365, §402(2), substituted “years 2007, 2008, 2009, 2010, and 2011” for “year 2001, and such sums as may be necessary for subsequent fiscal years”.

**§ 3032a. Career preparation for the field of aging**

**(a) Grants**

The Assistant Secretary shall make grants to institutions of higher education, including historically Black colleges or universities, Hispanic-serving institutions, and Hispanic Centers of Excellence in Applied Gerontology, to provide education and training that prepares students for careers in the field of aging.

**(b) Definitions**

For purposes of subsection (a):

**(1) Hispanic Center of Excellence in Applied Gerontology**

The term “Hispanic Center of Excellence in Applied Gerontology” means an institution of higher education with a program in applied gerontology that—

(A) has a significant number of Hispanic individuals enrolled in the program, including individuals accepted for enrollment in the program;

(B) has been effective in assisting Hispanic students of the program to complete the program and receive the degree involved;