

NEWS RELEASE - For immediate distribution

Archstone Foundation Announces Care Partners Sites to Advance Late-Life Depression Care

Long Beach, CA, October 12, 2015 – The Board of Directors of Archstone Foundation, a grantmaking foundation committed to preparing society to meet the needs of an aging population, approved seven grants, totaling \$4,410,239 over four years to improve depression care for older adults in California.

The grants are part of *Care Partners: Bridging Families, Clinics, and Communities to Advance Late-Life Depression Care*, a multi-year initiative funded by the Archstone Foundation, designed to bridge services between primary care clinics and community-based organizations and family members surrounding depression care in older adults.

Seven primary care clinics (see below) will receive funding to test an intervention unique to its clinical setting. All of this work will seek to improve access to depression care, enhance the patient care experience, and ultimately, to boost the quality and outcomes of the depression care provided.

Researchers from the University of Washington's AIMS Center and the University of California, Davis (UC Davis) also received grants to help to develop, implement, and evaluate the interventions.

“The Care Partners program represents an important step towards expanding access to high quality depression care for more older people in California,” said Joseph F. Prevratil, JD, President and CEO of the Archstone Foundation. “We are proud to support this important work throughout the state and hope it can serve as a model for similar efforts around the country.”

Collaborative Care: An Evidence-based Approach to Improving Older Adults' Mental Health

During the past two decades, there has been significant progress in the ability to diagnose and treat depression in older people. Research has demonstrated that [Collaborative Care programs](#), in which primary care physicians are supported by mental health professionals to treat depression in older adults, can dramatically improve the effectiveness and cost-effectiveness of this treatment.

However, many older adults in California (and across the country) are reluctant to seek depression treatment from traditional health providers. The Care Partners program will strengthen the capacity of California community-based programs and organizations, so they can identify, support, and refer depressed older adults to the formal mental health services they need. This approach has the potential to reach more older adults who require care, but do not feel comfortable reaching out for help.

“In my experience, it is less important to find the perfect mental health professional for a Collaborative Care program than to make sure that an integrated care team is prepared to get essential tasks done in a reliable way,” says Jürgen Unützer, MD, MPH, MA, Director of the AIMS Center at the University of Washington. “The ability to shift some of the essential tasks of Collaborative Care to family members, peers or community-based organizations has the potential to dramatically increase access to effective treatment and to effectively leverage mental health services provided in primary care and other health care settings.”

New Care Partners Program Grants

The following organizations are receiving funding:

- **El Sol Neighborhood Education Center**, San Bernardino, California (\$300,000): A two-year grant to improve quality and coordination of care among older adults with or at-risk for depression, especially for racial and ethnic minorities.
- **Family Health Centers of San Diego**, San Diego, California (\$300,000): A two-year grant to support the creation of the first "medical neighborhood" for clinically depressed, low-income seniors living in downtown San Diego, providing primary and mental healthcare, while also addressing material need insecurities. Family Health Centers will also provide primary healthcare, mental health services, and supportive services to low-income, high-risk, vulnerable seniors, including those experiencing homelessness.
- **Institute on Aging**, San Francisco, California (\$300,000): A two-year grant to support a collaboration with the University of California, San Francisco's Housecalls and Center for Geriatric Care, to establish a formal partnership to provide for the mental health needs of homebound older adults.
- **LifeLong Medical Care**, Berkeley, California (\$300,000): A two-year grant to support a collaboration with St. Mary's Center to screen and offer depression care for older adults by using the Collaborative Care model.
- **Sonoma County Human Services, Adult & Aging Division**, Santa Rosa, California (\$300,000): A two-year grant to support a collaboration with the Petaluma Health Center to treat older adults with depressive symptoms, in a Collaborative Care model of service, including individualized care by the clinic-based team and a home visiting Care Coordinator.
- **University of Southern California**, Los Angeles, California (\$400,000): A two-year grant to support a collaboration that will expand upon the Collaborative Care model for treatment of geriatric depression by testing the integration of family caregivers and a community based organization into the Care Team.
- **University of Washington**, Seattle, Washington (\$2,510,239): A four-year grant for the Innovations Bridging Clinics and Communities to Advance Late-Life Depression Care initiative, a project commissioned by Archstone Foundation to develop a community of clinics, community-based organizations, and researchers in California who will work together to improve care for older adults with depression through strengthening the involvement of family members, friends, and community-based organizations in depression care. The grant includes a sub-award to the University of California, Davis. McClellan Outpatient Clinic, a U.S. Department of Veterans Affairs (VA) clinic, will be implementing a family partnership intervention project, through the sub-award to the University of California, Davis.

Some Key Facts about Depression and Older Adults

Depression is common among older adults, and it comes at a high cost to patients and their families. Major depression affects 2-5% of community dwelling older adults, up to 10% of older adults in primary care clinics, and up to 30% of older adults with chronic medical illnesses. Late-life depression impairs quality of life, the ability to function, and to enjoy late-life. It is associated with increased health care costs, family stress, and increased risk of suicide. Depression is the most important and arguably the most treatable risk factor for completed suicide.

Despite recent advances, older adults suffering with depression often do not seek or receive effective treatment. Older adults at particularly high risk for not receiving effective depression care include minorities, older men, and those with multiple medical problems, less formal education, and/or lower socioeconomic status.

About the Archstone Foundation

The Archstone Foundation is a private grantmaking organization whose mission is to contribute toward the preparation of society in meeting the needs of an aging population. Under the leadership of Joseph F. Prevratil, J.D., President and CEO, the Foundation has awarded over \$99 million in grants since it was established in 1985.

A complete list of Archstone Foundation grantees and additional information may be found at www.archstone.org.