

## Editorials

training, from corrections personnel to health care providers to clergy and mental health workers. At the same time, our legislative bodies should become aware of the consequences of the graying behind the walls.

To read the report, go to:  
[www.hrw.org/reports/2012/01/27/old-behind-bars-0](http://www.hrw.org/reports/2012/01/27/old-behind-bars-0)

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## From the Commissioner, Virginia Department for Aging and Rehabilitative Services

Jim Rothrock

### *The Importance of Planning*

I recently read an interesting article on a research project conducted by the NORC Center for Public Affairs Research. It was an extensive study of public attitudes related to long-term care in the United States. Their major finding noted that few Americans ages 40 or older are prepared for long-term care, care that they expect to need in the future, and even fewer understand the financial costs involved.

I was shocked, but I guess not surprised to see that Americans 40 or older are counting on their families to provide assistance for them as they age, and that a majority support a variety of policy options for financing long-term care.

Critical elements or findings from the NORC study are as follows:

- Many Americans ages 40 or older rely on their families for long-term care, and caregivers provide ongoing living assistance to a variety of family members; four in 10 caregivers have provided care to their mothers.
- Caregivers' experiences with providing care are mostly positive, though perceptions are shaped by demographics and specific family relationships between the caregiver and the recipient.

- Americans ages 40 or older who have personal experiences with long-term care are more likely to be concerned about planning for long-term care and less likely to think they can rely on family as they age.

- One-third of Americans ages 40 or older are deeply concerned that they won't plan enough for the care they might need when they get older, yet two-thirds report having done little or no planning so far for such assistance.

- Among Americans ages 40 or older who expect to be a caregiver for family or friends in the next five years, just three in 10 say they feel prepared to take on the job.

- Compared to one year ago, Americans are currently more supportive of a government-administered long-term care insurance program, similar to Medicare, and think that a number of measures would be helpful for improving the quality of ongoing living assistance.

- Americans lack information about ongoing living assistance. When they do get such information, they tend to hear about it from friends, family or co-workers, although they have more trust in long-term care information they receive from experts.

- Six in 10 Americans ages 40 or older have some experience with long-term care, either as caregivers, recipients of care or financial providers of care. Those who have experienced long-term care tend to be female, lower-income, and in the Baby Boomer generation.

I would encourage our readers to

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gain more information, including the survey's complete findings, by searching the website at [www.apnorc.org](http://www.apnorc.org).

When our agency worked with Dr. Bill Hazel on Virginia's *Blueprint for Livable Communities*, we cited information from Governor McDonnell which noted that:

*Virginians spend an estimated 739 million hours each year serving informally as caregivers to their adult family and friends, at an average lifespan cost to each caregiver of \$635,000 in lost wages and pension. With an estimated 700,000 Virginians serving as informal caregivers at any one time, the lifetime opportunity cost to family caregivers will total at least \$400 billion in lost wages, pension, and Social Security in Virginia alone, not including the state tax revenue that those earnings would have produced. Furthermore, these statistics refer only to caregivers of older adults and do not include the tens of thousands of Virginians who care for children with temporary or lifelong disabilities and special needs.*

Clearly, family caregiver is both widespread and costly, in human and economic terms. During the past year, our agency also was successful in garnering and managing **The Virginia Lifespan Respite Voucher Program**, funded through a grant of over \$200,000 to the Virginia Department for Aging and Rehabilitative Services (DARS) from the federal Department of Health and Human Services, Administration on Aging, Office of Home and Community Based Services. This was a productive project where our agency worked col-

laboratively with the Virginia Caregivers Coalition.

The Virginia Lifespan Respite Voucher Program provided reimbursement vouchers to home-based caregivers for the cost of temporary, short-term respite care provided to individuals of any age with a disability or special need. Program characteristics included:

- Voucher funding was limited to a total of \$400 a family.
- 503 families were served.
- Age range of the individuals served by the respite care recipients was 1-102 years old.
- Respite care recipients represented 80 different disabilities or health-related issues; many had multiple disabilities.
- Caregivers requesting respite included parents, adult children, siblings, grandparents, and legal guardians.

DARS hopes to receive additional funding to continue offering this service that family caregivers so desperately need. It's a small measure to support the familial and uncompensated care network that the Commonwealth relies upon.

Each of us should plan for our future. We should consider contacting our local Area Agency on Aging and other resources to gain information about available resources and should take action. If you do so, you will be in an informed minority and, hopefully, be well prepared for the future.

## 2014 DARS Meeting Calendar

**Commonwealth Council on Aging**  
(Wednesdays)  
September 24, 2014

**Alzheimer's Disease and Related Disorders Commission**  
(Tuesdays)  
August 5, 2014  
December 2, 2014

**Public Guardian and Conservator Advisory Board**  
(Thursdays)  
September 18, 2014  
November 20, 2014

For more information about these meetings, call (800) 552-5019 or visit <http://vda.virginia.gov/boards.asp>.

## Visit Our Websites

The website for the Virginia Center on Aging is [www.sahp.vcu.edu/vcoa](http://www.sahp.vcu.edu/vcoa). Visit to learn about programs from lifelong learning to geriatrics training, to access the archives of issues of *Age in Action*, ARDRAF reports, and more. The website of the Virginia Department for Aging and Rehabilitative Services is [www.dars.virginia.gov](http://www.dars.virginia.gov). Visit to learn about services, commissions, boards, and councils on adult protective services, aging, Alzheimer's, guardianship, independent living, and more.

## Focus on The Virginia Center on Aging

Ruth Anne Young



Ruth Anne Young is the newest member of the VCoA's team focusing on abuse in later life, joining in

February 2013. She serves as the Project Coordinator for the Virginia Elder Justice Training and Services Grant Project (VEJTS), one of nine funded for the 2012-2015 grant cycle by the US Department of Justice Office on Violence Against Women.

This project concentrates on the communities of Bristol City and Washington County in Southwest Virginia. It seeks to enhance the safety of victims aged 50 and older and to hold offenders accountable by providing training for criminal justice professionals, victim advocates, and governmental agency staff, and opportunities to strengthen collaboration across the organizations that serve older victims.

Before coming to VCoA, Ruth Anne already had built a career of accomplishments in community-based non-profit organizations. She served as the Program Manager for the ElderFriends Program at Family Lifeline, Inc. ElderFriends is a friendly visiting program in which volunteers visit lonely and/or isolated older adults weekly and advocate on their behalf. Ruth Anne greatly enjoyed meeting the clients, listening to their stories, and hearing of the positive benefits the regular visits produced for both the volunteers and the clients.

Ruth Anne attended James Madison University, graduating in 1986 with a Bachelor Degree in Communication Arts. After graduating, she moved to Richmond to join the volunteer staff community at Freedom House, which served the homeless and hungry with a community soup kitchen, clothing closet, and case management. Ruth Anne was the first full-time volunteer coordinator for Freedom House.

She has since worked for a variety of other non-profit and governmental agencies, including the Virginia Interfaith Center for Public Policy, the YWCA, the Chesterfield Fire Department, and the Richmond Peace Education Center. All the while, Ruth Anne has been an active volunteer in the Richmond community. She volunteered with the Richmond Public Schools while her children were enrolled there and served for two years as the Chair of the RPS Gifted Advisory Committee. Prior to serving on the staff of the Richmond Peace Education Center, she volunteered with their Conflict Resolution Team, leading workshops on conflict resolution with local community groups and inmates in the Virginia Correctional Center for Women.

Ruth Anne earned her M.Ed. from VCU in 1991, with a focus on Adult Education and Human Resource Development. Drawing on her experiences in working with and training volunteers for community work, she sought through this VCU degree program to strengthen her skills in working with groups and helping others to learn and grow as well.

In 2006, Ruth Anne was accepted into the Connecting Communities Fellowship Program (CCFP) sponsored by Hope in the Cities/Initiatives of Change. CCFP is a program that increases the capacity of communities to overcome divisions of race, culture, economics and politics by creating a network of skilled facilitators, capable team builders, and credible role models. It does this by selecting a diverse group of 25 participants to take part in five intensive monthly weekend training sessions focusing on the skills needed to become catalysts for change; promote honest, inclusive dialogue; heal history; and build and sustain teams from diverse sectors of the community. She completed this program in 2007 having gained a greater appreciation for the impact of Richmond history on the lives of those who live here and stronger skills in facilitating groups through challenging processes.

She has had many role models for successful aging in her life from whom she draws great inspiration as she enters her own "later life." Ruth Anne's Great-Aunt Marge was regularly roller skating into her 80s when her doctor told her she needed to stop out of fear that she would break a hip if she fell. Aunt Marge lived independently until the very last couple of years of her life, passing away at age 103. Ruth Anne's grandfather worked many years in physical education, and he exercised daily until the day he died at age 87. He spent his last day swimming at a lake and enjoying the company of family and friends. While Ruth Anne was at JMU, she

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