

Date of Hearing: June 30, 2026

ASSEMBLY COMMITTEE ON HEALTH
Mia Bonta, Chair
SB 971 (Choi) – As Amended April 9, 2026

SENATE VOTE: 38-0

SUBJECT: Healthy Aging Community Partnerships Program.

SUMMARY: Authorizes specified entities to establish community-based programs for older adults designed to promote healthy aging, social engagement, and independent living in collaboration with relevant local entities. Specifically, **this bill:**

- 1) Authorizes a local health department, area agency on aging (AAA), local school district, or other appropriate county department, as determined by the county, to establish community-based programs for older adults designed to promote healthy aging, social engagement, and independent living in collaboration with relevant local entities, including school districts, libraries, faith institutions, and community organizations.
- 2) Provides that if a local entity establishes a community-based program pursuant to 1) above, the program activities may include, but are not limited to, technology assistance, physical activity, music or arts programming, cultural programming, language learning opportunities, shared meals, and other community-based enrichment activities that support healthy aging and social connection.
- 3) Defines, for purposes of this bill, “older adults” to mean persons 55 years of age or older.
- 4) Prohibits this bill from being construed to be mandatory for any local entity or department to implement.
- 5) Subjects implementation of this bill to the availability of local resources and partnerships.

EXISTING LAW:

- 1) Requires each county board of supervisors to appoint a local health officer (LHO). Requires LHOs to enforce and observe orders of the board pertaining to public health and sanitary matters, including regulations prescribed by the Department of Public Health (DPH), and statutes related to public health. [Health and Safety Code (HSC) § 101000 and § 101030]
- 2) Establishes the Mello-Granlund Older Californians Act and sets forth the state’s commitment to older adults, people with disabilities, and family caregivers served by the programs administered by the California Department of Aging (CDA). [Welfare and Institutions Code (WIC) § 9000]
- 3) Defines “AAA” as a private nonprofit or public agency designated by CDA that works for the interests of Older Californians within a planning and service area, and engages in community planning, coordination, and program development, and, through contractual arrangements, provides a broad array of social and nutritional services. [WIC § 9006]

- 4) Recognizes AAAs as the local units on aging in California that are supported from an array of sources, including federal funding largely through the Older Americans Act, state and local government assistance, the private sector, and individual contributions for services. [WIC § 9400]
- 5) Establishes an older adult wellness program within CDA. Requires the program to have all the following functions:
 - a) Focus on educating California’s older adults, as well as caregivers, families, and health care professions, about the importance of living a healthy lifestyle, including, but not limited to, nutrition, exercise, injury prevention, and mental well-being;
 - b) Provide information on, and help California’s culturally and ethnically diverse older adults and adults with functional impairments;
 - c) Provide educational information on the resources and services available for older adults from both private and public entities in communities throughout the state and the AAA;
 - d) Promote education and training for professionals and caregivers who work directly with older adults to maximize wellness;
 - e) Generate a cultural shift to a more positive vision and expectation with respect to how aging is viewed by all Californians;
 - f) Transform perceptions of aging into a more hopeful, appreciative, and aspiring mode of being;
 - g) Create a new culture that cherishes each of us;
 - h) Advance the recognition of the unique status, experience, capacity, and role of older adults to become our models for guidance and inspiration;
 - i) Replace the image of older adults who are “self-interested” with an image of older adults who are actively engaged and involved in their communities;
 - j) Promote and mobilize older adults and adults with disabilities into emerging roles for the public benefit;
 - k) Challenge the prevailing culture, to the extent that it discounts the value of age; and,
 - l) Rid our culture of the negative attitudes towards adults who are aging and adults with disabilities. [WIC §§ 9660-9661]
- 6) Requires the Secretary of the California Health and Human Services Agency (CalHHS), in coordination with the Director of CDA, to lead the development and implementation of the state’s master plan for aging (MPA). [WIC § 9850]
- 7) Defines “Older individual” or “elderly” means a person 60 years of age or older, except where this provision is inconsistent with federal requirements. [WIC § 9018]

FISCAL EFFECT: None. This bill is currently keyed non-fiscal.

COMMENTS:

1) PURPOSE OF THIS BILL. According to the author, California's older adult population is growing rapidly, yet no designated public system is responsible for coordinating education and prevention services tailored to their real-life needs. The author states that this bill addresses this gap by establishing a statutory framework that authorizes counties to deliver older adult education. The author concludes that by partnering with community-based organizations, this bill's approach aims to improve health outcomes, promote independence, and enhance quality of life for Californians age 55 and over.

2) BACKGROUND.

- a) California's Aging Population.** According to the CalHHS website, by 2030, nearly 10 million Californians will be an older adult, about 25% of the state's population. According to a January 2025 report published by the Public Policy Institute of California (PPIC) titled, "California's Aging Population: Anticipating Dramatic Growth in the Number of Older Californians," by 2040, 22% of Californians will be 65 or older, up from 14% in 2020. The older population (aged 65 and older) will increase by 59%, while the working-age population (aged 20 to 64) will remain largely unchanged and the child population (aged zero to 17) will decrease by 24%.
- b) MPA.** In June of 2019, Governor Gavin Newsom issued Executive Order N-14-19 which called for the development of a state MPA.

In January of 2021, the Governor released the MPA. The MPA prioritizes the health and well-being of older Californians and the need for policies that promote healthy aging. The MPA serves as a blueprint for state government, local government, the private sector, and philanthropy to prepare the state for the coming demographic changes and continue California's leadership in aging, disability, and equity. The work plan laid out in the MPA mid-way through its ten year timeline continues to highlight the urgent needs facing California's older adults, people with disabilities, their families, caregivers, advocates and the workforce supporting these populations.

The MPA for 2025-26 outlines five bold goals and currently seeks to advance 81 initiatives to build a California for All Ages by 2030. Each initiative features a designated area of focus; to deliver, to analyze and to communicate. It also includes a Data Dashboard on Aging to measure progress. The five goals are as follows:

- i) Housing for All Ages and Stages;**
- ii) Health Reimagined;**
- iii) Inclusion and Equity, Not Isolation;**
- iv) Caregiving That Works; and,**
- v) Affording Aging.**

Additional details regarding these goals are available on the MPA website.

- c) **Area Agencies on Aging (AAAs).** CDA administers programs serving older adults through contracts with local agencies (AAAs) in 33 locations across the state which provide a wide array of services on a community level to seniors and adults with disabilities. AAAs are designated to address the needs and concerns of older adults at the regional and local level. Each county is required to have an AAA to ensure all communities have access to local aging programs and provide information and services for older adults. While California is home to 58 counties, not all counties have a stand-alone AAA. Some AAAs represent multiple counties to serve the region.

AAAs promote healthier living through alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, fall prevention, and managing depression. AAAs also provide opportunities for older adults to learn techniques and strategies to prevent or mitigate the effects of chronic diseases including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease.

- d) **The California Adult Education Program (CAEP).** State law establishes the CAEP, which provides educational opportunities and workforce services to adult learners. According to the California Department of Education's website, there are currently 71 regional adult education consortia with over 325 school districts and close to 100 community colleges serving adults statewide.

Local educational agencies (or "LEAs", defined as school districts, county offices of education or charter schools) receive funding for adult education only for specific purposes, including:

- i) Programs in elementary and secondary basic skills, including programs leading to a high school diploma or high school equivalency certificate;
 - ii) Programs for immigrants eligible for educational services in citizenship, English as a second language, and workforce preparation;
 - iii) Programs for adults, including, but not limited to, older adults, that are primarily related to entry or reentry into the workforce;
 - iv) Programs for adults, including, but not limited to, older adults, that are primarily designed to develop knowledge and skills to assist elementary and secondary school children to succeed academically in school;
 - v) Programs for adults with disabilities;
 - vi) Programs in career technical education that are short term in nature and have high employment potential; and,
 - vii) Programs offering preapprenticeship training activities conducted in coordination with one or more apprenticeship programs approved by the Division of Apprenticeship Standards for the occupation and geographic area.
- e) **Challenges faced by older adults.** According to a 2024 article published in *Public Health Challenges* titled, "Public Health Challenges and Responses to the Growing Aging Populations," aging brings about an increased vulnerability to illnesses,

disabilities, geriatric conditions, mental health challenges and other ailments that necessitate enhanced medical care and long-term services and support. Aging not only involves these factors but also diverse sociocultural challenges stemming from changing demographics, evolving social roles and supports and persistent ageism. Protecting the quality of life of elderly people requires addressing threats to social well-being and cultural inclusion, as shrinking family sizes and fragmented social networks reduce many social connections, retirement or inability to work also changes community roles and purpose, and rapid adoption of advanced technology leaves many older adults struggling with digital literacy and access barriers. The article also states that the accessibility of recreational, vocational, volunteer, and learning programs lag for older adults.

- f) What does this bill do?** This bill authorizes a local health department, AAA, local school district, or other appropriate county department, as determined by the county, to establish community-based programs for older adults designed to promote healthy aging, social engagement, and independent living in collaboration with relevant local entities, including school districts, libraries, faith institutions, and community organizations. The bill specifies that such programs may include, but are not limited to, technology assistance, physical activity, music or arts programming, cultural programming, language learning opportunities, shared meals, and other community-based enrichment activities that support healthy aging and social connection.
- 3) SUPPORT.** This bill is sponsored by the California Senior Legislature (CSL) which writes in support, as California's older adult population continues to grow rapidly, too many seniors face barriers to essential information, social connection, and preventive health education. CSL continues that this bill offers a community-based approach by allowing local health departments to partner with trusted local entities to deliver programs tailored to older adults' needs. CSL states that the focus on digital literacy, fall prevention, nutrition, health care navigation, emergency preparedness, civic engagement, and emotional well-being, combined with communal meals, reflects best practices for promoting healthy aging and reducing isolation. CSL concludes that it believes that this bill will strengthen local capacity to serve older adults, improve health outcomes, and foster greater community connection.
- 4) OPPOSITION.** The Association of Community and Continuing Education (ACCE), opposes this bill, stating that this bill does nothing to provide the resources or structural support necessary to implement new programs effectively. ACCE first states this bill fails to recognize California Community Colleges as existing, central providers of older adult education and instead creates a framework that overlooks the system best positioned to deliver these services. ACCE continues this bill establishes new expectations for coordination, planning, and reporting, yet it includes no funding to support these activities. ACCE further notes that nothing in this bill requires statutory change; community colleges, local public health departments, and partners already have full authority to collaborate, share information, and design programs that support older adults. ACCE further contends that local public health departments across the state face staffing shortages, rising responsibilities, and ongoing post-pandemic recovery challenges and this bill adds new expectations without addressing the capacity issues these departments face, which may divert attention from core public health functions. ACCE concludes that California must invest in meaningful, sustainable strategies to support its rapidly growing older adult population, and this bill does not advance these goals and is not needed.

5) RELATED LEGISLATION. SB 837 (Reyes) would require Aging and Disability Resource Connection programs operated by AAAs to provide disaster and emergency preparedness training specifically designed to help older adults and people with disabilities prepare for emergencies and ensure their safety before, during, and after natural disasters and other emergency events, as specified. SB 837 passed the Assembly Aging and Long-Term Care Committee on June 23, 2026 with a vote of 7-0 and is pending a hearing in the Assembly Committee on Emergency Management.

6) PREVIOUS LEGISLATION.

- a)** AB 1476 (Wallis), Chapter 302, Statutes of 2025 requires the McCarthy Kennick Nutrition Program for the Elderly Act of 1971 to include the establishment of projects that would provide, at least five days a week, at least one meal per day and any additional meals the contracting agency or organization may elect to provide for individuals 60 years of age or older.
- b)** SB 1249 (Roth), Chapter 337, Statutes of 2024 updates and revises legislative findings and declarations within the Mello Grandlund Older Californians Act relating to California's significant demographic shift towards an older and more diverse population and declares intent to reform functions relating to AAA. Requires CDA, by September 30, 2026, to take various actions, including, among others, identifying the core programs and services to be provided to older adults and family caregivers, and developing a statewide consumer engagement plan. Requires CDA to develop regulations that address specified topics relating to AAA designations. Requires CDA those deliverables to be informed by data from validated sources, which may include, among others, the United States Census. Repeals the provisions establishing the Senior Housing Information and Support Center.
- c)** AB 3207 (Patterson) of 2024 would have required the State Department of Social Services (DSS) to, subject to an appropriation, on or before January 1, 2026, establish and administer a 24 hours per day, 7 days per week, toll-free hotline to assist all Californians in dealing with online scams, as provided. Would have required DSS to ensure that the program and its staff are equipped to meet the needs of individuals who are 60 years of age and older. Would have required, on or before January 31, 2027, and annually thereafter, DSS to submit a report to the Legislature and the relevant policy committees containing, among other things, the number of seniors served, the types of problems the program assisted seniors with, and recommendations for improving the program. AB 3207 was held on the Assembly Appropriations suspense file.
- d)** SB 228 (Jackson), Chapter 742, Statutes of 2019 requires the Secretary of CalHHS, in coordination with the Director of CDA, to lead the development and implementation of the master plan established pursuant to the Governor's Executive Order N-14-19 to develop the MPA. Requires the Secretary and the Director, with the assistance of the workgroup, to work with specified agencies, as needed, to identify policies, efficiencies, and strategies necessary to implement the MPA. Requires the workgroup to solicit input and gather information to assist with the implementation of the MPA. Required CDA to submit a report to the Governor and the Legislature by October 1, 2020 regarding the MPA, and additionally requires CDA to submit updates annually thereafter October 1, 2030.

7) **AMENDMENTS.** The Committee may wish to amend this bill as follows:

- a) **Postsecondary Institutions.** Given the work that community colleges and public and private colleges and universities do to provide older adult education, the author accepted amendments in the Assembly Committee on Aging and Long-Term Care to be taken in this Committee due to timing that would authorize community colleges and public and private colleges and universities to establish community-based programs for older adults as provided in this bill.
- b) **Definition of Older Adult.** To ensure alignment with existing law, the Committee may wish to change this bill's definition of older adult (an individual 55 years of age or older) to instead reference 7) of Existing Law above which defines an older adult as an individual 60 years of age or older.
- c) **School Districts.** As described in the Background above, LEAs receive funding for adult education only for specific purposes and the programs proposed by this bill would not necessarily fall within the allowable adult education offerings under the funding received. Additionally, LEAs require criminal background checks for individuals entering school campuses when students are present. The Committee may wish to strike the authorization for local school districts to establish community-based programs for older adults, and maintain the authorization for the other authorized entities as specified in this bill to collaborate with school districts.

8) **DOUBLE REFERRAL.** This bill is double referred, it passed the Assembly Committee on Aging and Long-Term Care with a 7-0 vote on June 23, 2026.

REGISTERED SUPPORT / OPPOSITION:

Support

California Senior Legislature (sponsor)
AARP
Alzheimer's Association
California Long Term Care Ombudsman Association (CLTCOA)
LeadingAge California

Opposition

Association of Community and Continuing Education

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