# **EQUITY CHECKUP:**

Practical Tips for Meeting the Needs of Diverse Older Patients and Family Caregivers

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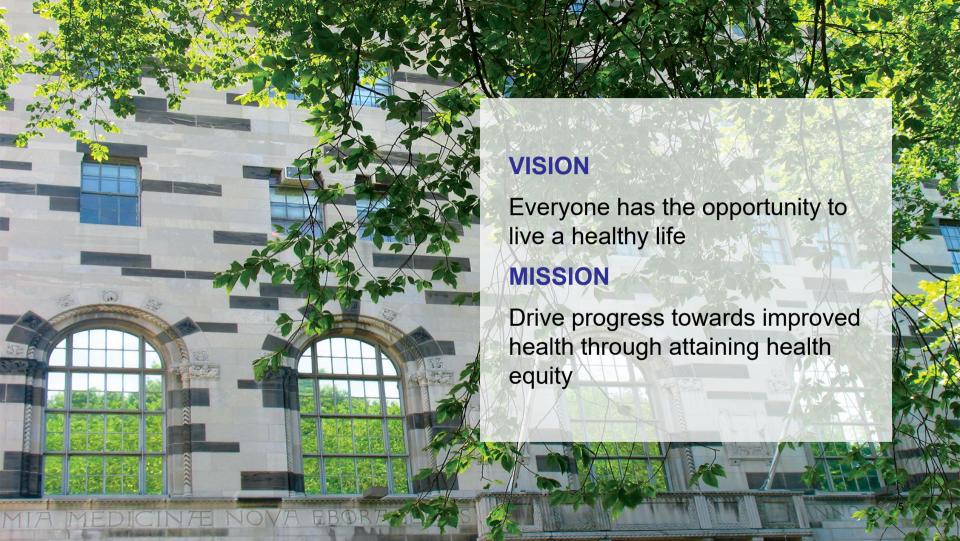
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# **TODAY'S AGENDA**

- Overview of NYAM and Diverse Elders Coalition
- Demographics of Diverse Older Adults
- Practical Tips for Meeting the Needs of Diverse Older Patients
- Stories from Diverse Family Caregivers
- Resources



# WHO WE ARE



# **CENTER FOR HEALTHY AGING**



### NYAM works to improve the health and well-being of current and future aging populations.

### Our goals are to:

- Increase social, physical, and economic participation
- Improve perceptions of well-being, quality of life, and autonomy
- Maximize functional ability and minimize activity limitations
- Deliver better care and services

### We aim to achieve these goals through:

- Convening for policy and practice change
- Promoting data-driven planning and policy
- Providing strategic assistance for policy implementation
- Contributing to the evidence base for healthy aging interventions



# **OLDER ADULTS' EQUITY COLLABORATIVE**



The Older Adults' Equity Collaborative (OAEC), funded by the federal Administration for Community Living (ACL) convenes national nonprofits committed to aging and minority populations.

OAEC Resource Library



# **DIVERSE ELDERS COALITION**

The Diverse Elders Coalition (DEC) advocates for policies and programs that improve aging in our communities as racially and ethnically diverse people; American Indians and Alaska Natives; and LGBTQ+ (lesbian, gay, bisexual, transgender, queer and questioning, and additional identities) communities



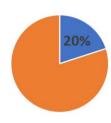
Who We Are



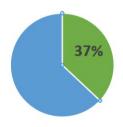
# DEMOGRAPHICS OF OLDER ADULTS IN THE U.S.



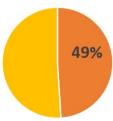
# **DEMOGRAPHICS OF ADULTS 65+ IN THE U.S.**



1 of 5 older adults is a person of color or American Indian/Alaska Native



3 of 8 LGBT adults are age 65+



In NYC, 49% of adults age 65+ identify as Black, Latino, or Asian



# **DEMOGRAPHICS OF ADULTS 65+ IN THE U.S.**

In the next 10 years...



20% of the US population will be age 65+

30% of older Americans will identify as diverse or underrepresented



# **DEMOGRAPHICS OF ADULTS 65+ IN THE U.S.**

- 78% of LGBT older adults go back in the closet when entering a longterm care facility
- By 2060, 20% of all older Americans will be Latino
- There are 100 languages spoken among the older Asian American Pacific Islander population
- 35% of African-American older adults are responsible for raising grandchildren
- There are 570,000 Native Americans age 65+, concentrated in OK AZ, CA, NM, NC, and TX



# PRACTICAL TIPS FOR MEETING THE NEEDS OF DIVERSE OLDER PATIENTS



# **INCLUSIVE INTAKE FORMS**



### Identify and include an expanded definition of family caregivers

- Expand the definition of "family" to include friends, neighbors, and others outside of the traditional family structure
- Ensure questions about caregivers/emergency contacts can be identified as a family member or friend

# Collect information on SOGI (sexual orientation and gender identity) to better understand the needs of your patients

- Include questions on SOGI
- Reflect the words people use to describe their own identities and relationships
- Click <u>here</u> to access "Focus on Forms and Policy: Creating an Inclusive Environment for LGBT Patients"



# **INCLUSIVE INTAKE FORMS**

Preferred Pronoun: He	She They Ze	A pronoun not listed	☐ No pronoun preference		
We require the following information for the purposes of helping our staff use the most respectful language when addressing you, understanding our population better, and fulfilling our grant reporting requirements. The options for some of these questions were provided by our funders. Please help us serve you better by selecting the best answers to these questions. Thank You.					
Preferred Spoken/Written Language:	Race: *Select all that apply*	Ethnicity:	Veteran?  Yes  No		
☐ English ☐ Spanish ☐ American Sign Language ☐ Other:		☐ Non-Hispanic/Latino ☐ Dominican ☐ Cuban	Migrant Worker?		
Language interpretation services needed?  No Yes, language:	Asian: Asian Indian Chinese Korean	Mexican, Chicano/a Puerto Rican Other Hispanic/Latino	How did you first learn of Callen-Lorde?  Friend/Patient		
Sexual Orientation  Lesbian  Gay Straight Something Else Queer Decline to Answer	Filipino Vietnamese Japanese Other  Native Hawaiian/Pacific Islander: Native Hawaiian	Decline to Answer  Housing Status:  Stable Housing  Homeless	Referral Health Fair/Presentation Callen-Lorde Website/Internet Callen-Lorde Brochure/Ad		
Gender I dentity:  Male/Man Female/Woman	Guamanian or Chamorro Samoan Other Pacific Islander	Decline to answer If homeless, select which best applies:	☐ Facebook/Social Media ☐ TV/Radio/Print Media		
TransMale/TransMan TransFemale/TransWoman Genderqueer/Gender nonconforming Something Else Decline to Answer	Decline to Answer  Sex Assigned at Birth:  Male Intersex  Female Decline to Answer	☐ Street ☐ Homeless Shelter ☐ Transitional ☐ Doubling Up (not paying rent)	Do you have a non Callen- Lorde primary care provider that you want to continue to see?  Yes No		

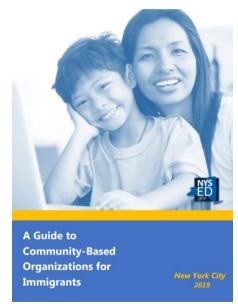


# **COMMUNITY-BASED ORGANIZATIONS**

Develop and leverage partnerships with CBOs to make referrals and connect with local professionals who can provide culturally-appropriate insight on programming and materials



NAPCA Helpline



The National Resource Center on LGBT Aging has compiled a state-by-state listing non-profit resources so you can find assistance in your community.

### Are you an LGBT-friendly service provider?

Non-profit organizations providing LGBT welcoming services can apply to be listed as a resource by **completing the following application form**.

NYC Guide to CBOs for Immigrants

SAGE LGBT-friendly Service Providers



# **EDUCATIONAL MATERIALS**

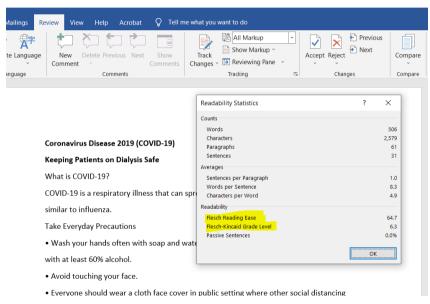
- □ Do your materials include images that reflect your patient populations?
- ☐ Are your materials written in the languages that your patient populations speak?





# **EDUCATIONAL MATERIALS**

☐ Are your materials written at a 6<sup>th</sup> grade or lower reading level?



Click <u>here</u> for resource on how to use the readability scale in Microsoft Word



# STORIES FROM DIVERSE FAMILY CAREGIVERS

### **CAREGIVING EXPERIENCE: MELANIE**

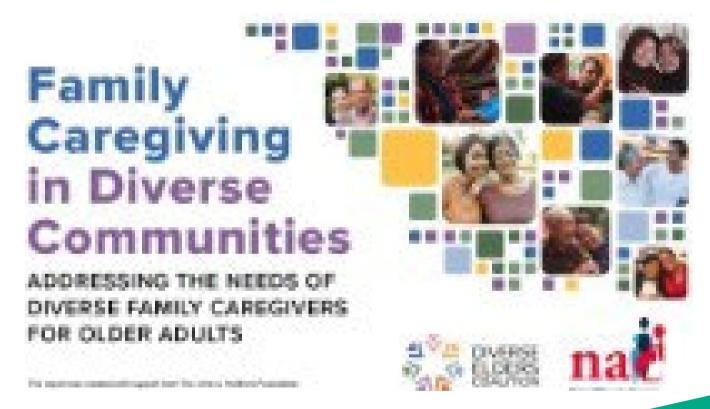
Melanie is a member of the Millie Lacs Band of Ojibwe in the Minnesota region. Previously, she cared for her mother, who had dementia and related health conditions, and her sister, who was diagnosed with terminal cancer. Currently, she cares for her brother, who has an undiagnosed immunosuppressant disease.

Melanie has experienced similarities and differences in her caregiving roles. For her mother and sister, she has cared for them with the rest of her family at home, helping them out of bed, getting them food, and providing other basic needs. She found the experiences both stressful and heartbreaking to see someone she loves so ill and unable to help them. She often found herself confronted with guilt that she wasn't doing enough or when she had to travel away from home for work. She also feels guilt when caregiving takes away from her time with her grandkids.

Melanie's brother lives in their tribe's assisted living unit, but Melanie and her family do not utilize the staff, instead doing all tasks themselves, because of concern over the Covid-19 pandemic. Melanie and her sister even do specialized medical tasks for their brother like administering meds through a stomach tube, a process Melanie was taught by her sister, and not by any official training, especially due to the fact that the staff at the unit is not trained for this task. While Melanie felt that caring for her mother was her responsibility and not a caregiving role, she definitely feels like a caregiver for her brother.

As an Anishinabe, Melanie feels there is an unspoken law to care for others in your community, especially family members. She has started petitioning her reservation to provide more support for long-term care that families can't manage on their own. For Melanie, all governments, from local to federal, need to pass legislation that pays caregivers, provides Paid Family Leave, and gets them support. Those making legislation also need to realize every community's cultural needs are different, and they cannot all be relegated to one box. These laws should be flexible so communities can care for their own people the way they see fit.





Watch the <u>YouTube clip</u> from 31:30 – 36:18 (or the entire webinar on Family Caregiving in Diverse Communities!)



# **Experiences of Diverse Family Caregivers in the Pandemic**

	MENTAL HEALTH & SOCIAL ISOLATION		FINANCIAL STRAIN
TOP CHALLENGES	Anxiety Incre	5% eased ation	35% Financial strain <sup>1</sup>
TOP CONCERNS	56% "Taking care of myself"		54%  "Preparing for the future financially"
DESIRED SERVICES	43% Emotional support		43% Financial help



# PROTECTIVE FACTORS

Diverse family caregivers also reported experiencing some positive outcomes from the COVID-19 pandemic, demonstrating resilience and community interdependence:

**55%** 

Spent more time with family

48%

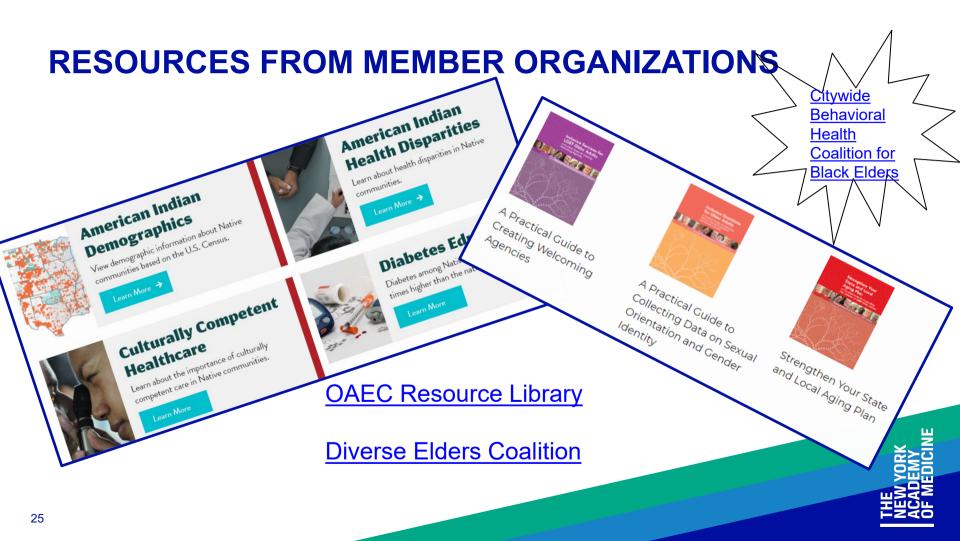
Decreased commute times 44%

Learned or used new technology



# RESOURCES

THE NEW YORK ACADEMY OF MEDICINE



# **OAEC RESOURCE LIBRARY**



National Plan to Address Alzheimer's Disease: 2021 Update

Show All Articles (5)



Family Caregiving in Diverse Communities:

ADDRESSING THE NEEDS OF DIVERSE
FAMILY CAREGIVERS FOR OLDER ADULTS

Show All Articles (8)



Staying Safe in a Pandemic: Holiday Edition
Show All Articles (10)



How To Be An Ally To Transgender Older Adults

Show All Articles (7)



Person-Centered Services and LGBT People with Disabilities

Show All Articles (3)



Resilient Communities: Empowering Older Adults in Disasters and Daily Life

Show All Articles (4)

OAEC Resource Library



# **ADDITIONAL CAREGIVING RESOURCES**



Click here for toolkit



Click here for report



# QUESTIONS/COMMENTS?

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