

Faith in Action: Taking Caregiving to Scale

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Ozzie Powell was an 82-year-old widow in Hattiesburg, Mississippi, who had lost her leg to diabetes and needed someone to mow her lawn.

Doris Baker Wilson, who lived in Sitka, Alaska, had been crippled by polio more than fifty years ago, and more recently by a stroke, and now needed someone to provide respite care so that her husband and severely disabled son could get out of the house once in a while to pick up groceries and maybe shoot some pool.

In East Machias, Maine, 63-year-old Arlene Smith was hooked up to a mechanical ventilator as she fought the ravages of amyotrophic lateral sclerosis (ALS) and just needed someone to pay her a friendly visit from time to time and run occasional errands.

While these three women lived in very different parts of the country and had very different medical conditions, they all shared a common need for informal care and support – simple things like mowing the lawn, a few hours of respite care, and running errands.

Fortunately, there was something else that they had in common: all three women were having those needs met by volunteers from their local Faith in Action programs, each of which had received initial funding from the Robert Wood Johnson Foundation (RWJF). Their stories, and those of many other elderly and disabled Americans – as well as the remarkable volunteers who

have helped them out – are the main focus of my book about the Faith in Action program, *Promise to Mary: A Story of Faith in Action*,

distributed earlier this year to Grantmakers In Health Funding Partners by RWJF.

Over the course of the past fifteen years, the Faith in Action program has provided roughly 1,700 seed grants of up to \$35,000 to help start local, interfaith volunteer caregiving programs. These programs are designed to provide free volunteer services to the large and growing number of elderly and disabled individuals who, like Ozzie, Doris, and Arlene, need help with simple, everyday tasks in order to be able to stay in their homes. Of course, as is true with any packet of seeds from the garden store, not all of the Faith in Action seed

grants have germinated, and of those that have, not all have survived beyond their RWJF grants. But many have. A recent survey by the University of South Carolina has identified 629 active Faith in Action programs currently operating nationwide, serving some 75,000 persons annually.

THE MODEL

The idea behind Faith in Action began on a much smaller scale, 10 years before the program was launched, when Terrance Keenan persuaded his colleagues at RWJF to support a modest 25-site pilot initiative called the Interfaith Volunteer Caregivers Program. The purpose of this demonstration program, which ran from 1983 to 1986, was to test the notion that local congregations of different faiths could come together, hire a full-time director, and recruit and train volunteers from participating congregations to provide informal care to frail elderly persons living in their communities.

The logic behind the model was straightforward. As America's population grew older, especially with the aging of the Baby Boom generation, the need for informal care was clearly going to mushroom. Medicare and Medicaid, already stretched by rapidly rising health care costs and an aging population, did not pay for these kinds of services, and working-age women, who in the past had done much of the

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informal caregiving, were entering the workforce in record numbers, leaving them far less time to care for aging relatives and neighbors.

There was, however, one largely untapped resource that might provide at least a partial answer: the nation's 330,000 faith congregations. All the major faiths held caring for those in need as one of their central tenets, and in fact, many congregations already provided some informal care to sick and frail elderly members. But often these efforts were limited to a handful of volunteers, with little or no staff support to recruit, train, and supervise volunteers or to develop necessary

linkages with other community services.

And so the idea behind the interfaith volunteer caregiving model was that a coalition of congregations could generate enough volunteers to warrant hiring a full-time director, as well as more resources to pay that individual's salary. Moreover, because of its interfaith composition and a strict prohibition against proselytizing, the program would presumably be more acceptable to those it was designed to serve – and to many of the local funding sources that would be called upon to help support it once RWJF's start-up grants ended.

While the idea looked reasonable enough on paper, the track record of genuine interfaith collaboration, apart from the occasional ecumenical breakfast, was remarkably meager in 1983. The question, therefore, was whether it would work in the real world. Happily, it did. Of the 25 sites that were

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funded, 24 were successful. Better yet, five years after the end of their RWJF grants, 20 of the 24 were still going strong with funding sources that included local civic groups, businesses, foundations, hospitals, city and county government, United Way, individual donors, and the participating congregations themselves.

FROM PROTOTYPE TO SCALE

But now there was a problem. Typically when a national foundation funded a demonstration program to test a new model of care, the assumption was that, if the model worked, the federal government would put up the funding to replicate it nationwide. But in 1986 there was little prospect that the federal government would support a program that involved religious congregations.

So RWJF provided some modest support for a new organization, the National Federation of Interfaith Volunteer Caregivers, and encouraged its board to seek funding from other foundations to help start new programs. Several foundations did step forward to support the federation, including The Pew Charitable Trusts, The Commonwealth Fund, The Atlantic Philanthropies, and the Public Welfare Foundation.

The Public Welfare Foundation's approach turned out to be especially fruitful. Terri Langston at the foundation told the federation that while she wanted to fund the startup of interfaith volunteer caregiver programs, the grants would have to be a good deal smaller than those that RWJF had given: 60, one-year "seed" grants of \$20,000 (plus technical assistance) instead of 25, three-year grants of \$150,000. In effect, the Public Welfare Foundation's seed grants would be

a test of whether the relatively expensive prototype model could be rolled off the assembly line at a more affordable price.

It worked. Building on the lessons learned from the Interfaith Volunteer Caregivers Program, most of the Public Welfare Foundation grantees were able to develop solid, sustainable programs – and at a fraction of the original cost. It was this realization that set the stage for RWJF, in 1993, without the involvement of the federal government, to take the model that it had first piloted 10 years earlier to scale through its own Faith in Action program.

LOOKING AHEAD

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expanded with funding from a large foundation and a few of its sister foundations. Over time, however, it has evolved into a model that nearly any funder, of any size, could stimulate and support. The model taps into the great strength and reach of the

nation's congregations and addresses one of the most critical issues facing the country – the aging of its population. Moreover, it is a model that works. The many years of support from RWJF and other national and local funders have helped shape the model into something that now has great promise to continue to grow and thrive in communities across the nation.

Among the first to recognize this potential for continued growth were those on the front lines. Shortly after RWJF announced that its funding for Faith in Action would end in June 2008, a group of 25 local Faith in Action directors came together of their own volition and formed a new nonprofit membership organization, which they called the Faith in Action National Network. The purpose of the network is to provide ongoing technical assistance and support to existing Faith in Action programs, and, over time, to assist additional communities across the country seeking to establish similar programs of their own.

With the aging of the Baby Boom generation that Terrance Keenan anticipated 25 years ago now upon us, the network hopes that eventually every community in America that wants and needs a program like Faith in Action – and every Ozzie, Doris, and Arlene – will have one.

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