

AGING TODAY

Vol. XXIX, No. 3

PAGES 12 & 15

May-June 2008

ISSN: 1043-1284

www.agingtoday.org

MULTICULTURAL PROGRAMS WIN FROM NEW YORK, L.A. AND CHICAGO

“When my wife of 42 years passed away, I was alone and scared. After funeral expenses, there wasn’t much left of our lifelong savings. The bills started to pile up and my landlord threatened eviction,” said Mr. Gonzalez (a pseudonym), a client of One Stop Senior Services. This 72-year-old man in New York City’s Upper West Side found help at the agency, which included his story in its 2007 annual report.

He continued, “They spoke with my landlord to halt eviction proceedings and assisted me in applying for benefits, such as Medicare, Food Stamps and Social Security. My caseworker referred me to a local bereavement support group and gave me a listing of senior centers in my area. She continues to follow up and calls me to ask how I’m doing. Because of One Stop, I’m no longer afraid to live on my own.”

ONE STOP

One Stop is one of three programs that received Network of Multicultural Aging Awards from the American Society on Aging (ASA), presented in collaboration with the AARP Foundation at ASA’s recent national conference in Washington, D.C.

One Stop meets the social service needs of isolated, impoverished and underserved New Yorkers ages 60 and older. According to One Stop Executive Director Ruth-Ellen Simmonds, “Our mission is to improve their lives by providing essential human services and access to rightful entitlements and benefits—all in one convenient neighborhood location.”

Each year, One Stop helps nearly 3,000 elders resolve issues of housing, immigration, bankruptcy, bill payments and financial elder abuse, to name a few. Since its inception in 1981, One Stop has provided its free services to more than 50,000 older adults. The agency staff visits clients in their homes or welcomes them at One Stop’s walk-in center as often as needed.

The organization offers a range of programs and services, such as assistance in obtaining benefits and entitlements, elder-abuse intervention and prevention, and an in-depth care management program for the frailest elders.

One Stop also set up its Medicare Part D Prescription Drug Enrollment Center to assist clients in the confusing process of choosing the most appropriate Medicare plan. In addition, the program holds a yearly tax clinic where seniors can receive assistance in filing their tax returns.

Program Director Carmen Escobar noted, “On any given day, the One Stop waiting room is filled to capacity with a ‘melting pot’ of seniors from various backgrounds.” She added, “Because so many of our clients are diverse, all client service workers are bilingual in Spanish and English, and one speaks French/Creole to better serve our Haitian clients.”

For more information about One Stop, call (212) 864-7900, ext. 14; e-mail: cescobar@onestopseniorservices.org; website: www.onestopseniorservices.org.

BE WELL

Be Well, a program of the Inglewood, Calif., Parks, Recreation and Community Services Department in the Los Angeles area, is an exercise and weight-management program designed for older people with chronic health conditions who are also at high nutritional risk. “These seniors were quite frail, often taking numerous medications for hypertension, diabetes and other conditions,” said Senior Programs and

Services Manager Sikizi Allen-Wagne. At intake, she said, older adults in the program are quite sedentary and a significant number use canes.

Established in 2003, Be Well has helped more than 250 elders improve self-management of their health, reduce hospitalizations, improve their quality of life and remain independent, said Bonnie Hart, president of Food and Nutrition Management Services, who helped develop Be Well. The program provides participants, who average age 74, an initial health assessment, including laboratory tests, to establish baseline, and the staff conducts interim and final outcome measurements.

Be Well offers an individual consultation for each client with medical and nutrition professionals, who assist participants in developing a master plan with specific exercise and nutrition goals, such as daily exercise or increasing the number of pedometer steps taken per day. The staff helps clients create a daily meal plan and provides blood glucose monitoring and education when appropriate. In addition, registered dietitians, who developed Be Well, provide monthly, one-on-one consultations with each client.

Participants engage in regular exercise and nutrition counseling, including two-hour sessions twice weekly for 16 weeks. The first hour is for a variety of low-impact exercises, dance movements and yoga techniques set to music chosen by participants. The second is for intensive nutrition education. The program offers free transportation to the senior center where sessions are held and provides Spanish translation. Be Well's clients are primarily Latino or African American. Physicians, pharmacists, social workers, nurses and other professionals are available for group and individual consultations. In addition, some past graduates of the program serve as peer mentors.

Elders who complete the initial intensive participate in a maintenance phase for an additional six months to reinforce and maintain changes in health-promoting behaviors; the program continues to monitor clients' progress toward their individualized goals.

Be Well has been replicated at a half-dozen other sites around Los Angeles County.

For more information, contact Allen-Wagne at (310) 412-4363 or sallen@cityofinglewood.org.

DEPRESSION PROGRAM

Like many older immigrants, Mrs. Wong (a pseudonym) never fully adjusted to her new life and language in the United States. After some years in Chicago, her husband died. Then she found that severe arthritis isolated her at home, and her son's family was always working or too busy to spend time with her. Eventually, she had trouble sleeping, sometimes forgot to eat and at times found it hard to get out of bed. A staff person at the Chinese American Service League persuaded her to participate in activities through a new program, where Mrs. Wong soon made a new friend playing mah-jongg. When she saw her grandchildren, she helped them prepare and enjoy Chinese food and talked with them about life in China.

Although her name is fictitious, Mrs. Wong was a real client of the Depression Project at Chicago's Coalition of Limited English Speaking Elderly (CLESE). The original impetus for the program, according to Program Manager Lidia de Ehrman, came from the executive director of an agency serving Korean elders, who noted that one-third of her agency's clients demonstrated signs of depression—yet none were receiving treatment. At her urging, CLESE convened a group of leaders in ethnic communities that the agency serves in the Chinese, Korean, Polish and Spanish languages.

The goals of the Depression Project are to improve knowledge and understanding of depression in older people among ethnic-agency staff via training and in ethnic communities through a public-awareness campaign. In its first year, through September 2007, the program also helped 160 older people cope with depression. The elders took an eight-week course that teaches coping strategies, enhances self-esteem and provides socialization. Another goal was to increase awareness, through letter and phone call contact, among 50 primary-care physicians of depression as a treatable illness.

De Ehrman noted that program participants shaped each group process. The staff frequently asked elders what kinds of activities they enjoyed most so that those could be included or increased. Each of the initial six groups had distinct issues and interests. For example, many older immigrants were processing a war that members of a younger group of seniors had not lived through, she said. Their group leader responded with calmer activities that helped them cope with events of long ago.

CLESE Executive Director Marta Pereyra added, "Depression can be addressed in ethnic communities where mental illness carries a deep stigma. It is essential to work with leaders of the community to ensure that the program is culturally acceptable and also suits the older adults with whom they are familiar."

For more information, contact de Ehrman at (312) 461-0812 or clese@ameritech.net. ❖