Taking Action in Aging Issues:
Creating an Agenda, Finding Common Ground

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This year, the State of California faces a $35 billion budget shortfall. While California is by far the most extreme case, states around the country are facing huge deficits and are being forced to consider cuts in programs and services that we would have considered unthinkable a few years ago. At the same time the market conditions have negatively affected most of our endowments – just at a time when our resources are most needed by the communities we serve.

These economic times are leading us to consider ways to be more creative and strategic in how we pursue our missions. Communication, coordination of efforts, and collaboration with others in the field are strategies that we should strive to expand. As a long-time member of Grantmakers In Health and Grantmakers in Aging, and as the current president of Grantmakers in Aging, I have had the opportunity to see what a rich resource we have in the two organizations.

Last July, representatives of several foundations who also are members of both Grantmakers in Aging and Grantmakers In Health met to explore the intersection of health and aging. It was an opportunity to explore how our work could be more strategic and how both organizations could work together in times of limited resources. The need for collaboration is also being driven by the aging of our society. Of the 281 million people in the United States in 2000, 12.5 percent were over the age of 65. By 2020, we expect that number to increase to 16.6 percent. The vast majority of seniors living in their own homes are active and engaged and contributing to their communities. There are also seniors with profound need in our communities. We need to rethink their role in community and our role in engaging them in our missions. We need to find ways to communicate, coordinate our efforts, and collaborate to build a sustainable agenda that serves our communities across the entire life span.

Throughout the course of the day, meeting participants articulated a set of common principles for working collaboratively on an aging agenda. I think they can be easily applied, regardless of our size, resources, or focus areas. They are listed below.

- In creating an agenda that can draw on a wide constituency, consider a community agenda through the lens of aging, rather than creating a separate aging agenda.
- Attend to elders in all areas of concern, whether it is health care, transportation, housing, community development, workforce, family, education, etc. Be attentive to not cutting off the agenda by age. Look at the concern across the lifespan.
- Make a common statement as funders that our aging society is a priority. We have a growing population of elders reflecting a profound demographic change that must be attended to – it has urgency.
- The demographic changes are long-term, so they require a public commitment to attend to them as part of a long-term agenda.
- Commit to open communications and collaboration as a core value and make it a priority in working with each other and with other potential partners.

Communication and coordination of our efforts as funders were other strategies that we began to explore that day and can continue to build upon. Grantmakers in Aging maintains an active listserve for funders with an interest in aging to share resources and build collaboration. Grantmakers In Health has strong supportive services for funders and great capacity for organizing timely and effective conferences and member briefings. Each organization maintains Web sites and produces excellent newsletters and proceeding documents from their convenings. To assist us working at the intersection of health and aging, the two organizations have committed to working together to offer a joint session at each of their annual conferences.

What are some of the intersections that we see? Among them...
are environment, disability, education, the arts, civic engagement and volunteerism, health care, community, transportation, housing – the list could go on. Grantmakers in Aging developed a toolkit for funders, which they continue to expand, to suggest ways that these intersections may be addressed. The following outlines some possible intersections between aging and health that could benefit from our collaboration:

ENVIRONMENT
The Environmental Protection Agency is launching an initiative to involve senior volunteers in community-based environmental protection activities, as well as looking at differential susceptibility of elders to environmental toxins/pollution. The Environmental Alliance for Senior Involvement mobilizes seniors to do water quality monitoring, radon testing, brownfield restoration, and more. Funders concerned with the environment and funders in aging may find some common ground on these efforts.

DISABILITY
Disability increases with age, with 40 percent of those over 65 years being disabled, and that jumps to 56 percent of those over 85. That group over 85 also happens to be the fastest growing segment of our population. Our work in access to care and community accessibility serves both the aging and disabled populations. The Disability Funders Network, Grantmakers In Health, and Grantmakers in Aging share a constituency with compelling need in this intersection. The 2002 Grantmakers in Aging Annual Conference had a jointly sponsored session highlighting this issue and identified strategies that we may undertake.

FAMILY CAREGIVING
Nearly three-quarters of care to impaired elders in the community is provided by the informal network of family and friends. These caregivers are affected both economically and in their health status by the lack of effective and coordinated support of the frail elders and chronically ill. Funders with a focus on family issues would find common ground in this area.

CIVIC ENGAGEMENT
Elders are a rich source of volunteers who serve many of the youth, arts, education, and health organizations that we fund. Intergenerational activities are giving value and purpose to elders, enrich and nurture the lives of youth, and result in a healthy community.

ELDER ABUSE
Approximately 2 million American elders are abused, neglected, or exploited each year, and for each reported case it is estimated that five cases go unreported. Social services, justice, law enforcement, and health care intersect in this issue. Those concerned with family violence, social justice, and health can find rich possibilities for supporting collaboration on this complex issue.

EXERCISE AND WELLNESS
Exercise and wellness programs positively affect health and well-being, regardless of where you are in the age span. Dynamic work had been supported by foundations to bring balance, mobility, and strength training into assisted living and nursing homes. The results are demonstrative with significant improvements in health, well-being, and injury prevention. The move to active aging, walkable communities, and safe community options for exercise provide another area for broad-based collaboration and coordination of our efforts.

WORKFORCE DEVELOPMENT
The health care workforce and the attendant shortages in high-quality trained professionals across the disciplines with the ability to serve our diverse populations is another key area for collaboration among funders in health and aging. Thoughtful planning and significant resources will be needed to address this issue.

As separate foundations, or even separate organizations, we remain challenged to make a lasting impact. Through communication, coordination of our efforts, and collaboration, we can improve the health of our aging society, even in tough economic times.

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VIEWS FROM THE FIELD is offered by GIH as a forum for health grantmakers to share insights and experiences. If you are interested in participating, please contact Angela Saunders, GIH’s communications manager, at 202.452.8331 or asaunders@gih.org.