

**V(A). Planned Program (Summary)**

**Program # 7**

**1. Name of the Planned Program**

Aging in Our Communities

**V(B). Program Knowledge Area(s)**

1. Program Knowledge Areas and Percentage

KA Code	Knowledge Area	%1862 Extension	%1890 Extension	%1862 Research	%1890 Research
801	Individual and Family Resource Management	40%			
802	Human Development and Family Well-Being	40%			
805	Community Institutions, Health, and Social Services	20%			
	<b>Total</b>	100%			

**V(C). Planned Program (Inputs)**

1. Actual amount of professional FTE/SYs expended this Program

Year: 2010	Extension		Research	
	1862	1890	1862	1890
Plan	2.8	0.0	0.0	0.0
Actual	3.3	0.0	0.0	0.0

2. Actual dollars expended in this Program (includes Carryover Funds from previous years)

Extension		Research	
Smith-Lever 3b & 3c	1890 Extension	Hatch	Evans-Allen
108518	0	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
162776	0	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
0	0	0	0

**V(D). Planned Program (Activity)**

1. Brief description of the Activity

The statewide Aging in Our Communities Team works to develop and evaluate research-based educational programs that address needs of those caring for Wisconsin's diverse aging population. The team offers a six-week "Powerful Tools for Caregivers" workshop series that helps caregivers cope with problems and stresses inherent in their work. Aging services in Kewaunee and Marinette counties turned to Wisconsin Cooperative Extension to conduct needs assessments and facilitate the process of developing a caregiver coalition. Community resource development educator Claire Thompson responded by conducting a "Caregiving in Kewaunee County" needs assessment, and CRD Educator Paul Putnam responded by helping Marinette County Elderly Services and Respite Care form a county-wide family caregiver coalition.

**2. Brief description of the target audience**

Of 3,250 adults reached through direct teaching methods in 2010, 95.5 percent were white, 1.5 percent were American Indian, 0.7 percent were African American, 0.3 percent were Asian American and 2 percent were of other identity; 71.4 percent were female and 28.6 percent male; 2.6 percent were Latino. Educational partners and 92 trained volunteers made additional teaching contacts.

Community-based professionals and volunteers work directly with family caregivers, who are defined (in the 2008 Wisconsin county government employee survey) as people who have provided at least one of the following caregiving responsibilities for an adult family member or friend in the previous six months: driving to appointments, assisting with home maintenance, grocery shopping, preparing meals, completing forms, assisting with bill payment, arranging meals or appointments, providing personal care, or arranging services for a long-distance friend or family member.

**V(E). Planned Program (Outputs)**

**1. Standard output measures**

2010	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
<b>Plan</b>	4000	0	0	0
<b>Actual</b>	3250	0	0	0

**2. Number of Patent Applications Submitted (Standard Research Output)**

**Patent Applications Submitted**

Year: 2010  
 Plan: 0  
 Actual: 0

**Patents listed**

**3. Publications (Standard General Output Measure)**

**Number of Peer Reviewed Publications**

2010	Extension	Research	Total
<b>Plan</b>	0	0	
<b>Actual</b>	2	0	2

**V(F). State Defined Outputs**

**Output Target**

**Output #1**

**Output Measure**

- {No Data Entered}

**V(G). State Defined Outcomes**

**V. State Defined Outcomes Table of Content**

O. No.	OUTCOME NAME
1	Caregivers are better prepared to make decisions related to their caregiving roles and responsibilities.
2	UW-Extension colleagues and stakeholders will understand the impact of an increasing aging population on their communities.
3	Individuals and families are better prepared to make decisions related to financial security in later life.
4	Caregivers/ participants increase their knowledge about being a family care provider.
5	Caregiver/Participants adopt family caregiver skills to assist them as a care provider.

**Outcome #1**

**1. Outcome Measures**

Caregivers are better prepared to make decisions related to their caregiving roles and responsibilities.

Not Reporting on this Outcome Measure

**Outcome #2**

**1. Outcome Measures**

UW-Extension colleagues and stakeholders will understand the impact of an increasing aging population on their communities.

Not Reporting on this Outcome Measure

**Outcome #3**

**1. Outcome Measures**

Individuals and families are better prepared to make decisions related to financial security in later life.

Not Reporting on this Outcome Measure

**Outcome #4**

**1. Outcome Measures**

Caregivers/ participants increase their knowledge about being a family care provider.

**2. Associated Institution Types**

- 1862 Extension

**3a. Outcome Type:**

Change in Knowledge Outcome Measure

**3b. Quantitative Outcome**

Year	Quantitative Target	Actual
2010	{No Data Entered}	1950

**3c. Qualitative Outcome or Impact Statement**

### **Issue (Who cares and Why)**

Based on a 2009 national survey, it is estimated that 43.5 million people in the U. S. provide some level of care for an adult age 50 or older. According to this survey nearly eight in ten caregivers want more information on such topics as keeping a loved one safe at home, communicating more effectively with the care recipient and other family members, balancing work and eldercare, and managing caregiver stress (National Alliance for Caregiving and AARP, 2009).

### **What has been done**

UWEX staff have been involved in training more than 500 persons to lead at least one of four evidence-based curricula designed to provide caregivers with important information: Powerful Tools for Caregivers, Caregiving Relationships, Caregiving Near Life's End, and Elder Care and Work: Finding the Balance. Class leaders are now available to teach at least one of these curricula in nearly 90 percent of Wisconsin's 72 counties. To date, more than 7,000 family caregivers have received training. Twenty-one Powerful Tools for Caregivers courses were offered at locations in 15 Wisconsin counties in 2010.

### **Results**

Two hundred caregivers who took the Powerful Tools for Caregivers instruction assessed themselves in twelve areas both before and after taking the course. In all instances, average self-assessment ratings were significantly higher after participants had completed the course. When asked to describe how the course had impacted their lives, most participants offered positive comments such as this one: "It helped me personally to really see myself-where I am and how I've dealt with things in the past and now... it's given me tools I need to stay healthy and optimistic, and have a better future when life sends me more challenges."

## **4. Associated Knowledge Areas**

<b>KA Code</b>	<b>Knowledge Area</b>
801	Individual and Family Resource Management
802	Human Development and Family Well-Being
805	Community Institutions, Health, and Social Services

## **Outcome #5**

### **1. Outcome Measures**

Caregiver/Participants adopt family caregiver skills to assist them as a care provider.

### **2. Associated Institution Types**

- 1862 Extension

### **3a. Outcome Type:**

Change in Action Outcome Measure

**3b. Quantitative Outcome**

Year	Quantitative Target	Actual
2010	{No Data Entered}	0

**3c. Qualitative Outcome or Impact Statement**

**Issue (Who cares and Why)**

U.S. Census data indicate that as of 2011 nearly 10,000 baby boomers are turning 65 years old every day, and that this age group will be nearly one-fifth of the population by 2030. Fifty-nine percent of family caregivers either work or have worked while providing care. Sixty-two percent of employed caregivers have had to make some adjustments to their work life, from reporting late to work to giving up work entirely (National Alliance for Caregiving and AARP, 2004). Older Americans Act Reauthorization Amendments of 2000 and 2006 established the National Family Caregiver Support Program, requiring local aging units to convene or join a family caregiver coalition or coordinating committee that provides support services to family caregivers.

**What has been done**

Aging services in Kewaunee and Marinette counties turned to Wisconsin Cooperative Extension to conduct needs assessments and facilitate the process of developing a caregiver coalition. Community resource development educator Claire Thompson conducted a "Caregiving in Kewaunee County" needs assessment. This assessment identified caregivers' need for emotional support, respite care, education, help finding services, help with tasks and transportation, and financial support. The assessment also identified a need for networking among service providers to help them make proper referrals for clients. The research provided direction to a budding caregiver coalition to address these needs. When Marinette County Elderly Services and Respite Care agency secured funding from the Greater Wisconsin Agency on Aging Resources, CRD Educator Paul Putnam helped them form a county-wide family caregiver coalition.

**Results**

The Kewaunee Caregiver Coalition has a strong core of volunteers and an agenda for change. The group plans to develop and implement a caregiver providers network, and also a community resource guide for caregivers with the Brown County United Way 211 Community Information Line. It has begun conversations with NEW Curative Rehabilitation, Inc., in Green Bay to start an adult day care/respite care program in Kewaunee County. The Marinette County Caregiver Coalition developed an action plan focusing on marketing and outreach. Grant requirements are being met. Coalition members represent 28 groups, agencies and associations from Michigan and Wisconsin.

**4. Associated Knowledge Areas**

KA Code	Knowledge Area
801	Individual and Family Resource Management
802	Human Development and Family Well-Being
805	Community Institutions, Health, and Social Services

## **V(H). Planned Program (External Factors)**

### **External factors which affected outcomes**

- Economy
- Appropriations changes
- Public Policy changes
- Populations changes (immigration, new cultural groupings, etc.)

### **Brief Explanation**

## **V(I). Planned Program (Evaluation Studies and Data Collection)**

### **1. Evaluation Studies Planned**

- After Only (post program)
- Before-After (before and after program)
- Time series (multiple points before and after program)
- Other (Direct observation)

### **Evaluation Results**

### **Key Items of Evaluation**