Pathways to Lifelong Wellness: Progress to Date and Challenges Ahead

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Vision on Healthy Aging

- My personal vision for healthy aging is living your life as fully as you can as you journey through the years, staying as engaged as you wish in employment, social relationships, and involved actively in your community: living a happy and healthy life even if you have chronic illness by maintaining control of your own destiny for as long as you can. I believe that we have a responsibility toward our elders to provide them with the best quality of life as they age
- I believe we have the tools to help our elders maintain independence and stay in control of their health and well-being through community and evidence based programs, such as the Stanford Chronic Disease Self-Management Program (CDSMP), which provides education, information and empowerment
- I feel blessed that I work for an organization that shares this same vision and has enabled me to implement it through my work at the state, agency, and community level



Implementing culturally competent evidence-based programs for older adults

- State Level Sharing my expertise as a bilingual T-Trainer of the Stanford CDSMP, and as a Latino woman in the Massachusetts Empowering Older Adults Leadership Team
- Agency Level Providing technical support specifically for the Spanish CDSMP
- Community Level Commonwealth Care Alliance offered training to its members in the CDSMP in English and Spanish



What's working well?

We've delivered 12 workshops across the State

Commonwealth Care Alliance CDSMP Workshops (as of November 2009)

Year	# of Workshops	Region/County
2006	2 in Spanish Hampden/Springfield	
2007	2 in English Hampden & Essex/ Springfield and Lynn	
2008	3 in English	Hampden, Essex & Suffolk / Springfield, Lynn and Boston
2009 (to date)	3 in Spanish, 2 in English	Hampden, Essex & Suffolk /Springfield, Lynn and Boston



What's working well? (cont.)

- We've successfully developed a cadre of lay leaders in both English and Spanish
 - 10 Commonwealth Care Alliance CDSMP lay leaders
- We've strengthened relationships with agencies across the State, collaborating in training their staff and implementing the CDSMP in their agencies. Some agencies are:
 - Greater Lynn Senior Services
 - Chinese Golden Age Center
 - Boston Public Health Commission
 - ETHOS
 - Sophia Snow House
 - Department of Public Health



What's working well? (cont.)

We've trained 60 Lay Leaders (as of November 2009)

Year	Leaders Trained	Organizations
2007	10 lay leaders, English	Commonwealth Care Alliance & Health Care for All
	12 lay leaders, English	Commonwealth Care Alliance & Greater Lynn Senior Services
2008	12 lay leaders, English	Commonwealth Care Alliance, Chinese Golden Age, & Dept Public Health
	2 lay leaders, Spanish	Commonwealth Care Alliance
2009	7 lay leaders, Spanish	Commonwealth Care Alliance & Boston Public Health Commission
	17 lay leaders, English	Commonwealth Care Alliance, Boston Public Health Commission & ETHOS



What's working well? (cont.)

- We have learned that many elders feel isolated, lonely, and depressed, and have expressed an interest in more opportunities to socialize with peers
- We've been most successful in recruiting our Latino members to participate in the workshops, and ultimately in changing their behavior
- We have done a remarkable job "building community" and promoting empowerment with our members in so many ways that would have been unimaginable a few years ago. Many positive results were anticipated, but what wasn't anticipated was a very unique "gift". The communities of elders and their families have embraced our dedicated trainers with an outpouring of caring, concern, affection, and support that is truly unusual



What are the Challenges?

- The need to "spread" the model to provide more opportunities for Latinos and other ethnic groups to be able to participate. This is correlated to the low number of trainers who can speak Spanish and other languages
- Recruiting English-speaking members
- Attrition or disenrollment from workshops
- Location
 - Finding locations close to target population suitable for members whose frailty requires the use of scooters, wheelchairs, etc.
- Transportation
 - When agencies can't provide transportation, finding reliable transportation vendors can be difficult
- Materials
 - Covering the cost of materials for participants



How Can We Be helpful?

- We need other champions like Dr. Robert Schreiber from HSL, Dr. Robert J. Master from Commonwealth Care Alliance, Dr. Adam Burrows from the Upham's Corner PACE Program, and Dr. Jeffrey Scavron from the Brightwood Community Health Center in Springfield to help us promote and implement community evidence based programs
- We need other multicultural agencies to come on board and embrace these programs
- We need each and every one of you in the audience today to help us make strong pathways to lifelong wellness for our aging population!





