ACE.S: ADVANCING CARE EXCELLENCE FOR SENIORS

Reflections on a John A. Hartford Foundation-funded Nursing Education Program

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About the John A. Hartford Foundation
The John A. Hartford Foundation is a private philanthropy working to improve the health of older Americans. After three decades of championing research and education in geriatric medicine, nursing, and social work, today the Foundation pursues opportunities to put geriatrics expertise to work in all health care settings. This includes advancing practice change and innovation, supporting team-based care through interdisciplinary education of all health care providers, supporting policies and regulations that promote better care, and developing and disseminating new evidence-based models that deliver better, more cost-effective health care. The Foundation was established by John A. Hartford. Mr. Hartford and his brother, George L. Hartford, both former chief executives of the Great Atlantic & Pacific Tea Company, left the bulk of their estates to the Foundation upon their deaths in the 1950’s. Additional information about the Foundation and its programs is available at [www.jhartfound.org](http://www.jhartfound.org).

About ACE.S (Advancing Care Excellence for Seniors)
The NLN ACE.S (Advancing Care Excellence for Seniors) is a grant-funded initiative to foster gerontological nursing education for pre-licensure nursing programs. The NLN ACE.S initiative website is the go-to place for gerontological resources for faculty and students, classroom-ready teaching tools and strategies, and information about upcoming faculty development events related to integration of care of older adults into nursing program curricula. The ACE.S grant, funded by the John A. Hartford Foundation, was a collaborative effort between the National League for Nursing (NLN) and Community College of Philadelphia (CCP). Independence Foundation, a private foundation in Philadelphia and CCP’s funding partner, provided support for program evaluation and Laerdal Medical Corporation provided support to develop simulations and unfolding case studies related to care of older adults. Funders who supported and expanded the program through continued funding after the Hartford grant ended were Independence Foundation and Laerdal Medical; additional funding was provided by The Hearst Foundations, the MetLife Foundation, and Independence Blue Cross Foundation. Additional information is available at [www.nln.org/facultyprograms/facultyresources/aces/](http://www.nln.org/facultyprograms/facultyresources/aces/).
Executive Summary

This brief will describe the work and assess the impact of the NLN Advancing Care Excellence for Seniors initiative, or ACE.S, which the John A. Hartford Foundation supported from 2009 to 2012. ACE.S was the first national effort to prepare students in all pre-licensure nursing programs, including associate degree programs, to deliver high-quality care to older adults in a variety of settings, by providing new educational opportunities, teaching tools, and other resources to help pre-licensure nursing faculty offer geriatric content and understanding to their students.

Today the demographic imperative for providing geriatrics content in nursing curriculum is greater than ever. The NLN ACE.S initiative reached and exceeded many of the specific goals it set to address that need, and created a rich legacy of classroom-ready tools and resources that are still widely available, free of charge, and in use.

The NLN ACE.S initiative was introduced to over 8,000 nursing faculty during the project period through workshops, webinars, and website resources, more than 10 times the originally projected number. The program remains vital and relevant, with continuing uptake of resources and ongoing growth and expansion.

This brief will also examine how Hartford's funding for the NLN ACE.S initiative catalyzed support and expansion of the program from other private foundations and corporations. This cooperation and synergy had the effect of extending the scope and reach of the program, while building important institutional and personal commitment to furthering nurses' capacity to improve the care of older adults, now and into the future.
Introduction: Challenges in meeting the unique health needs of older adults

The rapid aging of our population is a fundamental challenge facing communities, health care providers, government institutions, and families across America. As 10,000 Boomers continue to turn 65 every day, the 65+ population is projected to reach 84 million by the year 2050. The growth of the older adult population brings with it many opportunities but it also makes specific — and often unmet — demands in the realms of health and health care.

One significant reason for this is chronic disease. Chronic conditions affect more than 80 percent of adults over age 50 and multiple chronic conditions are common. Chronic conditions add to the complexity of the care of older adults and account for 75 percent of all health care spending in the United States, including nearly all Medicare spending.

Beyond chronic disease, the overall effects of aging add to the complexity, scope, and cost of older adults’ medical needs. Furthermore, the presentation of all diseases, response to treatment, and personal goals of care may be quite different in an older adult than in a younger person.

Because of their unique needs, older adults should receive care from health professionals trained to recognize and address those needs, much the same way children see pediatricians. Very often, however, this does not happen.

An essential role for nurses

As the largest group of health professionals, nurses are essential to ensuring the delivery of high-quality care. Furthermore, the unique needs of the older adult population are a natural fit for the skills and capacities nurses can offer. With the right education and support, registered nurses can provide excellent care to older adults and help address their medical complexity and self-care needs. Thus it is extremely important that nurses be prepared to understand the physical changes associated with aging, how these changes affect disease presentation and symptoms, and the changing way the aging body responds to treatment.

Unfortunately, most nurses, like most other health professionals, have traditionally received little education in the care of older adults. Geriatric content comprised only 10 to 25% of the content across all courses in most associate degree nursing programs, according to a 2008 survey, and little was delivered by faculty with any special geriatric preparation.¹

Ensuring that nursing education is able to provide that knowledge and skill set will require enhancing the traditional nursing curriculum. This kind of change demands commitment and resources, including appropriately targeted and tailored teaching tools to support the faculty who will provide that education.

Improving the health of older adults has been the focus of the John A. Hartford Foundation’s grantmaking for the last three decades. While much of the Foundation’s grantmaking for medical, social work, and nursing curricula has targeted graduate-level education, the Foundation has also devoted attention to all levels of nursing education because of the importance of Registered Nurses (RNs) in the care of older adults.

There are three different types of programs that prepare students to become Registered Nurses: two-year programs, which lead to an Associate Degree in Nursing (ADN); hospital diploma programs; and four-year, baccalaureate-level Bachelor of Science in Nursing (BSN) programs. These programs are collectively referred to as pre-licensure nursing education.

Almost 60 percent of all Registered Nurses receive their initial education in associate degree programs, including half of all nurses working in nursing homes or extended-care facilities, making it essential that these pre-licensure programs prepare their students to work with older adults. That in turn demands that faculty in all pre-licensure programs be adequately prepared and equipped to teach the care of older adults.

The Hartford Foundation has taken up this challenge, providing more than $1.2 million in funding over the life of two successive, related grants beginning in 2007: Fostering Geriatrics in Associate Degree Nursing Education (FGADN), and Fostering Geriatrics in Pre-Licensure Nursing Education (FGPNE), which began in 2009 and came to be known as ACE.S. Hartford’s funding partners on the ACE.S program were Laerdal Medical and the Independence Foundation. In subsequent years, as this report will discuss, the program was sustained and extended by other partners as well: the Hearst Foundations, the MetLife Foundation, and the Independence Blue Cross Foundation, with further investment and support from Independence Foundation and Laerdal Medical.

PROGRAM DESCRIPTION: THE ESSENCE OF ACE.S

The NLN ACE.S initiative is a targeted effort to enhance the geriatric expertise of undergraduate nursing faculty by providing ACE.S resources and showing faculty how to incorporate them into both classroom and clinical nursing education. The ultimate goal is to enhance students’ learning experiences and prepare nursing graduates to address the complex health care needs of the aging population.

2 A Data-Driven Examination of the Impact of Associate and Bachelor’s Degree Programs on the Nation’s Nursing Workforce. American Association of Community Colleges—Policy Brief 2011–02PBL
The National League for Nursing (NLN) and Community College of Philadelphia (CCP) were selected to lead the effort, in part because of the NLN’s membership, which represents faculty at all levels of nursing education, and in part because of CCP’s long commitment to the care of older adults and enhancing geriatric clinical experiences in pre-licensure nursing. ACE.S program lead, Elaine Tagliareni, EdD, RN, CNE, FAAN, was both president of the NLN and a professor of nursing at CCP at that time.

Recognizing that adding new content to an already full and intense pre-licensure nursing curriculum is challenging, ACE.S is designed to work without adding additional classes. Instead, ACE.S provides modifiable, classroom-ready teaching tools, strategies, and opportunities for interactive learning, in the classroom, skills laboratory, simulation lab, and through direct patient care experiences.

The basis of all ACE.S offerings is the NLN ACE.S Essential Nursing Framework, which enables nursing students and practicing nurses to translate their knowledge of individualized aging, complexity of care, and vulnerability during life transitions into actions that promote high quality care for older adults. The NLN ACE.S Framework incorporates both the ACE.S Essential Knowledge Domains [See Sidebar: ACE.S Essential Knowledge Domains] and ACE.S Essential Nursing Actions [See Sidebar: ACE.S Essential Nursing Actions], to develop students’ knowledge, skills, and abilities while promoting positive perceptions of aging.

ACE.S also embraces a multimedia approach including the written word, audio recordings of the “patients” voiced by actors, and simulations using manikins and standardized patients (live actors). [See Sidebar: A multimedia generation]

ACE.S UNFOLDING CASES

A critical component of the NLN ACE.S model is the unfolding case study. An unfolding case is defined as one that evolves over time in a manner that is unpredictable to the learner.

The traditional case study tells the student what they are looking for, such as introducing a patient as an 82 year old diabetic to a student who is being asked to address diabetes. The innovative ACE.S unfolding case studies, in contrast, challenge students to identify the health issues affecting the patient featured in the case.

A Multimedia Generation

Reaching a new generation of students accustomed to multimedia learning, who may be taking classes online, and who will work in a tech-centric world, requires new teaching strategies and skills. One of the ACE.S strategies — incorporating video and film clips into instruction — is based on the view that a visual or storytelling method can be powerful in helping students process the complicated and multifaceted issues that surround the care of older adults, making topics more relevant and helping students connect better.

One of the suggested ACE.S films is The Bucket List, which portrays two terminally ill men who leave cancer treatment and head off on a road trip with a wish list of things to do before they die. The film deals with issues of transition, end-of-life issues, and a risk-versus-benefits analysis for the best quality of life possible. As students watch the movies, faculty ask them to think about what type of assessment tools might be helpful to assess the characters in the film.
## ACE.S Essential Nursing Actions

### Assess Function and Expectations
- Assess the older adult's individual aging pattern and functional status using standardized assessment tools.
- Use effective communication techniques to recognize, respond to, and respect an older adult's strengths, wishes, and expectations.
- Include findings of assessment of older adult's cognition, mood, physical function, and comfort to fully assess the individual aging pattern.

### Coordinate and Manage Care
- Manage chronic conditions, including atypical presentations, in daily life and during life transitions to maximize function and maintain independence.
- Assist older adults and families/caregivers to access knowledge and evaluate resources.
- Advocate during acute exacerbations of chronic conditions to prevent complications.

### Use Evolving Knowledge
- Understand geriatric syndromes and unique presentations of common diseases in older adults.
- Access and use emerging information and research evidence about the special care needs of older adults and appropriate treatment options.
- Interpret findings and evaluate clinical situations in order to provide high quality nursing care based on current knowledge and best practices.

### Make Situational Decisions
- Analyze risks and benefits of care decisions in collaboration with the interdisciplinary team and the older adult and family/caregivers.
- Evaluate situations where standard treatment recommendations need to be modified to manage care in the context of the older adult's needs and life transitions.
- Consider the older adult's wishes, expectations, resources, cultural traditions, and strengths when modifying care approaches.
Case study: Using ACE.S Unfolding Cases

Sue Simpson, professor of nursing and health education at Mira Costa College in San Diego, California, took the lessons she learned at a 2012 ACE.S workshop funded by the Hearst Foundations and wove them into her gerontology course on geriatric nursing.

Simpson and her colleagues used the ACE.S cases and also created their own ACE.S-modeled case study: Mr. Oshi, a first-generation Japanese patient, to highlight the special needs of ethnic groups encountered by students.

“When I encounter geriatric patients in my clinical experiences, the voices of the ACE.S cases and Mr. Oshi resonate in my head. I am attentive and sensitized to the geriatric population’s unanticipated changes in health, caregiver roles, family dynamics, comorbidities, cultural considerations, and financial concerns. Overall, I believe I am a better nurse because of your efforts to integrate these simulation scenarios into our curriculum.”

—Michelle Grabiel, RN, Class of 2013

Patient profiles are purposely complicated – like real people. Teaching through case study is widely regarded as an effective teaching methodology when compared with lectures in promoting a learner’s critical reasoning skills. [See Sidebar: Case study: Using ACE.S Unfolding Cases]

Four unfolding case study simulation scenarios using the “gero” lens and three Alzheimer’s disease-centered unfolding cases are available on the NLN website.3

Cases are written so that they can be modified to meet the needs of diverse curricula, different teaching methods, and individual style. The unfolding cases represent a range of challenges faced by older adults, including medical, functional, psychosocial, interpersonal, and financial issues.

Each case includes the following:

- A first-person monologue that introduces the individual or couple and the complex problems to be addressed.
- Simulation scenarios designed to help students practice assessing function and expectations of their patients, with links to appropriate evidence-based assessment tools, including those from the Try This® and How to Try This® Series, developed with funding from the John A. Hartford Foundation to New York University’s Hartford Institute for Geriatric Nursing. [See Sidebar: Important resources: Try This® and How to Try This®.]
- A final assignment that asks students to finish the story.
- An instructor toolkit with suggestions on how to use the various components of the unfolding cases and incorporate them into the curriculum.

The ACE.S unfolding case scenarios combine the power of storytelling with the experiential nature of simulation and provide a simulated experience of continuity of care that will help students integrate the ACE.S Essential Knowledge Domains [See Sidebar: ACE.S Essential Knowledge Domains] and Essential Nursing Actions [See Sidebar: ACE.S Essential Nursing Actions] into their practice of nursing.

Important Resources: Try This® and How to Try This®

Try This®: Best Practices in Nursing Care to Older Adults is a series of assessment tools for the care of older adults that is easily accessible, easily understood, easily implemented, and encourages the use of these best practices by all direct care nurses.

The How to Try This® series translates the evidence-based geriatric assessment tools in the Try This® assessment series into cost-free, web-based resources including demonstration videos and a corresponding print series featured in the American Journal of Nursing. A John A. Hartford Foundation-funded initiative provided to the Hartford Institute for Geriatric Nursing at New York University’s College of Nursing in collaboration with the American Journal of Nursing, this series, as well as the Try This® series, is available at ConsultGeriRN.org.
Beyond ACE.S: NLN’s Advancing Care Excellence for Veterans (ACE.V)

Butch Sampson, 62, is a homeless vet exposed to Agent Orange in Vietnam. Jenny Brown, 23, and Randy Adams, 28, both saw combat in Iraq. Eugene Shaw, 82, is a former Marine who served in Korea.

These names represent the new faces in Advancing Care Excellence for Veterans (ACE.V), the NLN’s collection of faculty resources and programming developed in partnership with Laerdal Medical.

These resources include cases on post-traumatic stress disorder (PTSD), traumatic brain injury (TBI), depression, suicide, and related disorders.

As NLN President Marsha Howell Adams, PhD, RN, CNE, ANEF, FAAN, and Dean and Professor, The University of Alabama in Huntsville, College of Nursing reflected,

“Through our experience with the NLN signature program, Advancing Care Excellence for Seniors (ACE.S), we learned that simulation scenario creates a robust, meaningful experience for students that mimics many of the challenges presented by continuity of care. That’s why we chose to model the unfolding ACE.V cases after the highly regarded, effective ACE.S cases.”

FUNDING PARTNERSHIP

Like many of the most successful grant-funded programs, ACE.S was the product of multiple partnerships. After Hartford funding ended, ACE.S project leadership worked with Hartford Foundation staff to identify other funders with complementary missions and pursue expansion and enrichment of the program with their support.

The Hartford Foundation’s two original ACE.S co-founders were the Independence Foundation of Philadelphia, which provided more than $600,000, and Laerdal Medical. Both partners continued their support for ACE.S after Hartford funding ended.

The Hearst Foundations joined the initiative as the Hartford Foundation’s funding was ending in 2011, with an award of nearly $1.4 million. The five-year Hearst grant supported dissemination of the work, including 24 state-based workshops, two ninety minute webinars, and a pre-Summit session at the annual NLN Education Summit.

“The Hearst Foundations sought to partner with an organization focused on helping train nurses to care for the growing aging population in the country,” said Sarah Mishurov, program strategy manager for the Hearst Foundations. “The Hearst Foundations and the NLN worked to strategically remedy the lack of gerontology in nursing curriculum by providing free, user-friendly online teaching resources and professional development in the use of these resources through the workshops to over 2,000 educators representing 735 nursing programs in 48 states.”
The project also garnered the attention of Independence Blue Cross (IBC) Foundation. IBC Foundation provided $185,000 over two years to expand ACE.S to practice environments, with three one-day workshops and two webinars for nurse educators and clinical nursing staff at agencies in five Pennsylvania counties. IBC Foundation has also presented the IBC Foundation Excellence in Geriatrics Award to seven schools of nursing in southeastern Pennsylvania and their affiliated agency nursing staffs.

Involvement by new funding partners also began to take the program in new directions, such as new ACE.S unfolding cases. For instance, spurred by the success of ACE.S, Laerdal Medical provided funding to support the development of Advancing Care Excellence for Veterans (ACE.V), a set of unfolding cases tailored to the care of veterans. [See Sidebar: Beyond ACE.S: NLN’s Advancing Care Excellence for Veterans (ACE.V)]

The MetLife Foundation also stepped in to support the development of tools focused on Alzheimer’s disease and related dementia conditions. A $125,000 grant in 2013 supported development of three teaching strategies and three unfolding web-based case studies and related simulations.

This expansion of ACE.S work is ongoing, as the NLN is actively seeking funding for additional unfolding cases to advance care of vulnerable populations, based on the NLN ACE.S Framework.

Funding from the Hearst grant is also supporting numerous new digital marketing efforts, including a Twitter chat series, more free ACE.S webinars, a series of four promotional and educational videos, and a multi-author blog.
**Exceeding projections: ACE.S resource use and acceptance**

The goal of the NLN ACE.S program was, and remains, helping pre-licensure nursing faculty build their own geriatrics expertise and share it with their students using targeted teaching strategies and classroom-ready tools. In this area, there is considerable evidence of success, as the program exceeded most of its projected targets during the period that it was funded by the John A. Hartford Foundation (2009-2012).

Highlights of this evidence:

- Workshop attendance (years two and three) exceeded projections: 320 nurse educators (and 135 others, including nurse leaders in clinical settings) attended, exceeding the goal of 300. Quantitative and qualitative evaluations for these workshops were also overwhelmingly positive. (Many more faculty also attended workshops funded by the Hearst Foundations in subsequent years, although that final data is not yet available.)

- The ACE.S program was introduced to more than 8,000 nursing faculty (through multiple delivery avenues), more than 10 times the number originally projected by the NLN.

- Web traffic to the NLN ACE.S section vastly exceeded expectations. There were 10,118 visits to the site in 2011 (the objective was 949.) The unfolding cases page received the greatest number of visits (more than 6,000).

- Attendance at webinars exceeded projections. In the first year, 44 schools participated (more than double the 20 projected); in the second year, the number of participating schools more than doubled again, to 92. (In the third year, fewer webinars were offered and participation went down, to 44 schools.)

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- Attendance at the ACE.S concurrent session at the NLN Summit doubled in the first two years, from 250 nurse faculty attending in 2009, to 500 in 2010. Year three saw further growth, to 640 attendees.
Conclusion: Assessing impact, looking to the future

These are high-stakes times for nursing education. The care of older adults is the core business of health care and it is in the nation’s best interest to ensure that nurses are well prepared to provide excellent care to older adults and their caregivers.

The NLN ACE.S initiative represents an important step in this effort.

ACE.S created substantial change by creating classroom-ready teaching tools and strategies to help all nursing faculty integrate the care of older adults into curricula. It also created important synergy with other existing, free, Hartford-funded resources, including Try This® and other geriatric nursing competencies developed by the Hartford Institute for Geriatric Nursing and available on its Website, ConsultGeriRN.org. This was also fundamental to ACE.S’ success. [See Sidebar: Important resources: Try This® and How to Try This®]

Importantly, ACE.S focuses on helping nursing students empathize with older adults, consider their unique needs and those of their caregivers, and develop a positive view of aging. The interactive and patient-centered nature of the ACE.S teaching tools is important as well; as one student reported in an ACE.S evaluation, “Overall, I believe I am a better nurse because of your efforts to integrate these simulation scenarios into our curriculum.”

Most importantly, the program is not only alive but growing, continually being updated, extended, marketed to more nursing faculty, and made available conveniently and at no cost to any interested faculty.

Nursing must be at the forefront of improving care of older adults. By advancing the cause, and providing an adaptable, classroom-ready and comprehensive educational approach, the NLN ACE.S initiative gives nurse educators and students alike a way to provide safe, individualized, and high-quality care to older adults and their caregivers.

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About the ACE.S partners

The National League for Nursing
Dedicated to excellence in nursing, the National League for Nursing is the premier organization for nurse faculty and leaders in nursing education. The NLN offers professional development, networking opportunities, testing services, nursing research grants, and public policy initiatives to its 40,000 individual and 1,200 institutional members. NLN members represent nursing education programs across the spectrum of higher education, and health care organizations and agencies. For more information, please visit www.nln.org.

Community College of Philadelphia
Community College of Philadelphia is a public, open-admission institution that provides both academic resources and support services to help students achieve their academic goals. Community College of Philadelphia offers more than 70 associate degree, academic and proficiency certificate programs. As the largest public institution of higher education in Philadelphia, the College has served more than 685,000 of the city’s residents since 1965. For more information, please visit www.ccp.edu.

The Independence Foundation
Independence Foundation is a private, not-for-profit philanthropic organization serving Philadelphia and its surrounding Pennsylvania counties. With a strong focus on health, the Foundation invests in people and programs that enrich the life experiences of the residents of the Philadelphia area. In the late 1980s the Foundation selected nursing education as one of its funding priorities. During that period, it provided scholarship endowments and established chairs in nursing in 12 schools nationwide. Beginning in the mid-nineties, the Foundation funded nurse-led health care initiatives, including nurse managed health centers and the establishment of the National Nursing Center Consortium. For more information, please visit http://independencefoundation.org.

Laerdal Medical
Laerdal Medical is a global corporation dedicated to helping save lives through the advancement of resuscitation and emergency care. Following the pioneering and world famous Resusci Anne manikin for CPR training in 1960, a wide selection of innovative product solutions have continued to support and enhance healthcare education and to facilitate the dissemination of CPR skills and knowledge in the wider lay community. For more information, please visit www.laerdal.com/us.

The Hearst Foundations
The Hearst Foundations are national philanthropic resources for organizations working in the fields of culture, education, health and social services. The Hearst Foundations identify and fund outstanding nonprofits to ensure that people of all backgrounds in the United States have the opportunity to build healthy, productive and inspiring lives. Since inception, the Foundations have made over 19,000 grants totaling more than $925 million. For more information, please visit www.hearstfdn.org.
**Independence Blue Cross Foundation**
The Independence Blue Cross Foundation is a charitable, private foundation, whose mission is leading solutions for a healthier community. The Foundation targets four areas of impact. Through Securing the Blue Safety Net program private, nonprofit community health center clinics provide access to quality, affordable healthcare in medically underserved areas. Strengthening the nursing, primary care, and allied health workforce through education, career development, and research is the focus of the Bolstering the Health Care Workforce grant program. Building Healthier Communities grants enable the IBC Foundation to partner with community leaders and programs to address community health and wellness needs in southeastern Pennsylvania. Through collaboration with wellness partners, the IBC Foundation Healthy Futures Initiative is combating the childhood obesity epidemic with multi-year funding under the Addressing Health Priorities program. For more information, please visit [www.ibxfoundation.org](http://www.ibxfoundation.org) or follow on Twitter and Instagram @ibxfdn.

**The MetLife Foundation**
MetLife Foundation believes that affordable, accessible, and well-designed financial services can transform the lives of those in need, and we have committed $200 million over the next five years to advancing this effort around the world. Since its founding in 1976, MetLife Foundation has provided more than $530 million in grants and $100 million in program-related investments to nonprofit organizations. For more information, please visit [www.metlife.com/metlife-foundation/index.html](http://www.metlife.com/metlife-foundation/index.html).