**The Health Payoffs of Time Banks**

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[Fixes](http://opinionator.blogs.nytimes.com/category/fixes/) looks at solutions to social problems and why they work.

[Friday’s Fixes post about time banks](http://opinionator.blogs.nytimes.com/2011/09/20/2011/09/15/where-all-work-is-created-equal/) resonated with readers.  Time banks are local organizations that allow people to use their skills to help others by exchanging hours instead of money. You earn time dollars by, say, taking a neighbor to the doctor, and spend those time dollars on the same number of hours’ worth of other services, such as computer repair or singing lessons.  Strikingly, very few readers talked about what they could get from time banks; most  responded to the possibility of giving.  “The chance to help others and feel good about myself makes the bargain seem better than I thought possible,” wrote Ajasys from Vancouver, Wash. ([41](http://community.nytimes.com/comments/opinionator.blogs.nytimes.com/2011/09/15/where-all-work-is-created-equal/?permid=41#comment41))  — a typical comment.

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Those who were wary of the idea raised two points.One was the worry that the Internal Revenue Service would swoop in.   But while some forms of barter are taxable, the I.R.S. has ruled that time dollars are not — because they value all work equally, work is done for a charitable purpose, and the exchange is informal and non-contractual.  Other readers brought up the many possible market confusions caused by the equal valuation of all work.  One reader, A from Jefferson ([46](http://community.nytimes.com/comments/opinionator.blogs.nytimes.com/2011/09/15/where-all-work-is-created-equal/?permid=46#comment46)) posed several questions:  “It’s April 15th, and tax returns are due before the post office closes today in an hour. There are ten people who still haven’t done their returns and don’t know how to. There is only one person involved with the time bank who can do tax returns. Which of the ten does he help for the standing rate of one time dollar per hour? Is it reasonable for someone who needs the service to try and outbid the others by offering more than one time dollar for the service?”

As Shana from Belingham ([48](http://community.nytimes.com/comments/opinionator.blogs.nytimes.com/2011/09/15/where-all-work-is-created-equal/?permid=48#comment48)) replies to that writer, “You have majorly missed the point.” A time bank is not simply the American economy in all its glory, with hours instead of dollars.  Members cannot choose to offer more than one time dollar: credits get issued by the time bank at the same rate for everyone.  Anyone interested in gaming the system is probably not a good candidate for time bank membership.  As the stories of people in time banks and many comments showed, time banks work in large part on trust and goodwill.  No, you can’t run an economy that way.  But it’s the main appeal of a time bank.

Other readers wanted information on how to set up time banks in their communities.   Here are some useful Web sites: [TimeBanks](http://www.timebanks.org/) and [Time Banking UK](http://www.timebanking.org/) are umbrella organizations of time banks in America and Britain. [Partners in Care](http://www.partnersincare.org/) and Dane County TimeBank are sites for two particularly successful time banks, one near Baltimore and one in Madison, Wisc.

Although many time banks are run by neighborhood volunteer organizations, people interested in setting up a time bank might want to make their case to a local health care organization.  Friday’s Fixes reported on the time bank run by the Visiting Nurse Service of New York. Elderplan, a New York health insurance company, also runs a time bank for members.   Hospitals such as the Lehigh Valley Health Network, based in Allentown, Pa., run time banks.  In Britain, even private medical practices have established time banks.  At Rushey Green Group Practice in London, Dr. Richard Byng was convinced that what many of his patients needed wasn’t medication, but friends, social connections and a way to feel useful and valued.  Now doctors there routinely prescribe that patients join the [Rushey Green Time Bank](http://www.rgtb.org.uk/).

Health organizations like time banks because they believe that time banks make people feel better — and cut the cost of health care.   In Richmond, Va., for example, a time bank program to provide social support to people with asthma [cut emergency admissions to hospitals](http://timebanks.org/wp-content/uploads/2011/08/KeepingtheGPAway.pdf) and the cost of treating asthma by more than 70 percent.

One way time banks help is with simple practical aid.  Imagine an elderly woman who has just left the hospital, where she received expensive high-tech care for her heart condition.  But once discharged, she is too frail to go out to buy groceries.   There is no one to fill her prescriptions, fix her leaky roof, make sure she takes her medicines correctly.  She cannot take the bus herself and doesn’t have the money to hire a taxi to get to a follow-up doctor’s appointment.

Medicaid and Medicare do not pay for what is not directly medical, but non-medical challenges such as these can land her back in the hospital — and this time, the hospital will likely not be reimbursed for the cost of her stay, which should give that hospital considerable incentive to help her solve these problems.   In the long run, the availability of help with these tasks can mean the difference between staying in her home and going to a nursing home.  When the Visiting Nurse Service TimeBank surveyed its older members, a whopping 79 percent felt the TimeBank would give them resources they would need to be able to stay in their homes as they aged.

Millions of people in America don’t have transportation to get to medical appointments.  [A study](http://trb.metapress.com/content/84v44615377k7104/) published by the Transportation Research Board, an organization funded largely by state and federal transportation agencies, found that providing rides to non-emergency medical appointments was cost effective for every condition studied – especially for asthma, pre-natal care, heart disease and diabetes.  Regular visits from neighbors can also catch early signs of serious problems.  One time bank, for example, asked people who worked with diabetics to [pay special attention to early signs of glaucoma](http://timebanks.org/wp-content/uploads/2011/08/KeepingtheGPAway.pdf).

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The value of time banks, however, goes beyond practical assistance. The mental and physical health benefits of social connection have been proven in voluminous research.  In his book “Bowling Alone: The Collapse and Revival of American Community,” Robert Putnam writes that joining a group cuts a person’s odds of dying next year by half. It’s as good for you as quitting smoking.

Lehigh Valley Health Network began its Community Exchange time bank as a way for senior citizens to feel more connected to the community.  “If you’re lonely, or looking for someone to come play bridge, this is not covered by social services,” said Laura Gutierrez, who manages Community Exchange. That companionship, she said, “makes people feel more empowered to recover at home.”  A survey of 160 of its members last year found that [the time bank improved members’ health](http://hpp.sagepub.com/content/early/2010/08/03/1524839909353022) mainly by creating a sense of belonging, and was particularly helpful for low-income people and those living alone.

Three years ago, the Paxton Green Group Practice in the Lambeth neighborhood of south London decided to set up a time bank. One of the reasons was patients’ alarming rate of diabetes.  Doctors saw a very direct connection between patients’ self-esteem and their ability to make needed behavior changes.  “It is very hard to change the way you look at food and exercise,” said Tyrell Evans, one of the doctors.  “Working with time banks, where everyone is valued and everyone has assets, helps people to revalue themselves. Only when you start to feel that positivity about yourself you feel more able to take on these challenges.”

Time banks promote a broader vision of health, one less focused on high-tech medicine and doctors’ expertise and more attuned to people’s social and human needs.  “It’s not walking out of a doctor’s office with a list of 20 things and feeling overwhelmed,”  said Kathryn Haslanger, Senior Vice President for Community Benefit at the Visiting Nurse Service of New York. It’s a walking group, a cooking group.   It takes it out of the medical dynamic.”

What would persuade more hospitals and insurers to establish time banks?  Data, perhaps.  The asthma study was the only study of the health cost savings of time banking I could find.  Though the time bank movement is based on mutual helping and trust, it might find a huge coalition of allies and sponsors if its benefits can be put into terms that insurers and hospitals can understand and appreciate — by that, I mean cash dollars, not time.