



HIP Aging Program

Best Practices: Programs Serving Latino Older Adults

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December 2010

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Introduction

Existing programs for Latino older adults point through best practices at the possibilities for expanding care to this under-served population.

There are many innovative programs, from the Little Havana Activities Center in Miami to the support services of the Spanish-Speaking Elderly Council-Raíces in Queens and Brooklyn, NY, as well as the Dementia Care Network of El Portal: Latino Alzheimer's Project in South Los Angeles.

The community-based organizations discussed here stand out, with culturally relevant, linguistically relevant, accessible, affordable and replicable projects and programs.

The pressing health issues that disproportionately affect the quality of life of Latino older adults--such as diabetes, cardiovascular disease and dementia--have partly driven the development of wellness programs. They also inform the review of best practices in varying levels of health services among these providers.

The services that Latino elders receive are further tailored by the generally low literacy of this Spanish-dominant cohort. Low literacy magnifies the challenges this population faces in navigating through the intricacies of Medicare, Medicaid, housing programs and Immigration and Customs Enforcement (ICE) rules.

Moreover, child care can be both a blessing and a curse for caregivers who are seniors. It can isolate some from their peers, while giving others an opportunity to contribute to society and to adhere to their beliefs about giving of themselves for their family, while getting up, moving, and sometimes becoming a kid again in the best way.

In assisting this population, Adelante of Suffolk County, NY, Vida Senior Centers in Washington, D.C., Casa Central in Chicago, and Greene County Health Care in rural southeastern North Carolina are among those who set the standards for which others can aim.

Three of the four organizations--Adelante, Vida Senior Centers and Greene County Health Care--have major building projects either under way or about to start by late 2010. Most rely on partnerships with local and state government agencies as an important part of their funding mix. Adelante, Vida Senior Centers and Casa Central are both Latino-led and Latino-serving.

Each agency is aware of the need for linguistic and cultural sensitivity on behalf of their staff. Each is aware that there are more under-served older adults than they don't yet serve, which has spurred some to re-invent their outreach techniques. And, each aspires to better serve its community.

ADELANTE OF SUFFOLK COUNTY

When a friend or relative takes an elderly Latino to one of the offices of Adelante of Suffolk County, in Long Island, NY, they find that the employee at the front desk is far more than a receptionist.

The Family Services case workers at the front desk of Adelante's Central Islip headquarters, or a side office at the lunch program's temporary space last summer in Brentwood, were there to guide people in search of answers about supportive housing for the mentally ill. But they also were there to make sure that all visitors received appropriate referrals and assistance.

Erica Brooks stands more than she sits in the glassed-in reception desk at Adelante's administrative offices in Central Islip, where perhaps 50 to 100 people, many of them elderly, stop by to see her each week. They lean in to seek advice through a window by her desk enclosure.

Hands-On Help

"For somebody not having food or a place to sleep," Brooks explains, "we refer them, we advocate for them, and they need other services. Once we get a home for them, how do we get them food and other services?"

"Latino elderly may not have enough resources to keep up with the rent. They are asking what other programs are available," Brooks said. "Sometimes, they need people who can apply for Medicare for them. ... We try to screen them when they come in."

Other services provided by Adelante personnel include sorting out seniors' confusion over the federal Medicare health-related benefits and Medicaid, which is a joint federal and state program that also covers some social services. "Sometimes we translate what the mail says. We help them with recertification with Section 8 [housing]," Brooks said. "We try [to ensure] that there are no gaps [in benefits] or any problems. And when they don't have any benefits, we try to help them get benefits."

Community-based organizations that wish to start similar programs can turn to Adelante for help. "They should have more bilingual personnel and not to hesitate to call us, if they need to," Brooks said. "Sometimes we get calls from hospitals. ... And we wind up doing referrals through third parties."

Outreach

Because so many of the Latino seniors in the area are isolated from community services, Adelante has been proactive in its outreach activities. Quite often, they learn of seniors in need of services through youth-oriented outreach activities at local health fairs, school open houses and after-school programs in Bayshore and Brentwood, on Long Island. The senior center services are advertised through fliers posted in local supermarkets, senior apartment buildings and other facilities.

In 2009, Adelante served more than 7,300 meals and provided transportation services more than 1,300 times for older Latinos. About 35 people a day, of whom 33 are Latinos, gathered to eat lunch and to socialize in the back of a church in Brentwood on a typical day in the summer of 2010. They each paid \$2 a day, transportation and lunch included. By 2 p.m., the seniors had all gone home.

This Adelante Senior Center was occupying temporary quarters due to the expansion of its permanent Brentwood facility, which was expected to be complete in December 2010. The temporary activity center, a large room with a separate kitchen, restrooms and small offices for social service providers, was across a narrow parking strip from the railway tracks and close to Entenmann's bakeries, a major employer in this industrial area.

"Their children work in the area," says Bill Ayala, who oversees the Brentwood senior center activities. "I've got a handful that age in place. But [mostly] they move into the area with their kids."

"Sometimes, both [children] work, and Mom is home alone," Ayala said of the seniors. But many of them have come to care for their grandchildren. He said that stewed pigeon peas over rice, a Puerto Rican favorite, and roasted fresh ham is a popular luncheon dish for the elderly, who include natives of Puerto Rico, the Dominican Republic, Ecuador, Guatemala, Peru, El Salvador, and Honduras.

They keep coming back for their daily dose of Latin music, lunches catered from Los Latinos Restaurant in Brentwood, computer and internet access, a bank of sofas facing a large television, and monthly lectures in Spanish on nutrition, wellness and benefits by representatives of county, state and federal agencies. Sitting around the nine long tables under ceiling fans in the back of the church last summer, the seniors listened to Spanish-language music and got a chance to socialize.

"The staff treats the people with love, like their mother, their father," says Maria Carvajal, assistant to Adelante Executive Director Miriam Garcia. The program participants, she says, "come here to get away."

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VIDA SENIOR CENTERS

Most seniors who visit the Vida Senior Centers building for the first time arrive with a relative or a friend in search of recreation and socialization. But, after visiting the large converted corner house in a tree-lined, brownstone neighborhood of northwest Washington, D.C., they also come away with a new focus on wellness and nutrition.

Vida's data shows that 65 percent of its seniors live alone, the average age of the people it serves is 78 and many are functionally illiterate in Spanish, their primary language. The center's eight full-time and six part-time employees come from 12 different countries, and almost all speak Spanish in providing seniors with health services, recreation and socialization, along with nutrition, education and transportation programs.

Health promotion is one of the center's cornerstones:

- A former physician in Cuba has served three days per week since 2007 as its Medical Case Manager/Health Promoter
- Seniors can participate in Milieu Therapy, a safe space where they can discuss, with each other and mental health staffers, their concerns about their health and their relationships. In turn, the staffers can assure appropriate services and follow-up are extended to each individual.
- A nutritionist answers questions at the center two days per week. Every new member of the center is presented with a bag of groceries during their first visit, and social work case managers and the site manager monitor the seniors.
- Late afternoon exercise videos keep some of the seniors moving.
- The medical management program, in addition to vital signs checking, includes a quarterly review of medications for the seniors who are most at risk, as well as tracking to make sure that the seniors understand changes in their medications. The center contacts doctors about any inconsistencies.
- Diabetes management includes counseling clients to check their blood sugar levels regularly, learn about healthy eating habits and choose meals that are appropriate.

The center's health promotion regarding diabetes was so successful that 83 percent of the seniors in the diabetic management program achieved a change from morbidly obese to a normal Body Mass Index.

"We try to educate our seniors to know that, whenever there has been a change in medications, to come to us so we can explain exactly what is happening," Vida Executive Director Angel Luis Irene said. "When we find inconsistencies, we contact the doctors. We know when somebody is reacting differently."

The facility strives to provide socialization and tend to both the mental health and physical wellness of the seniors. In addition to learning crafts and playing bingo, the older adults take computer classes and use five to seven computers spread along one wall of the center. Above, red, yellow and green posters explain computer terminology. The educational program has also proven to be a good draw. Citizenship classes and English as a Second Language classes meet twice a week, and computer literacy classes and tango classes are held once a week.

"Seniors are also encouraged through these programs to pursue their own interests and suggestions, which leads to activities like late afternoon exercise classes and independent English-language classes, as well as computer literacy and tango classes," according to Laurel Bruntz, who was an Adelante development associate for part of 2010.

Many Latino seniors in D.C. might not have the luxury of going to the gym, even if they have transportation. On average, Latino elderly in D.C. had a monthly income of \$500 or less, according to "The State of Latino Health in D.C.," a 2005 study by a collaborative of organizations supported by the

District of Columbia government. Vida's meal program, which is served on three floors of the big corner house, provides breakfast and lunch for 527 seniors. Of those, about 45 stay for the lunch program. The D.C. Office on Aging provides transportation services to shuttle the elderly between their homes and the center.

"We have 10- to 12-passenger vehicles. We need smaller vehicles to transport seniors to medical appointments. We'll need two new vehicles for the new center," Irene said, referring to a planned expansion to a second location in June 2011. "We provide them with the mobility and sense of independence. We need to get them out of their one room and get them moving."

The center's only site serves up to 600 people a year on a budget that is a little over \$775,000, Irene said. The second center will be part of a 36-unit affordable and low-income apartment building with a commercial kitchen. Older and disabled adults will have priority for the \$8.6-million project's one-bedroom apartments in NW Washington, D.C.

Administration

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Greene County Health Care

Steve Davis excels at figuring out how to find hard-to-reach people. Thirteen years ago, before he was hired as Outreach Director for the Greene County Health Care in North Carolina, the nonprofit community health program served 150 Spanish-speaking rural workers. Last year, it served 15,000.

Greene County Health Care made a concerted effort to grow by reaching out to the many farm workers in its surrounding corn and tobacco fields. About 80 percent are uninsured, and many lack English-language skills. Many are undocumented. With support from the state of North Carolina, Greene County Health Care banded together with four other community health nonprofits to form a network linked by special software that covers 14 counties with 30 cities in southeastern North Carolina. Other members of the Community Partners HealthNet include Goshen Medical Center, Robeson Health Care Corp., Stedman-Wade Health Services, and Tri-County Community Health Care.

Greene County Health Care alone now provides care in three medical centers, a dental facility that was expanded in the summer of 2010, and several other facilities. Although most of the treatment goes to adults and children, Davis' outreach workers have also found about 100 older people in the farm worker camps. But first, they had to find the camps.

Finding people to help

When he was hired, Davis had to sort out who in state government tracked the housing for agricultural workers so he could visit their camps and dormitories. Finding patients now, however, is not as hard as it once was, Davis, 40, recalls. Although there is a 50 percent turnover season to season among the farm workers, 75 percent of the camps remain in the same place.

"We strive to provide not just linguistic but also culturally appropriate care," Davis says, whose agency was the first nonprofit to be recognized twice for Innovative Outreach Practices by the Washington, D.C.-based Farmworker Health Services awards program.

In the modern complex of low brick buildings where Greene County Health Care's main offices are located in Snow Hill, the Kate B. Reynolds Medical Center sees 30 to 50 patients per day. Yarima Chukwu, a medical family therapist, does psycho-social assessments there prior to doctor's visits, as part of a team that strives to provide holistic mental, emotional and physical care.

A big problem she sees with older Latino adults, Chukwu said, is depression.

"Most of it comes from being away from home," she said, adding that if the seniors are not busy working, caring for small children or other activities, their isolation can weigh on them. "Sometimes they feel like they have to depend on their children," she noted in listing other stressors. "They are torn by their divided families."

Davis' outreach workers also provide care for farm worker families where they live, visiting different sites with physician's assistants two to four nights each week. They transport patients to doctors' appointments and visits to labs or clinics for testing. The North Carolina Farmworker Health Program provides three-day trainings for outreach workers, covering health topics, language interpreting in health care and case management.

Now that the locations of the dwellings are known to the outreach workers, Greene County Health Care relies on word of mouth, visits to the camps and its free Snow Hill Health Fair, which is held each year on

the last Sunday in August in collaboration with a local Spanish radio station, to educate and treat farm workers and their families.

“If people see that you’re trying to help them...be straight from the beginning,” Davis said. “We’re well-established and trusted. We’re there to help them, and that’s it. Our biggest P.R. is word of mouth.”

Reciprocal respect

One of the people Davis won over and who now collaborates with him, is a 77-year-old *curandera*, or faith healer. The native of Mexico’s Guanajuato state has lived in the area for more than 20 years, tending to farmworker aches and pains both with medicinal herbs from her garden and with special massages. She can’t write or read, and she initially didn’t have much use for Davis’ program. But she developed arthritis and was treated by his nonprofit to relieve her pain.

Davis later spent months, prior to the birth of his young daughter, learning about her special garden and how she uses the plants. And the *curandera*, in turn, occasionally refers people to the nonprofit.

Administration

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CASA CENTRAL

A little boy runs through the room full of pint-size furniture and brightly colored posters. “*Abuelita! Abuelita!*” the 3-year-old yells, eager to show off a newfound toy to a woman who is seated at a low table, playing with two of his classmates.

The “granny” to them all praises his classroom discovery. Then Petra Vargas, 76, turns back to the other two boys. Although she is paid a small hourly wage, this is truly her labor of love.

“I love children and, since I no longer have little ones, I don’t want to be stuck at home,” the native of Manatí, Puerto Rico, says softly in Spanish. Her own three children have given her 11 grandchildren and five great-grandchildren. “When they had small children, I would help them.”

Now Vargas is part of the Foster Grandparents program at Casa Central, the largest Latino social service agency in Chicago. The over-60-year-olds who participate receive lunch, a yearly physical and a \$2.65 per hour stipend to visit and play with as many as three youngsters at a time, as well as transportation reimbursement. However, Vargas drives her own 2004 silver Kia Rio sedan to the center for her 8:30 a.m. to 2 p.m. shift every weekday.

The Foster Grandparents program represents an innovative approach that recognizes the older adults as valuable community resources. But Casa Central has had difficulties locating Latino seniors to participate in the program, despite its outreach efforts. In June 2010, Vargas was the only Hispanic of three foster grandparents in the Casa Central program run by Site Director Sandra Gallegos. The other two were non-Latina black women. Lucille Benford, 61, is the school day *abuelita* for the center’s 2-year-olds, while Vargas helps with 3-year-olds and special needs children, and Vernelia Harris, 75, visits with the 4-year-olds.

Casa Central’s showcase program for elderly Latinos is the Adult Day Service program at its Wellness Center, which offers a higher level of care-giving than senior centers. While Vargas, Harris and Benford play with their youngsters, a few miles away Latino seniors await lunch at their own home away from home.

Across California Ave. from Chicago’s Humboldt Park, the modern Casa Central Adult Day Services Center emphasizes wellness for the 70 to 75 seniors over 60 years of age who are cared for by an all-bilingual staff of 15, including certified nurse’s aides, program aides and interns. Together with volunteers, the ratio of helpers to seniors is roughly 10:1, according to Program Manager Oli Soto, whose background is in social work. The over-55 helpers include four staff trainees working minimum-wage jobs of 20 hours per week.

As a center for adult day services, Casa Central’s program is different from most senior centers in that it does the following:

- Divides the participants into five rooms, determined by needs and interests, rather than keeping everyone together in large spaces. Each room has bathroom facilities and helpers.
- Offers medical management, with a part-time licensed practical nurse overseeing distribution of morning and noon pills and the work of the four certified nurse’s aides.

- Provides support groups to address such aging-related topics as bereavement, issues of faith and losses of dignity.
- Gives additional attention to participants who have dementia, tracking their level of engagement and newfound interests. The findings are passed along to caregivers.

With a 7:3 ratio of female to male participants, the program tries to interest men in its activities, which include a Club de Dominó room and a pool table. Men and women join in producing crafts that decorate the center and are bought at Casa Central's annual crafts fair for its 450 employees.

The Adult Day Services operates from 9 a.m. to 3 p.m. five days a week. Its staff also devotes time to communicating with caregivers. Soto says that the participants with dementia form a pilot for staff interactions with caregivers. They are producing informal six-month progress reports and try to give monthly updates by phone.

In addition to the adult day services, Casa Central operates a home care agency that provides 255 home health care aides for 700 clients, of which 98 percent are Latino seniors, according to Casa Central Home Care Services Director Gustavo Saberbein, who in 2010 also served as president of the Illinois Adult Day Services Association.

Administration

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