Community Partnerships for Older Adults

Executive Summary

*Community Partnerships for Older Adults* was an eight-year, $28 million national initiative of the Robert Wood Johnson Foundation (RWJF) that ran from 2002 to 2010 and supported communities to:

- Foster collaborative partnerships at the community level
- Build community capacity to meet the needs of an aging society
- Create long-term-care and supportive systems improvements to better meet the needs of vulnerable older adults

CONTEXT

America’s population is growing older and living longer, with the senior population (age 65 and older) expected to double in the coming decades, according to the U.S. Census Bureau. Yet long-term-care services and supports are underfunded, poorly coordinated, biased towards institutional care, and characterized by significant gaps in essential services.

Better access to long-term, community-based health and social services could improve the quality of life for America’s older adults and their family caregivers. RWJF program staff believes communities can reach across institutional and generational boundaries to form partnerships that will help improve their service options. “A lot of solutions for potentially helping people age in the community lie outside the health care system,” said RWJF Senior Program Officer Jane Isaacs Lowe, who directs the Vulnerable Populations Portfolio.

THE PROGRAM

Under *Community Partnerships for Older Adults*, RWJF awarded 18-month, $150,000 development grants to partnerships in 24 communities ranging from large metropolitan...
areas to suburban communities to small rural towns. Sixteen of those communities were subsequently awarded four-year, $750,000 implementation grants. Some of the lead agencies were local Area Agencies on Aging, which already had a primary focus on aging; others were community groups with a broader mandate, such as United Way; and some were small, local public or nonprofit service agencies.

Each partnership defined its own priorities and approach to meeting the needs of older adults and their caregivers. Strategies included: developing neighborhood networks; improving the transition from hospital to home; removing cultural barriers to existing services; educating providers; supporting caregivers; expanding transportation options; and responding to crises.

Though the strategies differed, the process by which local partnerships engaged their communities was similar. Each partnership was expected to directly involve older adults as members and leaders, to develop a community-supported strategic plan to strengthen long-term-care and supportive services, and to mobilize community resources to support that plan.

**KEY FINDINGS AND RESULTS**

According to national program office reports to RWJF:

- **The partnerships in four of the eight communities that received only development grants ceased working together at the end of their grant periods.**

- **Fourteen of the 16 partnerships that received implementation grants were continuing their work in some form at the end of their grant periods.**

- **Some partnerships piloted new or best practices, assessed their viability and influenced their broader adoption.** For example, the Atlanta partnership helped to inform the adoption of zoning ordinances that promoted senior housing; the Jacksonville, Fla., partnership helped to embed elder advocates in hospitals to promote smoother hospital-to-home transitions.

- **Some partnerships redefined services to target frail elders and strengthened their focus on diverse groups, as defined by geography, race/ethnicity, or affinity.** One example is the community ambassador program created by the Pathways for Positive Aging Partnership in Fremont, Calif., which reached out to seven faith and ethnic communities.

- **The community partnerships helped put aging issues on the civic agenda by consolidating data about aging adults and making it more readily accessible.** For example, the Ann Arbor, Mich., partnership created a “Senior Data Book” that contained information about the needs and issues of aging adults; the Boston partnership collected data that created a full picture of aging in the city for the first time.
● Some partnerships offered a forum at which to discuss community challenges and get help in identifying solutions. For example, the partnerships in Houston and Broome County, N.Y., built on their collaborative relationships to deliver needed supports to older adults in crisis following natural disasters.

● Some of the strategic plans developed by the partnerships became benchmarks for funding organizations as they considered how best to allocate local resources for programs targeting older adults. For example, some local foundations in Boston, Houston and Milwaukee required potential grantees to explain how their work fit with the community-wide strategic plan.

EVALUATION FINDINGS

An evaluation team at Mathematica Policy Research surveyed 13 of the communities that received development grants and conducted a follow-up survey of eight of the implementation sites.

Mathematica had originally planned to evaluate the changes occurring in local long-term-care systems as a result of the partnership activities, but their many different approaches made it challenging to measure outcomes. Ultimately, evaluators did track changes where feasible, but also examined the characteristics of the partnerships—their leadership, their operating structures and lessons learned from their strategies.

Among the findings:

● While awareness and use of community-based services increased in the communities where the partnerships were located, there was a slightly greater increase in the proportion of vulnerable adults who tried but could not access services.

● Policy-makers were unable to attribute changes in state policy to partnership activities, but at the local level, the link was more apparent.

● Partnerships are not necessarily the best way to implement a project, given that nearly half the tactics used by partnerships during implementation could also have been used by individual organizations.

SIGNIFICANCE OF THE PROGRAM

The program called attention to long-term-care innovations in communities across the country. RWJF’s Lowe also noted that the partnerships helped to demonstrate that “what’s good for older adults in the way of community or local policy is good for everybody in the community.”

Phyllis Bailey, a consultant who served as the project’s senior information officer, said that “partnerships created that neutral table, where the bottom-line expectation was that
you talk to each other, you do it with courtesy and you do it understanding that it serves all of your interests.

“You can actually end up doing some pretty amazing things like attracting new resources, or making the ones you have go a lot farther in a scarce environment.”

**AFTERWARD**

Atlanta, Milwaukee and San Francisco embedded their partnerships into their lead agencies (for example, the Aging Atlanta Partnership has been integrated into the Area Agency on Aging). Other partnerships continue to operate with local or federal funding or with staff support from partner organizations.

With the close of the national program office, current activities and funding structures are not closely tracked. However, 13 partnership communities continue to share resources and information through a “Staying Connected” group.

**Program Management**

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