The GACA program, recently reestablished by the Health Resources & Services Administration (HRSA) after being eliminated in 2015 as part of a consolidation of several geriatrics training programs, provides vital support for hundreds of geriatrics healthcare providers and educators.

A 2017 study in the Journal of the American Geriatrics Society explores the impact the program had on...

**THE GACA HAD A...**

**FAR-REACHING IMPACT**

**WHY IT MATTERS**

The 220 GACA recipients trained between 41,000 and 65,000 healthcare professional colleagues since 1998.

More than 80% of GACA survey respondents reported leveraging the GACA to “protect” dedicated time for developing courses, workshops, publications, and other training activities.

Curtailing such a program endangers care quality, care costs, and care professional expertise across the U.S.

**IN THEIR OWN WORDS**

“The GACA in many ways made my career possible. As a minority female, it gave me entrance into an academic world that often seems unattainable and closed.”

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**Potential Learners Reached by GACA Awardees**

- Minimum: 40,714
- Maximum: 64,750
BUILD A BETTER WORKFORCE

WHY IT MATTERS
96% of survey respondents cited GACA-supported opportunities as being primary contributors to their career success.

More than 80% of respondents were promoted during or after receiving their awards.

90%+ of survey respondents noted that the GACAs improved their teaching, leadership, and collaborative skills.

IN THEIR OWN WORDS
"My entire career was influenced positively by the GACA. I was given protected time to develop curricula, to network with other educators, to receive training, and to become a more effective educator."

THE GACA MADE FOR...
BETTER CARE

WHY IT MATTERS
More than 50% of the GACA awardees surveyed reported an improvement in their provider skills and education.

Nearly 25% of respondents were confident their efforts tangibly improved clinical care, satisfaction with the health system, and health outcomes.

IN THEIR OWN WORDS
"The GACA contributed significantly to my ability to design and lead a program that will directly impact the care that people living with dementia will receive in the future."
In July 2019, HRSA announced 48 five-year grant-funded Geriatrics Workforce Enhancement Programs (GWEPs) located in 35 states and 2 territories. HRSA also anticipates funding up to 26 GACAs beginning in September 2019.

- The GWEP is focused on helping to transform primary care for older adults by providing geriatrics training.
- The GACA is focused on developing clinician educators in training the next generation of geriatrics healthcare professionals.

Additional funding will allow HRSA to expand the number of GWEPs and GACAs and move towards closing the current geographic and demographic gaps in geriatrics workforce training. Both the GACA and the GWEP are essential to the future of high-quality, person-centered care.

**BIPARTISAN, BICAMERAL LEGISLATION TO ESTABLISH & AUTHORIZE THE GWEP & GACAs**

**S. 299 & H.R. 2781**

Geriatrics advocates have offered a ringing endorsement for two pieces of legislation critical to the GWEP and the GACAs.

Introduced by Sens. Susan Collins (R-Maine) and Bob Casey (D-Pa) in January 2019, the Geriatrics Workforce Improvement Act (S. 299), is a proposal in the U.S. Senate to ensure communities across the U.S. have access to health professionals and other critical supports improving care for us all.

The bill echoes bipartisan legislation, the Educating Medical Professionals and Optimizing Workforce Efficiency and Readiness (EMPOWER) for Health Act of 2019 (H.R. 2781) introduced in May 2019 by Reps. Jan Schakowsky (D-Ill.) and Michael Burgess (R-TX) in the U.S. House of Representatives.

Both proposals would authorize funding for and enhance the GWEP and GACA Programs.

Email, call, tweet, and text your legislators to let them know you support S. 299 and H.R. 2781.