

**Core Member  
 Organizations**

- Aging and Disability Professionals Association of Wisconsin (ADPAW)
- Alzheimer's Association SE Wisconsin Chapter
- Wisconsin Adult Day Services Association (WADSA)
- Wisconsin Association of Area Agencies on Aging (W4A)
- Wisconsin Association of Benefit Specialists (WABS)
- Wisconsin Association of Nutrition Directors (WAND)
- Wisconsin Association of Senior Centers (WASC)
- Wisconsin Institute for Healthy Aging (WIHA)
- Wisconsin Senior Corps Association (WISCA)
- Wisconsin Tribal Aging Unit Association

The Wisconsin Aging Advocacy Network is a collaborative group of individuals and associations working with and for Wisconsin's older adults to shape public policy to improve their quality of life.

**WAAN State Issue Brief**  
 April 2019

# Healthy Aging Grants:

Proven Outcomes That Improve Health, Reduce Costs, and Prevent or Delay Long-Term Care.

**WAAN's Position: Provide an amendment to increase the budget appropriation from \$250,000 (currently included in the 2019-21 Executive Budget and less than one-third of what is needed to fully support the expansion) to \$870,000 each year for healthy aging grants to counties/tribes, YMCAs and other community-based organizations for proven programs and to support a statewide clearinghouse and support center to broaden the reach and impact of proven programs.**

**Proven and cost-effective.**

To update an old truism: An ounce of prevention is worth a pound of care – specifically long-term care.

Wisconsin is home to many evidence-based (research-proven) programs that reduce costs, improve our health and prevent or delay disease and disability. These programs delay or entirely prevent the need for expensive long-term care for our neighbors, family and ourselves. The programs address critical public health issues including:

**Falls.** One of every four older adults in Wisconsin experiences a fall every year. Hospital and emergency department visits cost Wisconsin over \$800 million annually — 70% of which is paid for by public funds. Falls-related injuries exceed car crashes as the leading cause of injury-related deaths in Wisconsin. Falls and fear of falls lead to isolation—which leads to more bad health outcomes. And over 40% of older adults admitted to a nursing home had a fall in the 30 days prior to admission. But the good news is that falls are not a normal part of aging; our families' older adults can learn strategies to dramatically reduce their risk of falls.



**Chronic Diseases.**

More than 80% of older adults in Wisconsin have at least one chronic condition such as arthritis, diabetes, or heart disease; 50% have at least two. A whopping 95% of health care dollars spent on older adults is related to chronic conditions and 2/3 of all deaths in the U.S. are attributable to heart disease, stroke, cancer, and diabetes.

## Contact WAAN

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<http://gwaar.org/waan>

**Diabetes.** In Wisconsin 475,000 adults have diabetes and another 1.45 million have pre-diabetes. One in four Wisconsin residents over age 65 has diabetes, which is the leading cause of blindness, heart disease, stroke and lower extremity amputations. Diabetes is also very expensive to treat, with an annual cost to Wisconsin of over \$4 billion in direct health costs and \$2.7 billion in indirect costs.



**Caregiving.** With the growing population of older adults and people with disabilities, our need for family caregivers will continue to increase. Because caregiving is often stressful and exhausting, family caregivers are at a high risk for depression and stress-related illnesses that often force them to end their caregiving role and place their loved one in an expensive facility.

## Partners Depend on Statewide Training, Coordination, and Support

These are public health challenges that older adult family members and neighbors face now and all of us eventually will. Other challenges include mental health, obesity, medication management and lack of physical activity. These challenges can be addressed through researched and proven cost-effective community programs delivered by lay leaders in community partner (non-clinical) settings. Hundreds of homegrown, well-respected local Wisconsin partner agencies and their volunteers can and will deliver these programs if they have the statewide training, coordination, and support to do so.

Wisconsin needs an \$870,000 state budget appropriation each year to:

- Support a network of county and tribal aging units, public health, YMCAs and other local community-based organization partners in developing and training program leaders, recruiting participants and delivering the programs.
- Research, develop, and maintain the infrastructure for coordination of the programs.
- Maintain statewide program licenses.
- Conduct data collection and analysis.

**Together, Wisconsin Can Improve Health, Reduce Costs and Prevent or Delay Long-Term Care.**