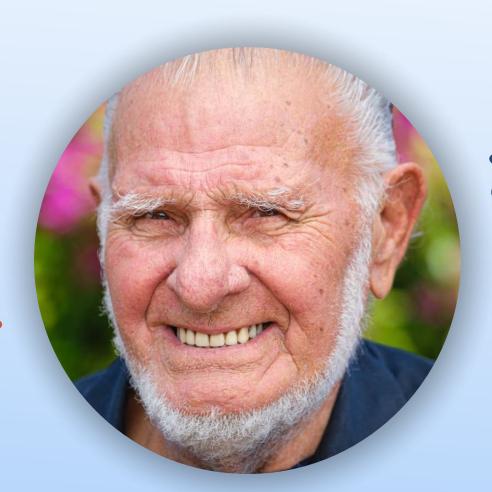


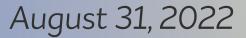


Latino Older Adult Outreach & Engagement Final Report

Presented by Generaciones en Acción to the Los Angeles County Department of Mental Health



In Memory of George M. Ricchezze "George de Aztlan" 1936-2022









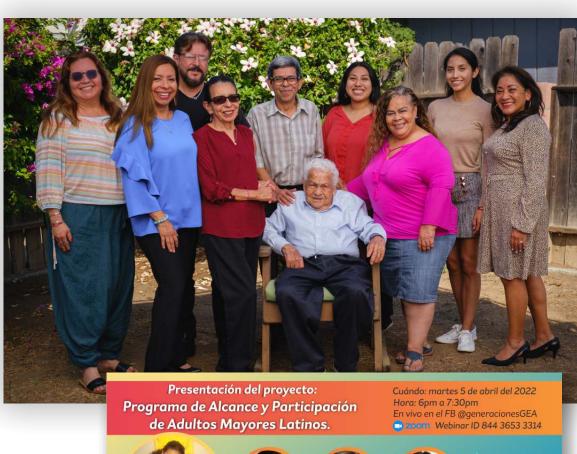
This report summarizes major events and activities for the Latino Older Adult Outreach & Engagement Project (LOAOE), implemented by Generaciones en Acción (GeA) for the Latino Underserved Cultural Communities Subcommittee of the Los Angeles County Department of Mental Health (LACDMH). The goal of the four phase endeavor was to reduce disparities and increasing mental health access for Latino community in Los Angeles, County. More specifically, the work sought to promote mental health literacy, increase mental health service utilization and education, and reduce mental health stigma. Between May and August 2022, GeA worked very closely with several community partners and consumers to develop culturally responsive workshops and resource guide specific to the Latino community. The workshops developed and delivered can serve as a model for building capacity among similar organizations.





The report is divided into four sections, Start-up, Outreach and Promotion, Curriculum Delivery and Evaluation.

















Start Up



The LOAOE began by inviting community partners that had proven records of being low cost, competent, accessible to the elderly, and with Spanish language capacity to be included in the resource booklet. GeA invited over 75 organizations, most of which met the criteria and were eventually included in the resource book. Table 1 below is a sample of the organizations invited to be included in the resource booklet.

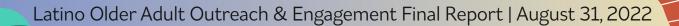


Table 1. Sampling of Collaborating Organizations

Los Angeles County Department of Mental Health	Altamed PACE		
Generaciones en Acción	City of Los Angeles Department of Recreation and Parks		
Food Oasis	LA Voice		
Bienestar Human Services	Clinica Msr. Oscar A. Romero		
Legal Aid Foundation of Los Angeles	Los Angeles County Elder Abuse Hotline etc.		













Resource Book Development

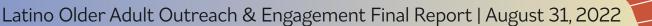


Work on the resource book began by creating an advisory group of 12 elderly people aged 60 to 95, who provided the guidance to design and create the book. The group met for a total of six sessions, all but one through Zoom. The advisory group suggested categories, organizations, and other aspects of the book. The older adults shared their personal quotes that were also included in the book; honoring their wisdom. We hope their images and quotes will serve as inspiration, encouraging and empowering both young and old to continue the pursuit of their goals. A photo session of older adults in our community was held. The photos gave visibility to their faces and honored their leadership.















Curriculum Development



The Older Adult Outreach Curriculum was designed with a researcher from University of California, Los Angeles (UCLA). The completed curriculum consisted of 3 classes and the following themes shown in Table 2.





Class	Name	Topics
1	Intergenerational Communication	Compassionate communicationResilienceConflict resolution
2	Mental Health in Older Adults	Depression and anxietyImmigration and traumaSolitude in old age
3	Older Adults and use Technology	 Social Networking: Benefits and Risks Learn how to use new mobile applications and technology







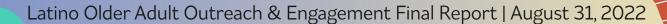


















Outreach and Promotion Engagement



The booklet was digitized and shared on GeA's and LACDMH's websites. The project kicked-off with a community-wide Zoom event hosted by GeA. The completed booklet was bi-lingual in English and Spanish. It was presented to the community during an event entitled, "ADULTO MAYOR - Give voice to adults", held on April 30, 2022 . Three hundred flyers featuring the book and workshops were also distributed to approximately 50 adults present at the event. In addition, 6, 000 copies of the book were printed and delivered at the workshops and to organizations throughout Los Angeles County.























Delivery of Curriculum



The classes were implemented in SPA 2, SPA 7, SPA 4 and SPA 3, reaching 261 participants in a variety of settings (Table 3). More than half of the participants (57.5%) joined us through an on-line format. Average attendance for in-person was and the average attendance for on-line presentation was 33.3. The average was influenced by class one, sponsored by the Mexican consulate. A total of 53 people participated. Staff note that registration for the consulate classes was very high, but actual attendance was considerably lower. Moreover, technical difficulties cut one of the classes short. Retention rates for the classes varied. From first to second class, attendance for the in-person classes dropped by 34%. For the on-line format, attendance dropped by 24%. Attendance for El Monte actually increased from first to second class. The last class of the El Monte on-line class was cancelled for unforeseen reasons.







Training Location/Organization	Class	Platform	Date	Number of Participants
	1	In-Person	05-16-2022	28
PLAZA SINALOA	2	In-Person	05-23-2022	20
	3	In-Person	06-06-2022	16
Nuevo Amanecer Mujer Integral (SPA 7)	1	In-Person	06-13-2022	22
	2	In-Person	06-20-2022	13
	3	In-Person	06-27-2022	12
Mexican Consulate (Consulado de México)	1	Zoom	07-12-2022	53
	2	Zoom	07-19-2022	31
	3	Zoom	07-26-2022	37
	1	Zoom	08-13-2022	11
El Monte	2	Zoom	08-20-2022	18
	3	Zoom	Cancelled	
				261

















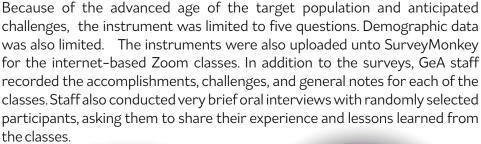
Evaluation



With the assistance of the Latino older adult advisory group, a pre-post-test was designed to measure the program's expected objectives. The pre-post instrument was later refined into the required Likert scale format in collaboration with Dr. Heriberto Escamilla, a consultant with experience in cross-cultural evaluation. The five statements are listed below.



- 1. Feeling sad, without desire to do anything is a normal part of getting
- 2. There is nothing that can be done for people with mental health problems
- 3. Mental health problems can be detected and diagnosed by professional
- 4. Family problems can sometimes cause anxiety and loneliness
- 5. I know where to find help near me

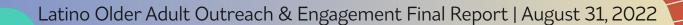


















The following sections presents preliminary findings from 14 pre and 42 posttests that were submitted on-line as well as staff notes and participant testimonials. The small number of pre-tests, plus the fact that three of them may be too young may limit the validity of the ANOVA.



Most of the participants that completed an on-line pre-test form were female (92.9%) (Table 4).



Table 4. Gender

	Frequency	Percent	Valid Percent	Cumulative Percent
Feminine	13	92.9	92.9	97.6
Masculine	1	7.1	7.1	100.0
Total	14	100.0	100.0	



Participant age ranged from 35 to 83, with an average of 52.4 (Table 5). There were 4 participants under the age of 50 that skew the mean. Individuals under the age of 50 were not be included in the final analysis.

Table 5. Participant Age

	N	Minimum	Maximum	Mean	Std. Deviation
Age	14	35.00	83.00	52.4286	12.13840
Valid N (listwise)	14				









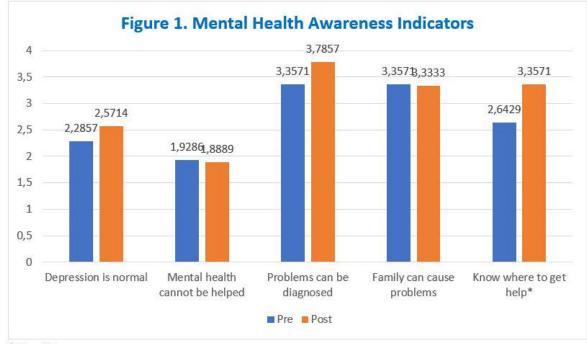








Participants indicated the extent to which they agreed with each of the statements. I score of 4 indicates they completely agree with the statement, while 1 indicates they completed disagreed. We should note that there are a very small number of pre-tests, which may limit the validity of the analysis. Only one of the items exhibited a significant difference in mean from pre to post test. After the training, participants indicated that they knew where to find help that was close to them. There was also a notable, but not statistically significant change in question three, people also tended to agree more with the statement that people with mental health problems could be helped. As note earlier, the small number of cases and four outliers may skew the mean and limit the validity of the assessment. Figure 1 shows the participants agreement with various statements before and after attending the classes.























General staff observations



One of the first, and perhaps most critical, observations was that physical and cultural limitations of the participating elders was more than anticipated. While the information presented was reported as well received and helpful, both workshop topics and delivery need to be more culturally focused despite GeA's tailoring of the workshops. Second, most of the participants struggled with the questionnaires. Some of the participants may have been functionally illiterate, challenged by disabilities that limited their ability to understand the questions. This was even more complicated for on-line classes, where access and familiarity with technology were additional factors.





















Project Achievements



While designing and implementing the project presented difficult challenges, staff noted a number of accomplishments. First and foremost, the project was completed and as we will see from testimonials, very well received. Secondly, staff noticed that participants connected with each other during the sessions. In evaluating this effort, it is important to understand the value of the curriculum and information as well as the social interactions. Given the connections, GeA has initiated the development of an older adult support and advice network. Staff also noted that there was an atmosphere of confidentiality and trust developed in-person and over the internet, allowing people to be vulnerable. The connections resulting from this project have also stimulated discussions of a documentary highlighting the Latino older adults.













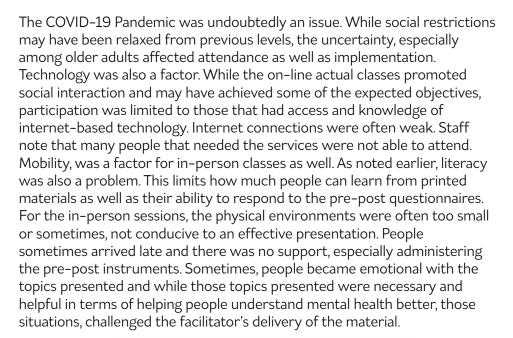








Project Challenges























Testimonials



After the class and when possible, staff elicited open-ended comments and testimonials from participants. We also included the English version of responses to staff-developed questions and participant responses. In general, the responses indicate that some of the participants were taking away helpful information. Many tended to personalize the information, helping them gain insights into their own conditions and situations. Others spontaneously identified steps they could take to help themselves. Most of the people that responded either directly or indirectly expressed gratitude for the classes. The responses to the staff questions also point to possible questions that could be used to inform objectives in future projects and evaluations.







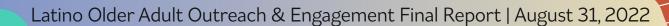










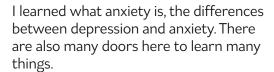








Verbatim and Anonymous testimonials



Today I had a learning that I will make the most of in my life.

Thank you for this class, I'm going to practice what I've learned to take care of my mental health.

These classes offered in Spanish are very beautiful, I am in San Francisco and it helped me to have more information for my patients and clients.

I learned a lot about anxiety, and I loved knowing the difference between dementia and Alzheimer's

I suffered from depression and now I know I need to accept and learn more from it.

"I take step #5 of conflict resolution, where I can have a mediator to resolve situations. Thanks to you, I can have a new tool for my life."

"The suggestions given on how to ask for help and support assertively. They will help me to have better communication with my family:

"I take a lot of knowledge for my teacher's work, interacting with parents when they have conflicts with their children. In addition, I take the example of my mother here Evarista about how she has left the whole family the example of resilience. Since 2 of her children and her husband have died, and

she is moving forward with strength and joy."

"After listening to this class, I realize that I have to learn a lot more for working with the older people I care for.

"I learned in this class the components of having healthy and healthy communication with all people."

"I could learn the concept of resilience and how we have the strength to recover and move forward in any situation."

"I take all the positive things from the presenter and the people they shared"

"I met my great, great with them."

"I thank my mother for what I am, she speaks with many sayings, the one who learns to listen goes a long way."

"If we prepare from a young age, our relationships will improve."

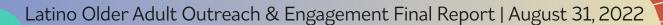


















Responses to staff-developed questions



"To be okay with myself and those next to me."

"To see the family calm and to be able to help them"

"To have a lot of health and to have my mother alive."

"A state of mind is to be in balance."
"If the family is okay, the important thing for me is to love myself."

"To have inner peace and to be very well spiritually and to be grateful."



"I have seen older people disconnect from their children."

"Congenital depression exists, because when they are older, depression often explodes."

Is it possible that you have depression?

"Months ago I started having physical symptoms, I was in therapy, sometimes I confuse it with age, I'm 50 years old."

Anxiety

"I have two children aged 22 and 24, I feel anxious that something will happen to them when they go out to have fun."

Have you felt loneliness?

"Sometimes, though we are surrounded by people, we feel lonely."

"I worked with older people, changed their diapers, talked to them with my heart. It was something very nice in my life."

What changes will you make after listening to this presentation?

"Get involved with, teach, and learn from older people."

"Self-watch me react to situations that offend me, Take pauses in my emotions so I don't harm people."

"Be patient for older people and listen to them."

"Talk to older people to feel I do something for them."

"I care for seniors and would like to involve sharing this information with their families to listen to them."

"Involve my family... Talk and involve my family, put young people in their minds to respect older people."

"I would like to support."





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Graphic Designer: Beth Ludojoski Evaluator: Heriberto Escamilla Ph.D











