NH Alliance for Healthy Aging: Creating a Collective Approach to Addressing an Aging NH

September 24, 2026

Guest WiFi: We1Baldrige

NHAHA
NEW HAMPSHIRE ALLIANCE FOR HEALTHY AGING

Agenda

- Welcome, Introductions, and Housekeeping
- Community Transportation Needs Assessment Findings
- Older Adults and Homelessness
- Break
- NHAHA Updates
- Table Activity and Networking
- Advocacy Update
- Adjourn and Lunch

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New Hampshire Commission on Aging

GETTING THERE TOGETHER

A year of listening to New Hampshire, 2,774 residents deep. What we found, what we built, and what we do next

New Hampshire Commission on Aging

Community Transportation Needs Assessment

What we heard

The mobility transition

Six actions to improve transportation

Source: NH State Commission on Aging, Getting There Together (2026).

New Hampshire Commission on Aging

The Commission on Aging

- 26 Commission Members
- 1 State Senator
- 2 State Representatives
- 8 State Agencies
- 15 Governor Appointed Members



416,729

People in NH are 60+

29.5% of the state's population

New Hampshire Commission on Aging

Demographics

We are living longer lives

NH is the second oldest state in the country by median age

NH is one of 11 states with more older adults than children



60.7% Age 65-74

28% Age 75-84

11.3% Age 85+

Largest Portion

Fastest Growing

AgeWellNH

LONGEVITY-READY LIVING



INDEPENDENCE

Housing

Transportation & Mobility

Longevity Planning

Community Design



WELLNESS

Connected Communities

Age-Friendly Environments

Healthy Aging

Civic Engagement



CARE

Prevention

Accessible Coordinated Care

Community-Based Supports

New Hampshire Commission on Aging

We kept hearing the same story

Coös County

A 78-year-old stretches a 3-week prescription because she can't reliably reach the pharmacy.

Cheshire County

A veteran stops going to dialysis after the ride falls through twice in a month.

Hillsborough County

A Medicaid ride doesn’t show up. An 80 year old is stranded at the dentist.

Grafton County

A caregiver turns down a job; her mother’s appointments are unpredictable

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What the numbers say

42.8%

Missed, delayed, or avoided medical care because of transportation

884 of 2,065 respondents

60 %

Experienced some level of transportation insecurity

1,201 of 2,001 valid TSI scores

87.1%

Had never heard of Keep NH Moving

1,450 of 1,665 respondents

New Hampshire Commission on Aging

What the numbers say for older adults

53.9%

Of survey respondents were 65+

CTNA Data Companion (2025b)

43.1 %

Of respondents age 65+ have already started driving less

CTNA Data Companion (2025b)

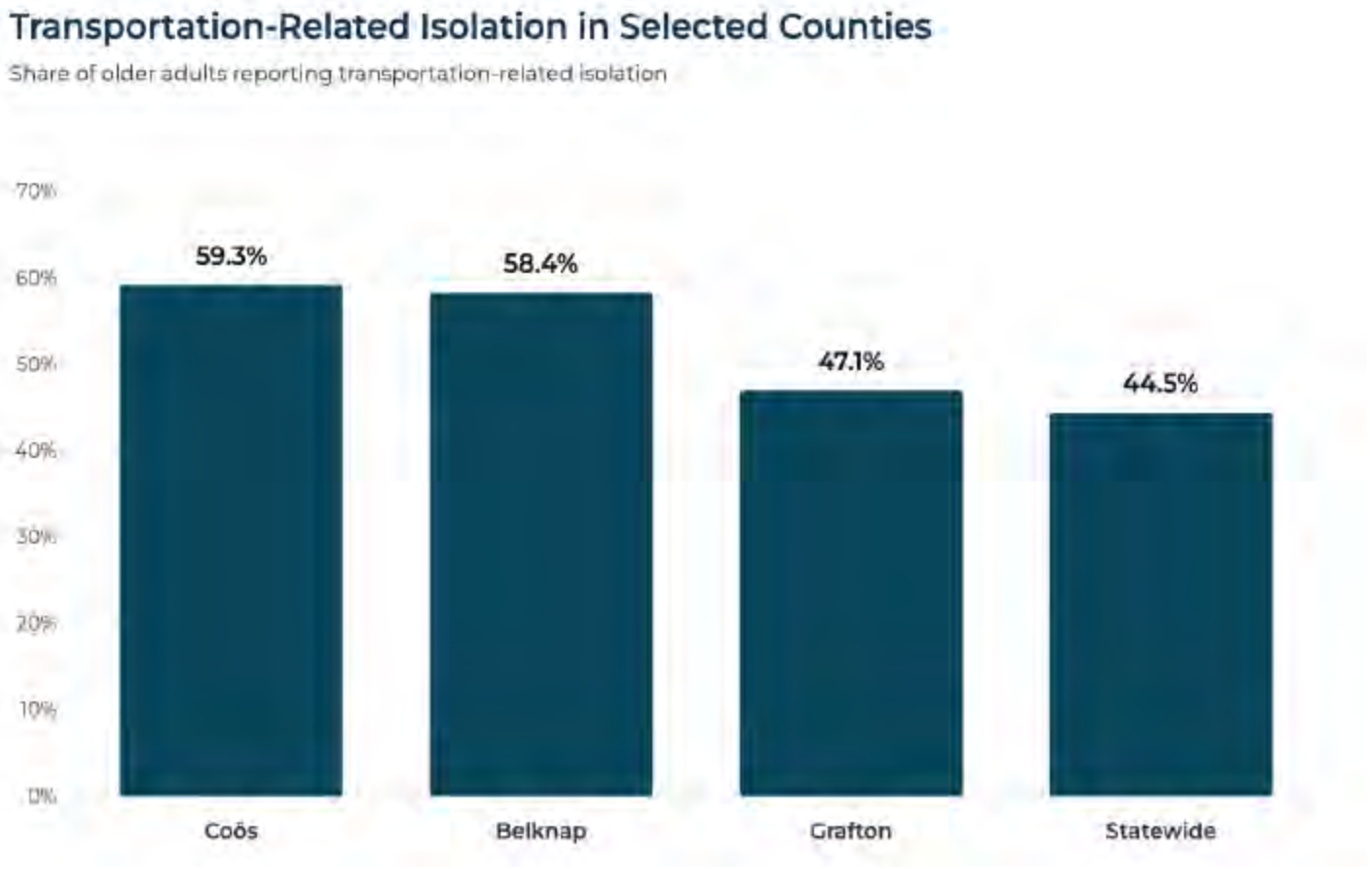
25.5%

Of respondents age 65+ not very confident driving self

n = 2,024; CTNA-B

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Transportation is more than care



Isolation

44.5% of everyone felt isolated or stuck at home in the last 30 days.

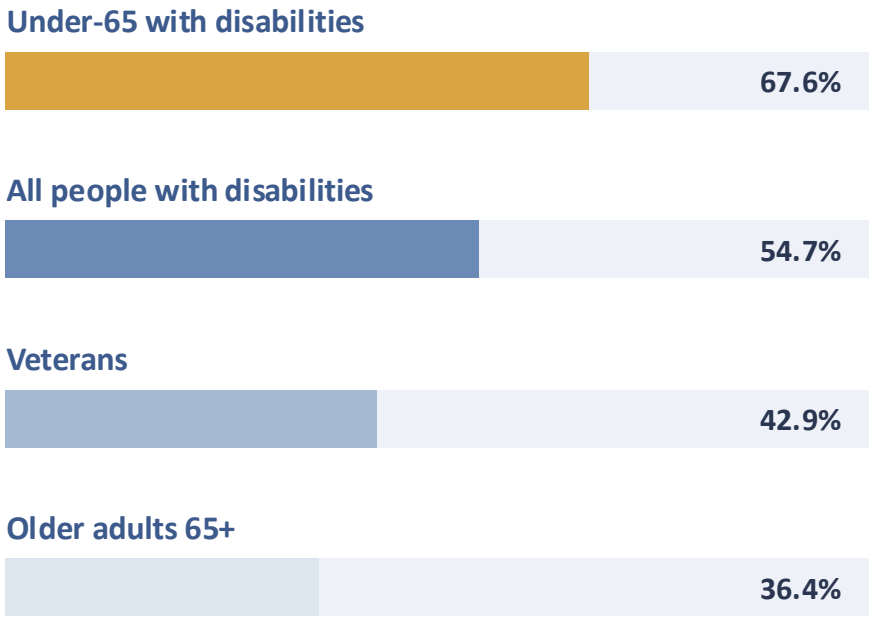
Data Companion (CTNA-B) *§2.3 (four isolation indicators) and §2.6 (Transportation-related isolation in selected counties and statewide)*

New Hampshire Commission on Aging

The sharpest finding

67.6%

of working-age adults with disabilities missed, delayed, or avoided medical care because of transportation.

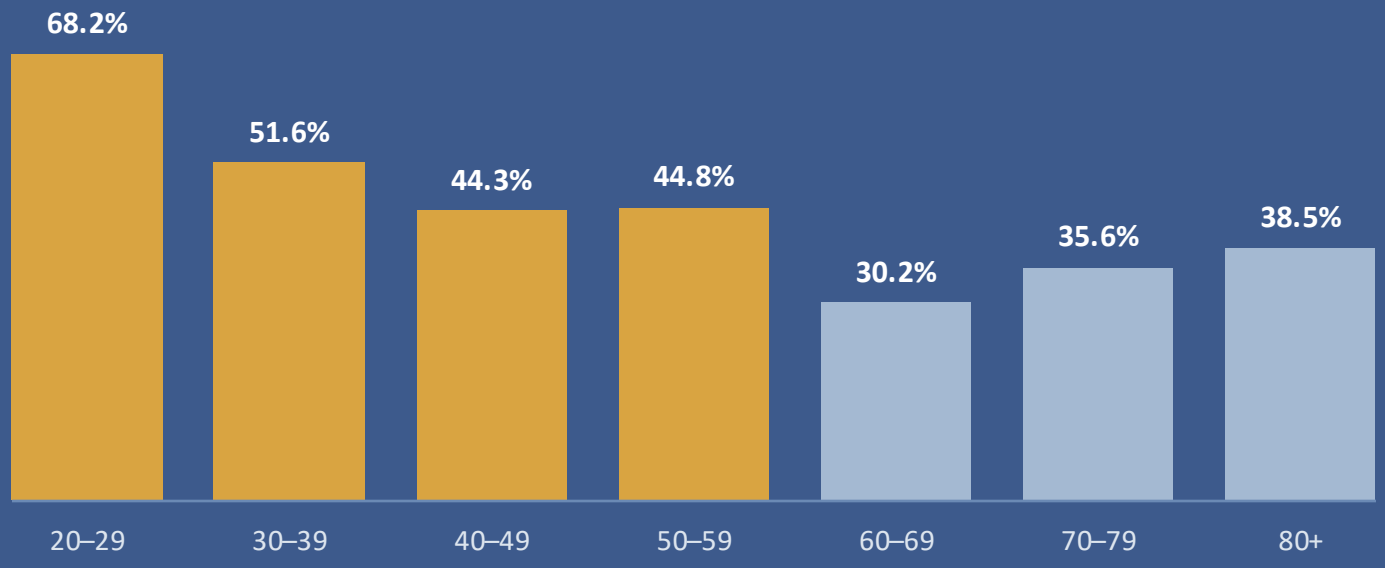


Missed medical care, by who you are

Data Companion (CTNA-B) *§2.2 carries the full subgroup breakdown.*

New Hampshire Commission on Aging

The mobility curve



TSI moderate/high insecurity by age band. Gold = working age. Blue = older adults.

Acute now. Rising underneath.

Working-age insecurity is acute today.

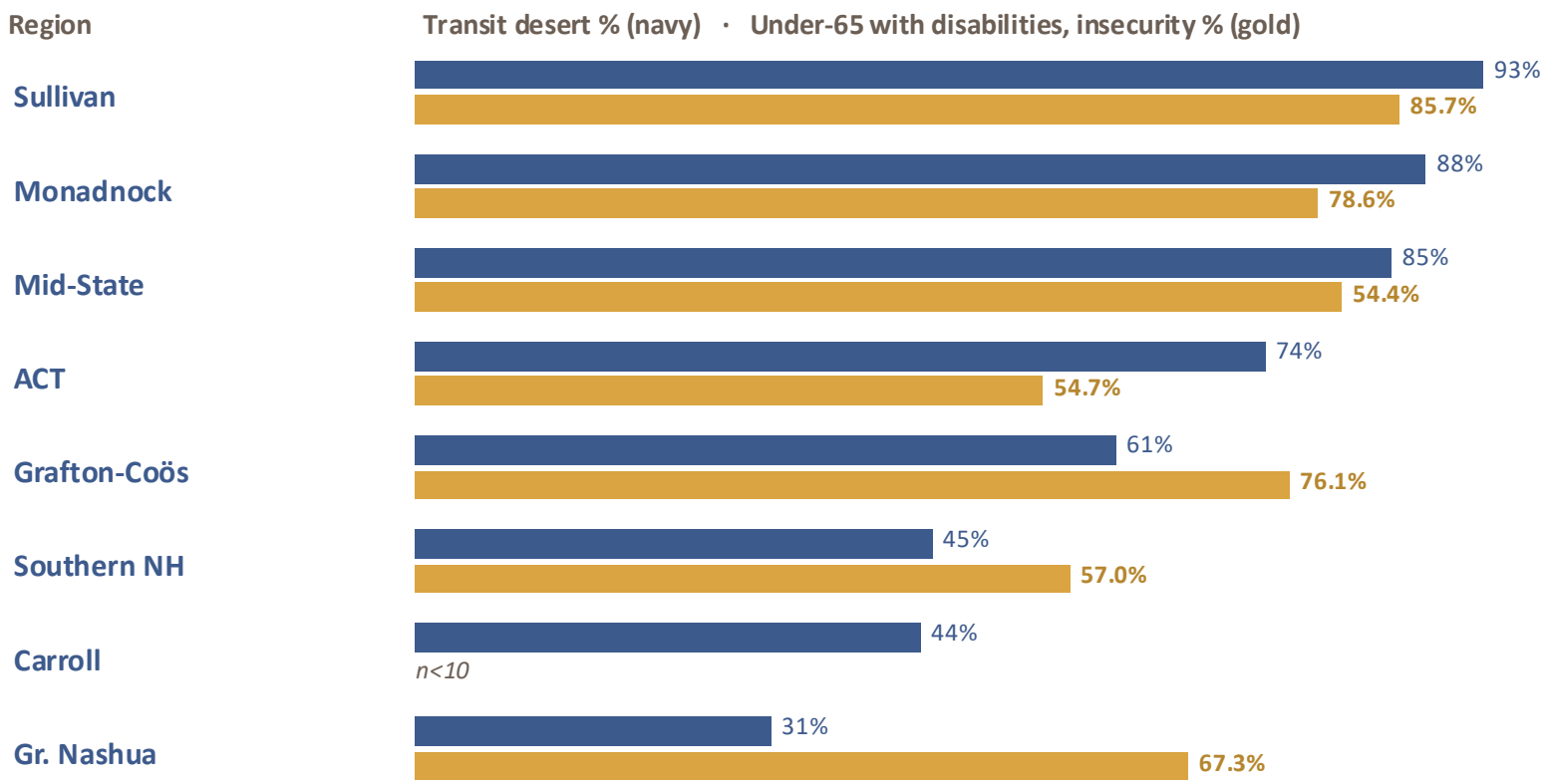
43.1% of older adults are already driving less.

25.5% aren't confident driving.

78.3% of 80+ year old respondents report a disability

New Hampshire Commission on Aging

Regional differences



The gold bar is near the top everywhere.

Data Companion (CTNA-B) *§3.5b and §3.5c carry all eight regions by population. Pull yours.*

New Hampshire Commission on Aging

The trap in the map

Coverage on a map is not a ride

Carroll County

44% desert (moderate), yet **60.6%** insecurity, the highest in the state.

Coös County

20% desert, yet Coös reports the 2nd-highest insecurity in the state.

"Accessible existed on paper, but not in reality." — focus group participant (CTNA-F)

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What this is already costs us

1,433

missed medical & therapy trips, one month, survey group

$105K

lost wages in a single month

$4.3M

annualized avoidable health spending when missed care escalates

$128K

lost in local retail spending

For older adults the bill is sharpest. NH nursing home care runs about $149,650 a year, and that's what we pay when in-home support isn't there. The cheaper intervention is more than dollars. It is dollars plus a system that knows how to use them. Both have to move.

Data Companion (CTNA-B) *Impact & Policy Analysis (CTNA-D) carries the full model and sensitivity ranges.*

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What was missing, and what now exists

Definitions

No federal definition of “transit desert” exists. We built one, applied it the same way in all ten counties, and standardized unmet-need and denial definitions.

Data

There was no baseline. Now there is one: a repeatable instrument the state can measure every future investment against.

Coordination

116 federal programs fund this work across 9 agencies. No NH office coordinates any of them. The plan resources the function recognition never did.

Public access

87.1% had never heard of Keep NH Moving. The data, and the help, should live where people can actually find them.

New Hampshire Commission on Aging

New Hampshire now has a baseline

What it is

The Transportation Security Index is a validated 6-item measure, not a homemade metric. NH now has its first statewide TSI baseline.

How you use it

An RCC can re-run it and watch its region year over year. The state can ask of any RHT or transit dollar: did the needle move?

What it protects

Ability to track whether the worst county gaps (Carroll, Coös, Sullivan vs Grafton) actually narrow over time.

This is the durable asset. The report can sit on a shelf. The baseline keeps working every year someone measures against it.

New Hampshire Commission on Aging

Six recommendations. One system.

1. Designate one entity to coordinate the system, with real responsibility for oversight, navigation, reporting, and funding alignment.
2. Make Keep NH Moving the statewide starting point, with live help and low-tech access.
3. Put healthcare, providers, mobility management, and people with lived experience at the same operational table.
4. Adopt essential access standards and close the biggest trip gaps, including return trips.
5. Stabilize volunteer driver programs and create paid backup for critical-need trips.
6. Make the money work like one system through pooled or braided funding.

Data Companion (CTNA-B) *Each maps to a costed investment package in the Conversion Playbook.*

New Hampshire Commission on Aging

Next Steps

- Use the data in the CTNA and “Getting There Together” report.
- Stay connected- sign up for our newsletter
- Get involved

  RCC, SCC, NHAHA
- Carry volunteer driver program stabilization as a budget-cycle priority.

Remember: Reports don’t open doors, people do.

New Hampshire Commission on Aging

What We Do Next

- Recommendations live on in AgeWellNH
- Meet with state agencies, legislators, municipalities to present data
- Work to align and map goals across existing systems
  - SPOA, SPIL, 10 Year Transportation Plan, Highway Safety Plan, DHHS Strategic Roadmap, SHIP, GO NORTH
- Work with stakeholders to address specific system needs
- Collaborate with GO NORTH team as needed
- Assess how we share individual stories of transportation challenges

Remember: Reports don't open doors, people do.

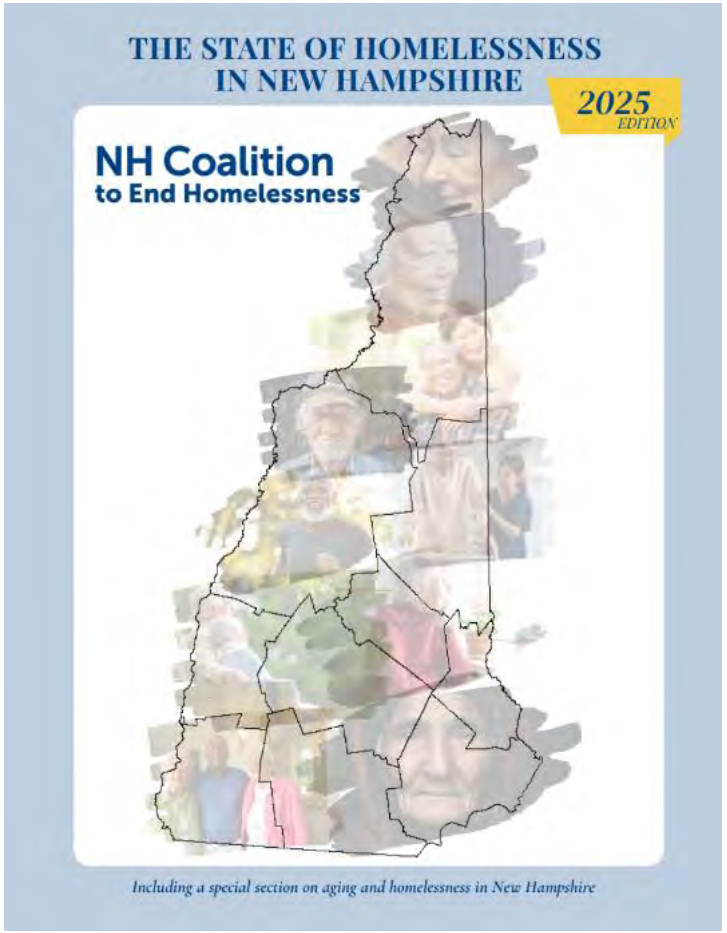
New Hampshire Commission on Aging

Links

Getting There Together: Full CTNA Report
CTNA Data Companion
County Profiles lisa.m.dunham@dhhs.nh.gov>
Subscribe to Commission Newsletter

Contact

Lily Wellington
Executive Director
NH Commission on Aging
Lily.A.Wellington@nhcoa.nh.gov



The Intersection of Homelessness & Older Adults in NH

The State of Homelessness in New Hampshire, 2025 EDITION

University of New Hampshire
College of Health and Human Services

The 2025 Edition of
The State of Homelessness in NH
was generously sponsored by the
UNH College of Health and Human Services

- What data sources do we use?
- How are people counted?
- Who is counted? Who isn't?

Before we talk about the numbers…

NHCEH 2025 Annual Report

Some quick notes before we get started:

- The most recent data available to us is always a year behind
  - **The 2025 Edition analyzes data from 2024**
- I'm currently in the middle of writing the 2026 edition, so watch for its release later this year!
- **Caveat** – I know that there are a lot of slides and information in this presentation! (I'll send them out…)

NHCEH 2025 Annual Report

Some quick notes before we get started:

- **Who does HUD consider homeless?**
  - Emergency Shelter
  - Transitional Living Program
  - Hotel or Motel – not self-pay
  - Unsheltered
    - “In a place not meant for human habitation”

NHCEH 2025 Annual Report

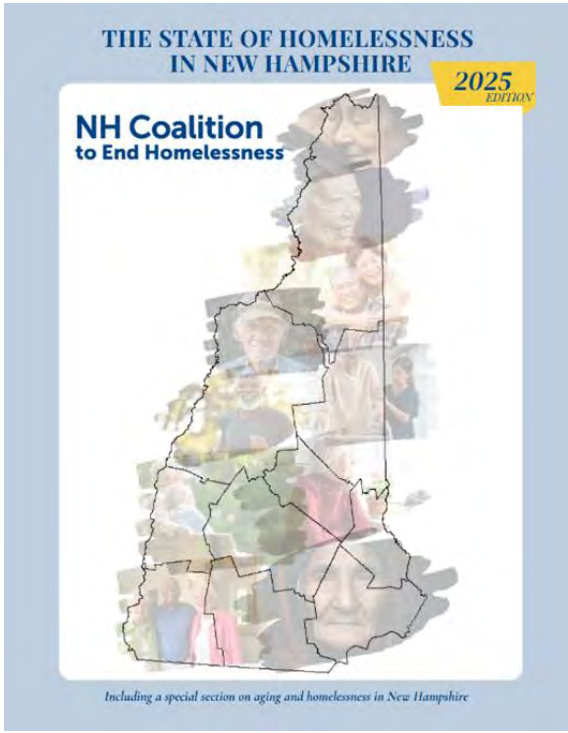
Some quick notes before we get started:

- **Who isn't homeless, per HUD?**
  - Hotel or Motel – paying their own costs
  - Doubled up or couch surfing
  - People living in Permanent Housing programs that house people experiencing homelessness

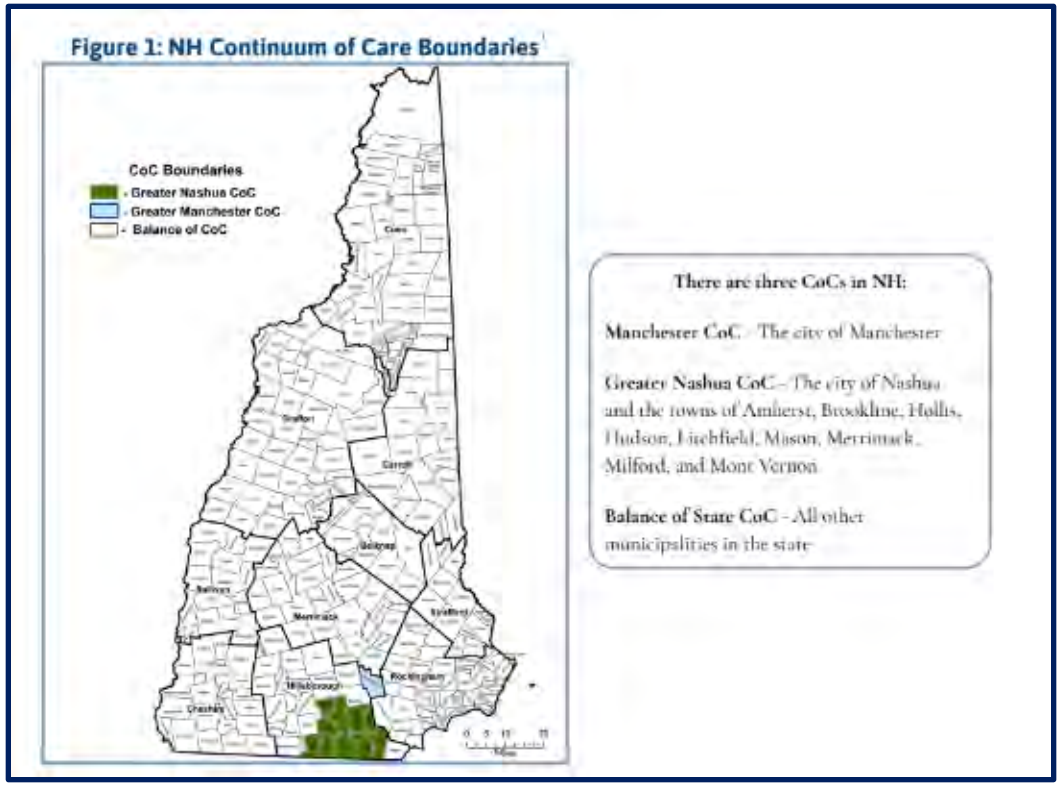
NHCEH 2025 Annual Report Sources

Data sources:

- **Point in Time (PIT) Count**
  - Data from one 24-hour period in late January 2024
  - Standard for national reporting and comparisons
- **Housing Management Information System (HMIS)**
  - Captures data across the entire 2024 calendar year
  - More robust data source, but not reported nationally



Continuums of Care (CoCs) in NH



- Each CoC collects its own PIT Count data
- This preliminary data is submitted to HUD
- HUD releases the AHAR* in (usually) December

* **AHAR** = Annual Homelessness Assessment Report



What does NH's overall homelessness data show?

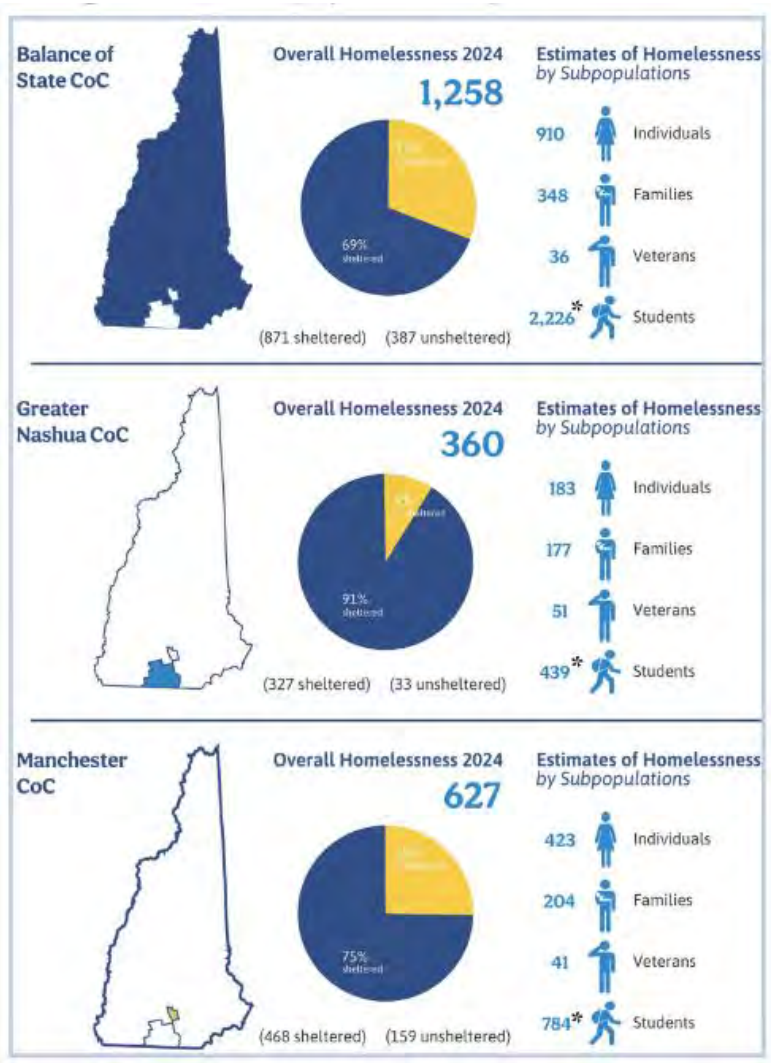
PIT Count: Overall Homelessness



In the 2024 PIT Count, NH had the ***3rd highest percentage decrease (- 8.0%)*** *in homelessness in the US…*

…which is positive, but does not tell the whole story!

2024 PIT by CoC



Myth:

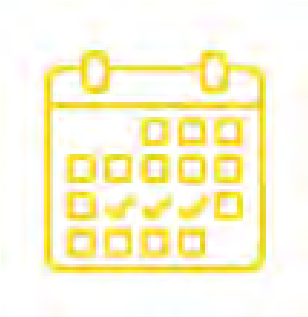
Homelessness is only an issue in NH's large cities, like Manchester and Nashua.

Reality:

Over half of the NH residents who experienced homelessness were located in the Balance of State CoC.

** Student data is from NH Department of Education, which uses a broader definition of homelessness than HUD*

2024 Year Long Data (HMIS)



Yearlong data from HMIS show ***6,281*** *NH residents experienced homelessness in 2024 –* ***more people than live in Hopkinton or Auburn***

1,721 *more Granite Staters experienced homeless in CY 2024 than in CY 2020*

What's Your Best Guess?

- **Throughout calendar year 2024, NH's Emergency Shelters* and Transitional Housing Programs* provided a total of how many bed-nights?**

449,769

** This total only includes programs that enter data into HMIS*

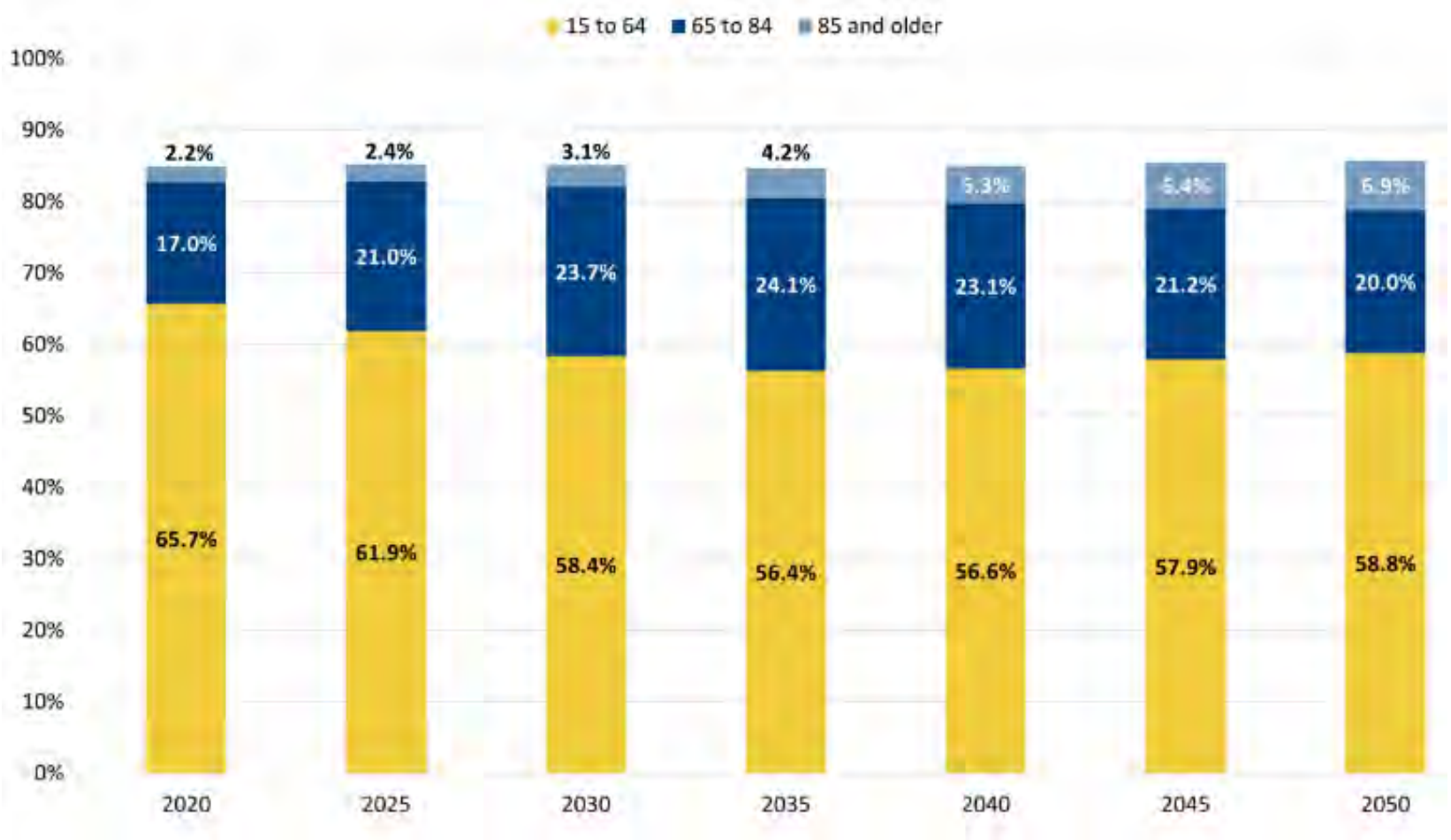


What about NH's older adults?

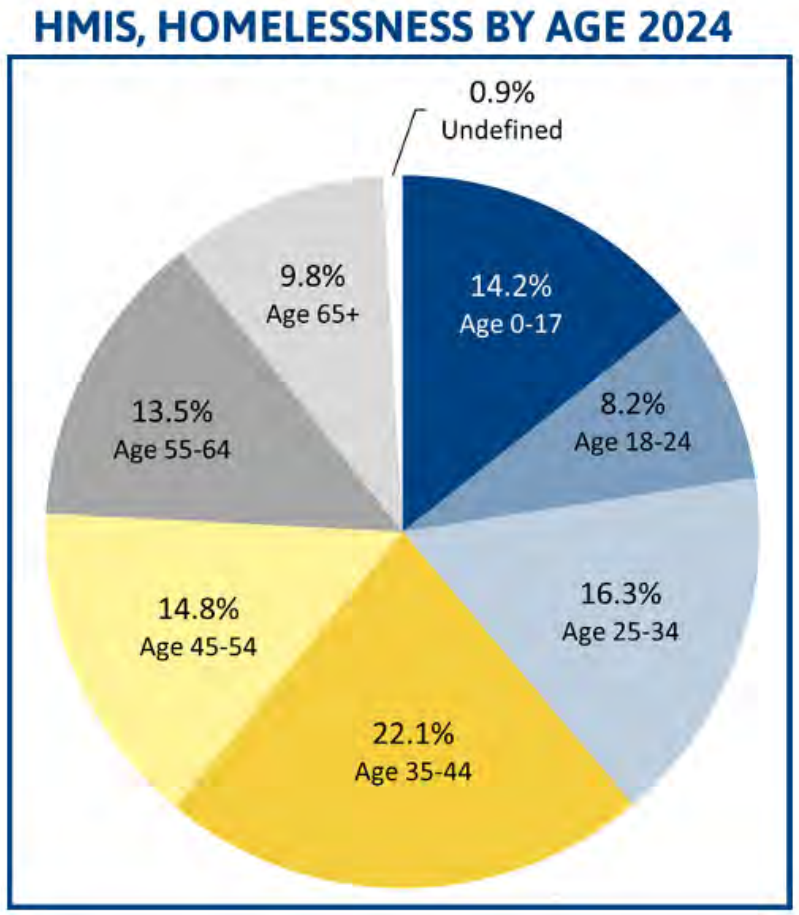


Homelessness among NH's older adults remains an area of critical concern

NH Age Projections, 2020-2050

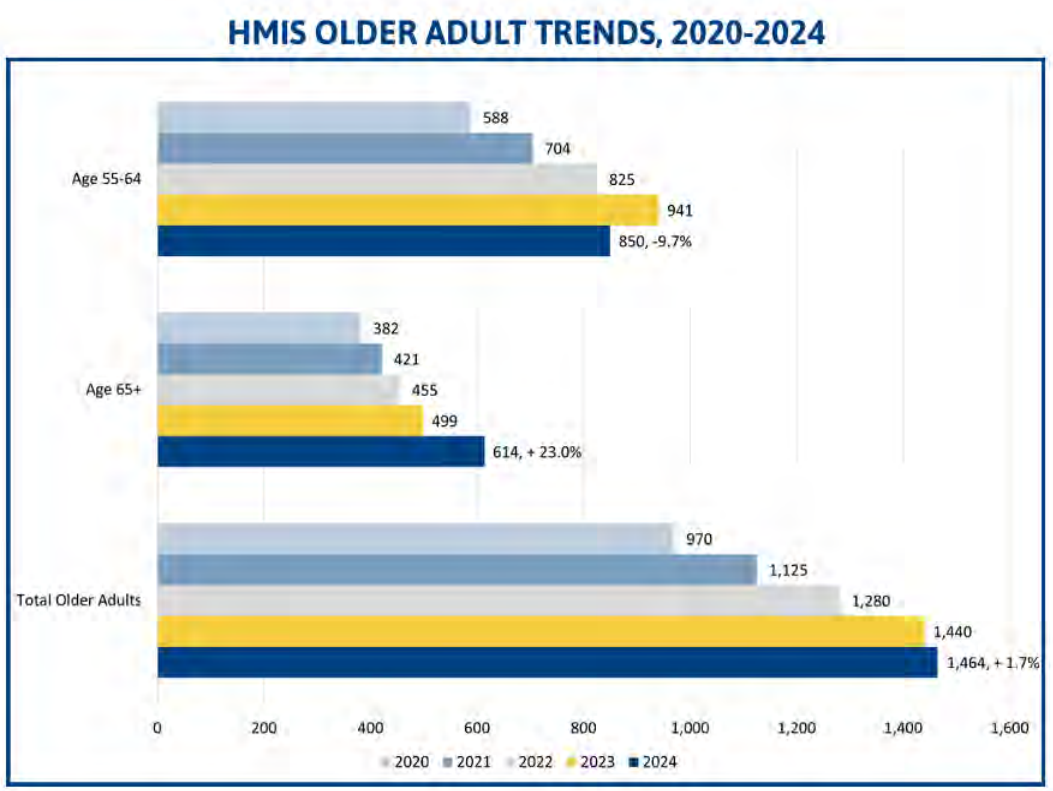


Homelessness – NH's Older Adults



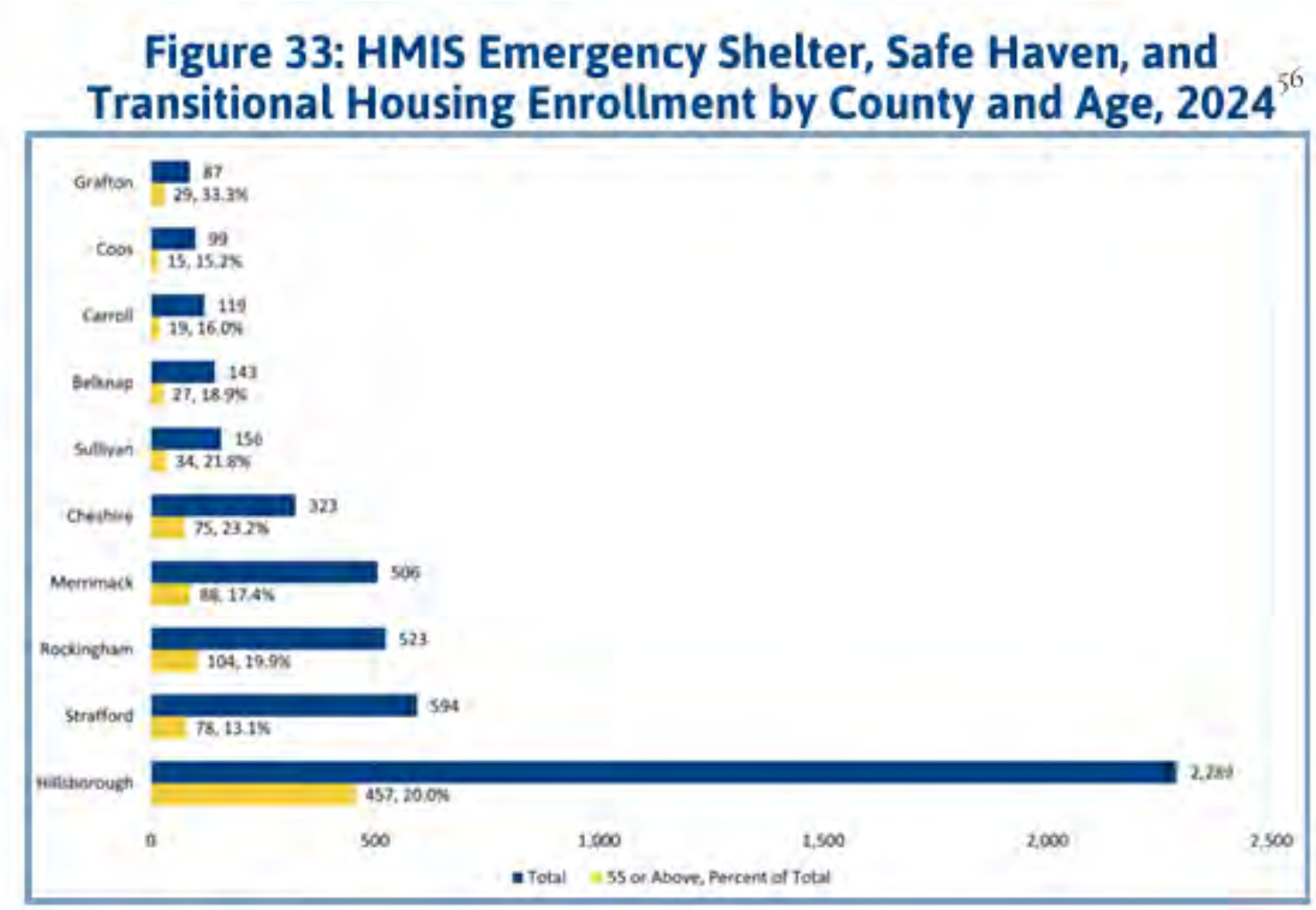
- **Almost 1 in every 4** people who were homeless in 2024 were ages 55+
- **About 1 out of every 10 people** were ages 65+

Homelessness – NH's Older Adults



- **Past year (2023-2024):**
  - Stayed nearly steady
  - **1.7% increase**
- **Past 5 years (2021-2024):**
  - **50.9% increase**
    - **+ 494 people**

Homelessness – NH's Older Adults



Older Adults in the 2024 PIT Count

Out of the total **2,245** people counted in 01/24:

- **Total older adults 55+: 442 people (19.7%)**
  - Ages 55-64: 294 people (13.1%)
  - Ages 65+: 148 people (6.6%)

Though a less robust count than the year-long numbers, it is still important to watch the PIT Count numbers!



Unsheltered homelessness in NH has more than quadrupled during the PIT Count from 2019 to 2025

Unsheltered Older Adults

2024 PIT Count:

- **Total older adults: 82 people (14.2%)**
  - Ages 55-64: 62 people (10.7%)
  - Ages 65+: 20 people (3.5%)

Economic Factors in NH

The discrepancy between income and the cost of living continues to be a driving factor in NH's homelessness

NH Housing Is Not Affordable



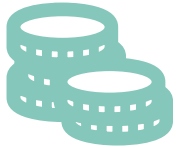
2024 Median 2 BR Monthly Rent:

$1,833



2024 Median Renter Income:

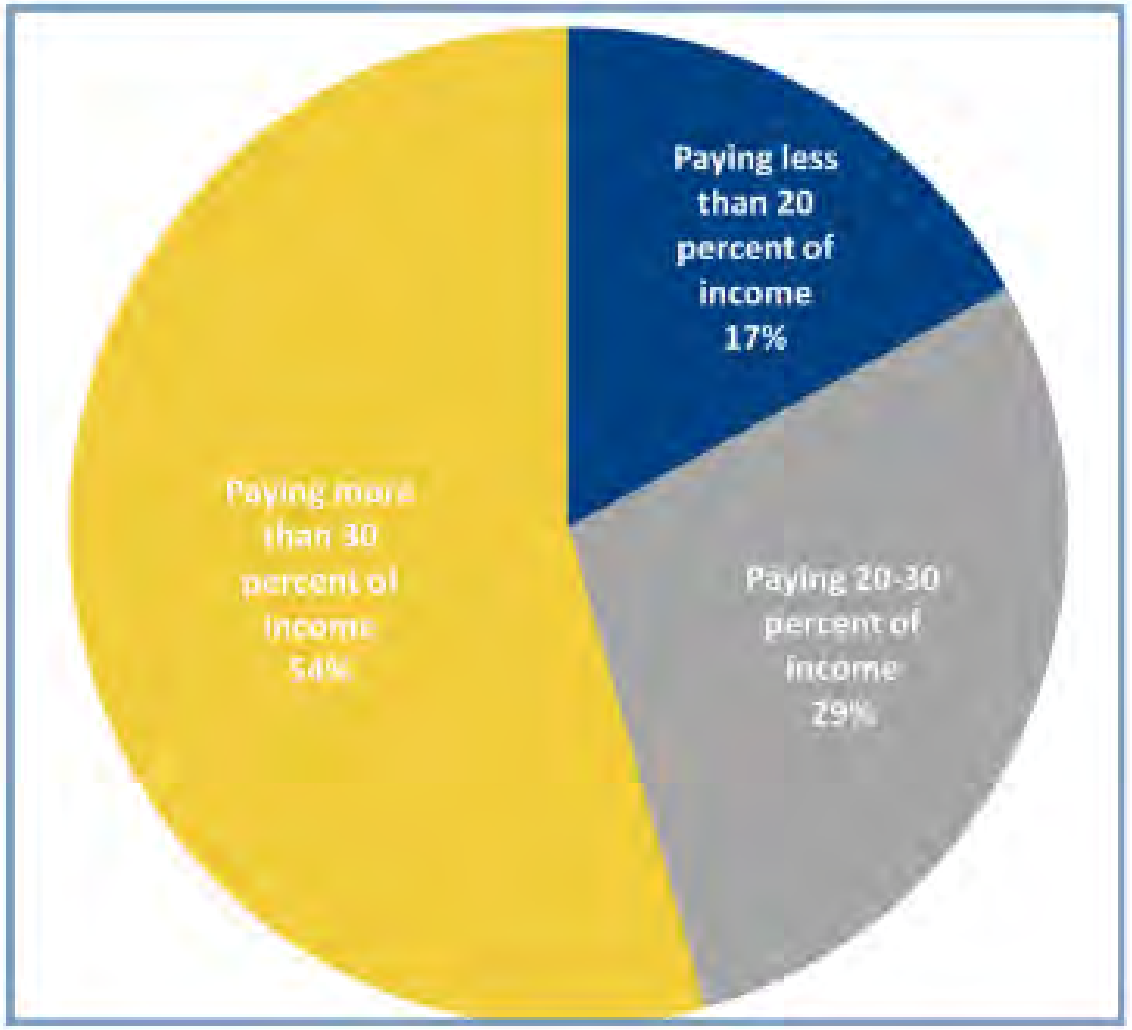
$56,814



Income needed to afford 2 BR:

$73,300

Cost Burdened Older Adults in NH - 2024



First Time Homelessness in Older Adults – NH 2024

Figures 35 - 37: First Time Homelessness by Age, 2024

Figure 35: Balance of State CoC[58]

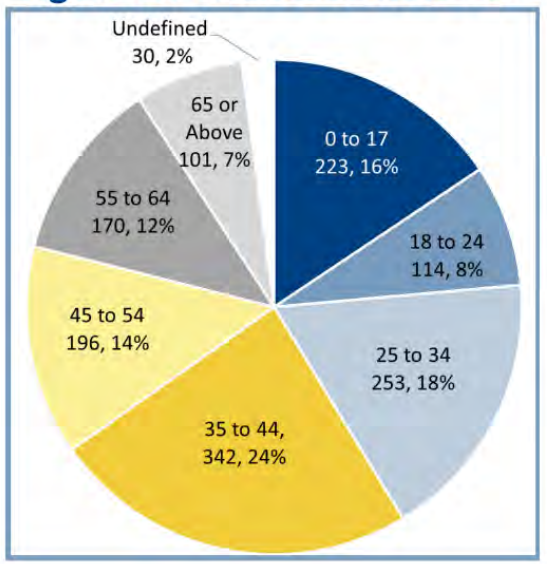


Figure 36: Manchester CoC[59]

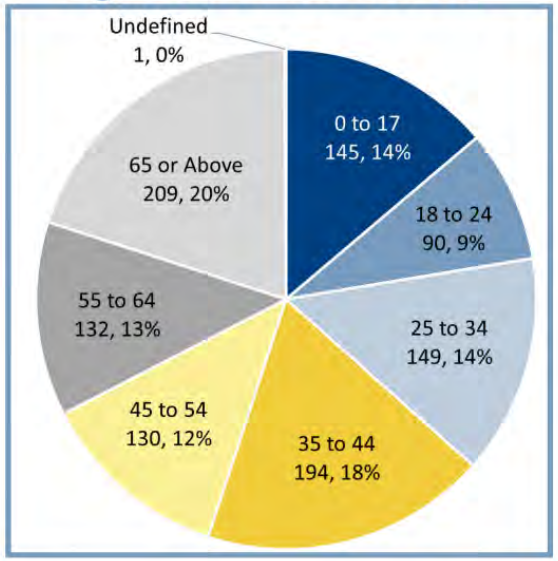
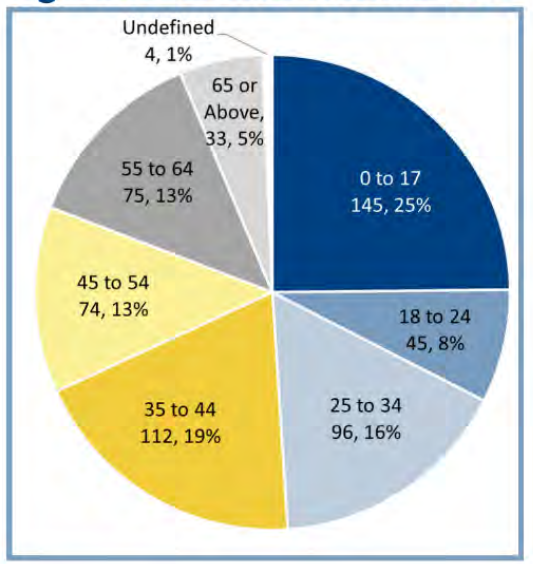


Figure 37: Greater Nashua CoC[60]



*"In 2024, **23.8% of individuals experiencing homelessness for the first time (whose ages were known) were older adults** (ages 55 and older) – a proportion higher than within NH's general population, meaning that older adults are overrepresented in this statistic. **Nearly one out of every four NH residents experiencing first-time homelessness in 2024 was an older adult**."*

2025 Edition – Calls to Action

- **Actively seek out and incorporate the voices of lived experience of homelessness in the process of policy and program development**
- Focus on service models that have demonstrated success in supporting people as they exit homelessness – especially individuals and families with complex needs
- Enhance homelessness prevention measures throughout the state
- **Develop and implement targeted strategies to address the increase in housing instability and homelessness among NH's seniors as NH continues to age**
- Reinforce housing affordability as a policy priority by supporting capital and regulatory initiatives that encourage the development of housing, including affordable and deeply affordable units, across NH
- Continue to build upon NH's success in further improving the state's homelessness data collection and accuracy
- Support the work of the Council on Housing Stability (CHS) in the implementation of their 2025-2028 Strategic Plan

Thank You!

Jennifer Chisholm, LICSW, MLADC
Executive Director
NH Coalition to End Homelessness
jchisholm@nhceh.org

To read the full report online, visit:
https://www.nhceh.org

To request a printed copy of the 2025 report, email:
info@nhceh.org


the
Coffee
Break
TIME
designed by freepik.com

NHAHA Updates



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Leadership Exchange on Ageism

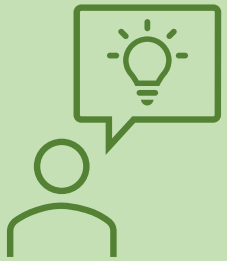
- The program is a participatory, peer-learning-centered leadership development experience that challenges participants to see their role in ending ageism.
- Training includes 4 virtual sessions; each about 3 ½ hours across 5 weeks.
- Designed for policy makers, executives, and leaders of organizations and in communities.

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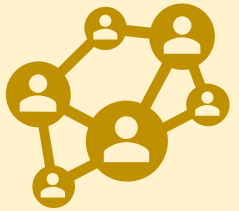
Goals of Leadership Exchange on Ageism



Change and enhance our understanding of ageism at all levels



Change the way we feel, think, and talk about aging and older people



Inspire us to take action to combat ageism in the institutions and systems in which we operate

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New Hampshire Alliance for Healthy Aging (NHAHA) 2025 - 2026 Strategic Planning Process

Research and Outreach to Identify Resources and Populations

Stage 1: November 2025

Steering Committee Meeting

Decision to move forward with facilitated approach to refine strategy



Stage 2: February 2026

Survey to Stakeholders

Clarifying "the North Star" and measures of success and factors supporting or getting in the way of healthy aging in our communities.



Stage 3: February 2026

In-Person Planning Session 1

Defined the results, tested "North Star" and measures, and prioritized factors.



Stage 4: March 2026

NHAHA Quarterly Meeting

Update stakeholders on planning process; prioritized factors; identified organizations addressing factors.



Stage 5: April 2026

2nd Survey to Stakeholders

Broad stakeholder prioritization of identified factors and examples of poor coordination (system, process, etc.) impacting older adults



Stage 6: May 2026

In-Person Planning Session 2

Establish agreement on priority factors, draft strategies, and performance measures.



Stage 7: May 2026

3rd Survey to Stakeholders

Test strategies and performance measures with broad stakeholder group



Stage 8: July 2026

In-Person Planning Session 3

Identify who and what is needed to implement strategies



Stage 9: October 2026

Steering Committee Meeting

Discuss Strategic Plan implementation and structures needed



Stage 10: Late Fall 2026

Stakeholder / Network Meeting Presentation

Present strategic plan. Celebrate 10 years and work to come.



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Looking Forward

Networking meeting with presentation of strategic plan to all stakeholders



Impact report



Table Activity

- **Instructions**:
  - Please choose a scribe to take notes. They will be collected at the end of the activity.
  - At each of your tables please discuss the following questions:
  - Enjoy! Get to know your tablemates.

Question 1: What have we collectively achieved over the last 10 years? What are our biggest successes?

******Field building*** *is the work of strengthening the relationships, infrastructure, leadership, knowledge, and collective capacity of people and organizations working toward a common goal.*

Question 2: This distinction is useful because field building isn't necessarily about asking, "What services do older adults need?" It's asking, "What do all of us who work in aging need to be more connected, coordinated, capable, and effective?"

Question 3: NHAHA plays a role in convening and providing education to the field. What do you see as the needs in these areas in the next few years? Are there specific topics, resources, connections, etc.?

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Congratulations Judith!



newfutures

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ADVOCACY

Save the Date!
2026 Quarterly Meetings

✓ **Thursday, December 17, 2026**



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Engage with NHAHA

NHAHA website

www.nhaha.info

Facebook

https://www.facebook.com/NHAHA603

X

https://x.com/NHAHA603

LinkedIn

https://www.linkedin.com/company/the-new-hampshire-alliance-for-healthy-aging

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Thank you for participating!

For questions or additional information, contact:

Jennifer Rabalais
jennifer.rabalais@unh.edu

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