Serving Hispanic Families

HOME AND COMMUNITY-BASED SERVICES
FOR PEOPLE WITH DEMENTIA AND THEIR CAREGIVERS

alzheimer's association

A TOOLKIT FOR
THE AGING NETWORK

RTI INTERNATIONAL
Serving Hispanic Families

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About This Toolkit: Serving Hispanic Families

Home and Community-Based Services for People with Dementia and Their Caregivers

The Hispanic population is increasing in size and prominence. Alzheimer’s disease and other dementias are an unrecognized public health issue in the Hispanic community. Accordingly, creating opportunities for Hispanics to overcome deep cultural barriers to obtaining care is important. Hispanics’ strong cultural commitment to family can result in increased caregiver stress. Family caregivers should be the focus of dementia outreach and have options for culturally appropriate support in their community. This toolkit describes actions states can take to elevate awareness about dementia and provide connections to caregiver care services in the Hispanic community.

The Serving Hispanic Families Toolkit:

- Outlines the importance of addressing issues of outreach and support for Hispanic families coping with dementia.
- Defines dementia-capable services and how states can best serve Hispanic families.
- Shows how outreach and support play a critical role in increasing home and community-based services while decreasing institutional care.
- Provides an array of resources that are model programs or unique examples for state officials to use when developing programs. Many of these programs are funded by the Administration on Aging through the Alzheimer's Disease Demonstration Grants to the States (ADDGS) program.
- Summarizes four key actions states can take when developing successful Hispanic outreach and support programs. These key actions are:
  1. Provide culturally appropriate information on dementia and caregiving.
  2. Increase awareness through community outreach, education, and networking.
  3. Provide access to local dementia-capable resources.
  4. Support caregivers by developing dementia-capable services in the community.

This toolkit provides information on promising practices, with hyperlinks to material available on the Internet.
Promising Practices: Serving Hispanic Families

Home and Community-Based Services for People with Dementia and Their Caregivers

Why Address Dementia Outreach and Care for Hispanic Families?

- Alzheimer’s disease is a devastating degenerative disease that causes memory loss, challenging behavior problems, and severe functional limitations.

- Hispanics are the fastest growing ethnic group people in the United States: one in eight is Hispanic/Latino. By the year 2050, one in four Americans will be of Hispanic/Latino origin.

- Hispanics develop symptoms of Alzheimer’s up to 7 years earlier than non-Hispanic Caucasians. Diabetes, high blood pressure, and vascular disease (all risk factors for Alzheimer’s disease) are very prevalent among Hispanic seniors.

- The impact on caregivers can be severe. Older Hispanics are more likely than other seniors to live with their families. Accordingly, Hispanics are not receiving the support they need. A number of barriers keep many Hispanic caregivers from receiving dementia services:
  - Cultural barriers. The U.S. health care system is very different from those in Spanish-speaking countries. A strong aspect of Hispanic culture is the need for “personalismo” or a personal touch, which is often absent in the U.S. health care system.
  - Language barriers. Many senior Hispanics speak limited English and are weary of the health care system. Once in the health care system, 43 percent of Latinos report having difficulty communicating with their doctors.
  - Limited services. Culturally proficient services for Hispanic families are limited in their community.
  - Lack of awareness. General lack of awareness about dementia in Hispanic communities contributes to the stigma concerning dementia. Hispanics are more likely to consider dementia as a normal part of aging and are less likely to seek services at an early stage. Many may not know about available services.

What Are Dementia-Capable Services?

To be dementia-capable, individuals who assist consumers to access home and community-based services must be

- skilled at identifying people with Alzheimer’s disease,
- knowledgeable about the kinds of services that can help people with dementia and their caregivers, and
• capable of providing linkages to other agencies and community organizations that can help.

To best serve Hispanic families, home and community-based services providers need to recognize that:

• Families are the primary source of support.
• Families may make different choices based on cultural perspective.
• Acceptance of cultural viewpoints is critical when adapting service delivery systems to Hispanic communities.

Serving Hispanic Families

States can engage in four key activities to provide outreach and support for Hispanic families coping with dementia:

1. Provide culturally appropriate information on dementia and caregiving.
2. Increase awareness through community outreach, education, and networking.
3. Provide access to local dementia-capable resources.
4. Support caregivers by developing dementia-capable services in the community.

Promising Practices for Each Key Activity

1. Provide culturally appropriate information on dementia and caregiving

The first steps in creating an effective outreach program are to understand the Hispanic population and culture, and to disseminate materials in Spanish and English.

A. Understand the Hispanic population and culture

To develop culturally appropriate materials, it is essential to understand the Hispanic community, how Hispanics view the disease, and how they make decisions about care.

1. **Understand the Hispanic population.** Age is the number one risk factor for developing Alzheimer’s disease; Hispanics are projected to have the longest life expectancy of any ethnic group. By the year 2050 the average life span of Hispanics will be 84 years of age. These statistics exemplify the importance of understanding the Hispanic population. The following list includes several documents that profile the Hispanic population.

• The U.S. Department of Commerce developed *We the People: Hispanics in the United States*, which provides a more detailed portrait of the demographic, social, and economic characteristics of Hispanics.
• *Hispanic Health and Aging in a New Century*, developed by the National Alliance for Hispanic Health, examines key aspects of the population growth among elderly Hispanics by focusing on economic challenges, the uninsured, and limited access to medical care—factors that can result in compromised health, limited elder care options, and restricted family living arrangements.

• The U.S. Department of Health and Human Services’ Office on Minority Health offers *Cultural Competency Guides and Resources*, which provides information on demographics and health disparities. It also includes a framework of national standards for providing culturally competent health services and tools to use for organizing programs.

2. **Understand the Hispanic culture.** Preconceived ideas about dementia are a major obstacle to successful outreach programs. Hispanics with dementia are more likely to live with their families than most other diverse groups but are less likely to see physicians or other health professionals. The majority of Hispanics go undiagnosed, in part, because they face language and cultural barriers when communicating with their doctor. Knowledge and beliefs about dementia range from the perception that it is a “normal part of aging” to its association with mental illness. “Caregiving” in Spanish has a different meaning because primary caregivers are not prevalent in Hispanic families. Instead, entire families take part in supporting persons with the disease. When accumulating or developing outreach materials, states need to recognize how dementia affects Hispanic families and how culture plays an important role in accessing services.

• *Hispanic/Latinos and Alzheimer’s Disease*, produced by the Alzheimer’s Association, specifically addresses Alzheimer’s and how it affects the Latino community.

• *Delivering Health Care to Hispanics: A Manual for Providers*, developed by the National Alliance for Hispanic Health, suggests ways to overcome barriers; gives an overview of the diverse community, beliefs, and practices that influence Hispanic health; and offers strategies for patient-provider interaction, promoting health through community education.

B. **Disseminate education materials in Spanish and English**

For many people, seeking information and services about memory loss can be stressful. It can be even more difficult for non-English speakers and individuals unfamiliar with the health care system. Most materials are not developed with Hispanic consumers in mind. In communities where language differences exist, materials must be offered in both Spanish and English, written in easily understood terms (with appropriate health literacy levels), and presented in a culturally appropriate manner. States can evaluate existing materials and decide whether (1) to use existing culturally proficient materials in Spanish, or (2) develop new materials and/or translate existing materials into Spanish.
1. **Use existing culturally proficient materials.** Rather than develop new materials, it may be advantageous to use existing bilingual and culturally proficient educational materials developed by reputable organizations such as the Administration on Aging, **U.S. National Institutes of Health/National Institute on Aging, Family Caregiver Alliance**, and the **Alzheimer’s Association**. Other organizations with information on Hispanic health issues include: **The National Alliance for Hispanic Health**, **The National Hispanic Council on Aging**, and the **National Council of La Raza**. Examples of general information, information for caregivers, and information about working with physicians are listed below.

**General information**

- *The Latino Family and Alzheimer’s disease/La Familia Latina y Problemas de la Memoria* (DVD narrated by Maria Elena Salinas and developed by the Alzheimer’s Association)
- *Basics of Alzheimer’s/Información Básica Sobre la Enfermedad de Alzheimer* (Alzheimer’s Association)
- *What’s Happening to Grandpa?/Que la Pasa al Abuelito?* (Alzheimer’s Association)
- *10 Warning Signs of Alzheimer’s/10 sintomas de la enfermedad de Alzheimers* (Alzheimer’s Association)

**Caregivers**

- *Caregivers Guide/Guía para Quienes Cuidan personas con la Enfermedad de Alzheimers* (U.S. National Institute of Health/ National Institute on Aging/ Alzheimer’s Disease Education and Referral— ADEAR)
- *Caring for Adults with Cognitive and Memory Impairments/El cuidado de los adultos con trastornos cognitivos y de la memoria* (The Family Caregiver Alliance)
- *Caregiver Stress/La Tension en las Encargadas del Cuidado de los Enfermos de Alzheimer*—Spanish-language brochure with tips for caregivers (Alzheimer’s Association)
- *Safety Guide/Siempre Seguro*—Spanish-language guide to safety (Alzheimer’s Association)

**Working with doctors**

Both the National Institutes of Health and the Alzheimer’s Association have created resources to empower patients at the doctor’s office. These can be used as resources to help patients and educate caregivers.
• **Partnering with Your Doctor** (Establezca una Alianza con su Medico)

• **Talking with Your Doctor** (Conversando con su Medico)

States can use many Web sites that provide information to family caregivers specifically for the Hispanic community.

• ADDGS grantees developed resources for the Spanish-speaking population. This material can be found on the Administration on Aging Alzheimer's Disease Program Web site.

• The Family Caregiver Alliance has created a booklet on Community Care Options in Spanish. This booklet informs consumers about various community options, including information and referral, case management services, and respite care.

• The Alzheimer’s Association has a comprehensive Web site for Latino Caregivers and Families with information in Spanish. A section for Professional Care Providers offers professional-level information about the disease and treatments, information about quality care, training programs, and continuing education opportunities.

2. **Develop new materials or translate existing materials.** States can seek cultural guidance when developing materials or translating existing materials. Translated materials in Spanish may not be effective for all Hispanic/Latino populations because differences in vocabulary and culture depend on the country of origin. For example, materials for Mexican Americans may not be appropriate for individuals from Puerto Rico. States can develop materials incorporating the cultural beliefs and practices of their targeted population. An effective way to attain this goal is to involve key community constituents early in the planning process. Additionally, the following publications provide cultural guidance information.

• **The Dementia Care Network Replication Manual** offers tips to developing written communications. This manual was funded by a federal ADDGS grant and produced by the Alzheimer’s Association, California Southland Chapter. Steps for developing/translating materials are also included.

• **A Patient-Centered Guide to Implementing Language Access Services in Healthcare Organizations**, developed by the Office of Minority Health, U.S. Department of Health and Human Services, provides ideas on how to make materials available in other languages, tips on cultural implications, insights into developing new materials vs. translating materials, and other recommendations.

• Organizations often lack the basic terminology to talk about various aspects of Alzheimer’s disease. To help organizations use the correct terminology, the Alzheimer’s Association created a **Glossary of Terms in Spanish** relating to Alzheimer's disease.
2. Increase awareness through community outreach, education, and networking

Many families are not aware of the disease, its demand on caregivers, or the variety of resources available in the community. Alzheimer outreach can be a gateway to educating caregivers and linking families with community-based organizations and services that are needed to prolong family care. The most successful ways to build an effective outreach program are to:

- Reach out to Hispanic families in their communities; train caregivers on dementia and how to gain access to support.
- Partner with and train community-based organizations about dementia, caregivers, and how to link to appropriate community services.
- Present information through community events and Hispanic media.

A. Reach out to Hispanic families in their communities

Reaching out to Hispanic families coping with dementia provides “personalismo” or a personal touch. This personal exchange can reduce cultural, linguistic, and lack of awareness barriers that are prevalent in most Hispanic communities. To best serve families, states can: (1) provide individual support for families in their communities; and (2) train caregivers about dementia and how to gain access to services.

1. Provide individual support for families in their communities. Offering programs that provide person- and family-centered support can educate families about dementia and help them to make informed choices about their long term care needs. Examples of ADDGS programs that provide one-on-one informational services include:

   - **Idaho’s EVA (Empowering and Valuing the Aging)** is a volunteer respite program serving Latino families. Spanish-speaking coordinators personally visit homes, conduct assessments, and match families with volunteers. Volunteers provide a range of services including visitation, light housekeeping, meal preparation, household maintenance, and a short break for caregivers.

   - **Florida’s S.T.A.R.S. and Beyond** program specifically targeted families in rural counties of the Florida panhandle. Volunteers walked door-to-door offering families basic information on dementia and distributed copies of the Florida Consumer Resource Guide/Guia de Recursos del Consumidor that lists services available in their communities.

2. Train caregivers about dementia and how to gain access to services. Educating families about how to care for family members with dementia can prolong their capacity to provide quality home care. Several states have incorporated caregiving trainings into their state’s ADDGS activities:

   - **New Mexico’s Caregiver Connection** is an educational and training program that covers a variety of caregiver skills development and
resource topics. The program also offers a resource library/clearinghouse within the Latino community and community caregiver support groups.

- **Arizona’s** Walk of Friendship (Camino de Amistad) trains caregivers on dementia, elder abuse, first aid, cardiopulmonary resuscitation (CPR), personal care, and career counseling. This 21-hour training program is designed not only to educate caregivers, but also to give them an opportunity for career possibilities with the elderly long-term care industry. Classes are offered in Spanish and English.

- **Colorado’s** ADDGS program, the Savvy Caregiver, provides dementia care education and training for rural caregivers. Due to the constraints of time and distance, rural caregivers are often unable to leave loved ones at home on a weekly basis to attend regularly scheduled caregiver trainings. The Colorado program addresses this problem by providing caregiver training on a condensed and accelerated schedule. Also available is information about Savvy Caregiver for use by trainers. Nearly half of all state ADDGS programs have used Savvy Caregiver as a caregiver education and training program. At present, Savvy Caregiver is being adapted into a Spanish-language format entitled *Cuidando con Respecto*.

**B. Partner with and train community-based organizations**

One of the best ways to reach out to the Hispanic population is to build a presence in the community. This can draw positive endorsements from family members and friends and convince persons with dementia and families to accept help. Working with local Hispanic organizations builds credibility and trust within the community. When developing programs to benefit Hispanic families, states can: (1) build relationships with existing CBOs, and (2) train community-based organizations about dementia, caregivers, and how to link families to dementia-capable services.

1. **Build relationships with existing community-based organizations.** There are many ways to develop relationships with leaders or gatekeepers within communities. Strategies include hiring staff from Hispanic-communities, supporting ethnic-based organizations and business, locating services physically in the community, forming advisory committees of community leaders, and working with faith-based and service organizations. For example:

- **California’s** *El Portal* or The Gateway is often cited as one of the most effective programs in building partnerships in the Latino community. Through a series of ADDGS grants, the Alzheimer’s Association chapter developed partnerships with over 100 community organizations and service providers in the Los Angeles area to offer dementia-friendly services, including education, training and outreach, case management, adult day care, in-home respite, support groups, legal assistance, transportation, a home safety intervention, and a Spanish language helpline. The *Dementia Care Network Replication Manual* is a resource...
created especially to make replication of El Portal easy and accessible for other states.

- Many ADDGS programs, such as in Nevada and California, partner with Hispanic faith-based organizations to build coalitions of volunteers to provide information, outreach to the community, and provide respite care.

2. **Train community-based organizations.** One key to prolong home care and delay institutionalization is to provide quality care to families dealing with cognitive impairment. However, many community service staff and volunteers lack training and knowledge about Alzheimer’s disease and how to link clients with dementia-capable resources. Examples of programs designed to educate CBOs about Alzheimer’s and other dementias include:

- **Puerto Rico’s** ADDGS program trains volunteers who are available for up to 4 hours per day for in-home care of persons with mid-stage Alzheimer’s. Volunteers are carefully screened and complete a comprehensive training program. Also, family caregivers receive training on aspects of care. **Puerto Rico** also offers training to directors of long-term care facilities, social workers, nurses, and volunteers at senior centers.

C. **Present information through community events and the Hispanic media**

Offering a broader opportunity to educate caregivers and organizations can be effective in the Hispanic community. Many ADDGS grants have been successful with public education and working with the Hispanic media to increase community awareness.

- **Public education.** ADDGS programs in New Mexico, Connecticut, Idaho, California, Puerto Rico, and Minnesota provide educational presentations or workshops at senior centers, churches, health fairs, community groups, health organizations, government agencies, and senior housing communities. **Arizona’s** program holds caregiver conferences called *Un Descansito* (Little Rest) throughout the year and solely in Spanish. New York City’s program offers bimonthly workshops for Hispanic caregivers called *Understanding Dementia*. Minnesota offers a weekly *Juntarse (gathering)* for Hispanic elders, which provides exercises, medical needs review, help with navigating the healthcare and social service system, and monthly medical checkups.

- **Working with the Hispanic media.** The ethnic media market is expanding and plays an important role in keeping families connected to their community and culture. Alzheimer’s Disease Demonstrations Grants to States programs in California, Puerto Rico, Florida, New Mexico, Minnesota, and Arizona targeted the Hispanic media to increase awareness about dementia:
  - **Puerto Rico’s** program has been featured in several media outlets including *Plenitud Dorada*, a newspaper for the elderly community.
Florida's state-funded REACHOUT program created a culturally appropriate public service announcement about dementia. The program also inspired a television show, “Forget Me Not”, to educate Hispanics in South Florida about the disease and how it affects the Hispanic community.

New Mexico’s program partnered with an elder community newspaper, Prime Time New Mexico, to publish the Caregiver Resource Guide.

Arizona developed successful radio and television public service announcements featuring a respected Latino community leader.

3. **Provide access to local dementia-capable services**

Many Hispanic families are unaware of services available for persons with dementia. Or if they are aware of dementia services, they may not know how to access them. Providing families with understandable and accessible dementia-capable services is a major component of a successful dementia outreach program. Key elements are to:

- Develop local programs that help guide Hispanic family caregivers to resources.
- Ensure that single points of entry (SPOEs) connect caregivers to community resources with expertise in dementia care.

A. **Develop local programs that help guide Hispanic family caregivers to resources**

ADDGS programs have developed local dementia care systems that address the specific needs of Hispanic family caregivers. These programs help people with the disease and their caregivers navigate the elder care system. Specific examples of state resources providing community information for Hispanics are:

- **Washington’s** El Portal Northwest program (based on California’s program) focuses on education and referral services for the growing Latino community in King County. The program guides Latino families by helping them find support and additional resources. Support groups in Spanish for Latino families are included as part of the program.

- **Illinois’** ADDGS program involved CLESE (Coalition of Limited English Speaking Elderly) to serve immigrant and refugee populations. Agencies representing various ethnicities have formed this coalition to advocate for elders and to help them navigate the health care system. Services provided include case management, homemaker, and adult day care.
B. Ensure Single Points of Entry connect caregivers to community resources with expertise in dementia care

The local dementia network system should be linked to the state or community single points of entry system. Single Points of Entry, such as Aging and Disability Resource Centers (ADRCs) are one-stop systems that offer consumers information, access to support, and linkages to local care services. ADRCs reduce service fragmentation and simplify access to dementia-capable support and services.

State ADDGS programs have partnered with several ADRCs to integrate services. These state government dementia care experts and their partner organizations can provide information about dementia resources and can facilitate connections to community service providers. Some states have used ADDGS grants to enable their ADRCs to become more dementia capable. Examples of states that have used their ADDGS programs to collaborate with their ADRCs follow:

- **Minnesota** used ADDGS funds to make its ADRC dementia capable. For example, it revised the referral database used by staff of the state’s telephone information system, Senior LinkAge Line™, so that when contacts about a person with dementia are identified, the caller is referred first to the Alzheimer’s Association for help with defining care needs and selecting service providers. Changes were also made to computerized intake and self-assessment forms.

States and communities can link to existing resources that are experts in dementia and caregiving:

- The Alzheimer’s Association’s Spanish language 24/7 Helpline, supported in part by the U.S. Administration on Aging, provides reliable information and support to individuals affected by Alzheimer’s disease or related dementias. The toll-free number is available anytime day or night at 1-800-272-3900. The 24/7 Helpline serves people with memory loss and their families, caregivers, health care professionals, and the public. The Helpline’s highly trained and knowledgeable staff can help with: (1) understanding memory loss, dementia, and Alzheimer's; (2) challenging behaviors; (3) general information about aging and brain health; (4) skills to provide quality care and to obtain the best care from professionals; (5) legal, financial, and living-arrangement decisions; and (6) caregiver stress.

- **Local chapters of the Alzheimer’s Association** offer a wide range of dementia-specific services, including care consultation, and referrals to community service providers that can accommodate the person’s dementia-related care needs, educational programs, family caregiver training, and support groups for the person with dementia and the family. Local chapters have a 24/7 Helpline to help callers.
• Compassionate Care Helpline, 1-877-658-8896, is a bilingual helpline that offers information and resources for people living with or caring for someone with a serious illness.

• Eldercare Locator at 1-800-677-1116, sponsored by the U.S. Administration on Aging, links those who need assistance with state and local area agencies on aging and CBOs. Spanish-speaking information specialists are available.

• The Message Board offers support and advice on an English and Spanish-language forum moderated by Alzheimer’s Association care consultants.

• The National Hispanic Family Health Helpline, 1-866-783-2645, is a bilingual individual assistance with questions about health and aging, and referrals to local services.

4. Support caregivers by developing dementia-capable services in the community

With Alzheimer’s disease projected to increase for the Hispanic population, the need for culturally proficient care will continue to grow. However, gaps in care and services are prevalent in minority areas. States can identify service delivery gaps and develop or enhance programs to help meet the needs of Latino families. Culturally proficient services can include:

• care consultation
• respite care
• adult day care services.

A. Care consultation

Care consultation services help people determine their needs and find the best available resources to meet those needs. Because of language barriers and unfamiliarity with the health care system, it is often necessary for those working with Hispanic families to offer additional services.

• Connecticut REACT reaches out to Hispanic seniors predominately in the Hartford area. Once a referral is received, a bilingual social worker visits the family to perform a needs assessment, and then arranges for appropriate community-based services. The staff accompanies the senior and caregiver to the memory clinic to translate during testing and follow-up appointments. Spanish-language information is also provided.

• Minnesota’s Payne-Phalen Living at Home/Block Nurse program has integrated culturally proficient dementia identification into its core mission of providing services to older adults in the community. The program has bilingual staff who conduct assessments of seniors and their caregivers, and provides extensive case management and care coordination. It has developed protocols for promoting integrated care.
California’s Dementia Care Network program includes bicultural, bilingual “care advocates” who conduct a needs assessment and assist with access to appropriate care and services. Care advocates serve as the point people for home visits, care planning, purchase of services, service coordination, monitoring, and follow-up.

B. Respite care

Family members taking care of persons with dementia need time off to protect their own physical and mental health. Respite services give caregivers a break from continuous care. Many ADDGS programs offer consumer-directed care programs such as offering vouchers that provide caregivers with a stipend to purchase a range of respite services. Other programs offer unique respite services and support. The following are examples:

- **Arizona’s** ADDGS program, Camino de Amistad, ensures that culturally appropriate services are provided to Hispanic families. Families are offered the flexibility of receiving in-home personal care or respite care by either traditional provider agencies or by selecting family members or friends to perform those services. Adult day care, group respite, and transportation services are also provided using grant funds.

- **Puerto Rico’s** ADDGS program uses volunteers to provide in-home respite care to families faring for bedridden individuals with Alzheimer’s disease. These volunteers receive specialized training on topics like nutrition and the handling of bedridden seniors, as well as a small stipend for their services.

- **Texas’** Caregivers Day Out program is a mobile respite service that offers services at numerous churches in the Hispanic community. This respite program offers a variety of culturally specific activities for participants such as exercises, sing-a-longs, crafts, and dominos.

- **New Jersey’s** ADDGS program offers support to caregivers through environmental interventions. This program offers training to care managers, providers, and volunteers who provide home safety assessments and home modifications to Hispanic families coping with dementia.

C. Adult day care services

Adult day care is a structured activity program designed to offer a safe environment to frail or disabled elders who are unable to remain at home alone during the day. Adult day care programs are a way of providing respite, information, and support for Hispanic caregivers:

- **Idaho’s** Drop-In ADDGS-funded day care program allows Hispanic caregivers to leave family members with dementia in a safe and stimulating environment while they take a break from caregiving responsibilities. Participants enjoy activities and traditional games like La Chalupa Spanish Loteria. They also take part in a 30-minute exercise program.
• **Virginia's** Alzheimer's Family Day Center provides adult day health care, training for caregivers, support groups, and preventive services. It is one of the leading centers nationwide to provide programs for people in the later stages of Alzheimer's disease.

• Easter Seals of South Florida’s adult day care center is one of four model day care programs in Florida. Open 6 days a week, 12 hours a day, Easter Seals provides participants who are primarily Latino with bilingual therapeutic recreational activities, nutritious meals, personal care and assistance, health and medical services, rehabilitation services, caregiver support, and transportation. The staff ratio is 1 to 3 and staff receives intensive training on Alzheimer's disease, specifically on behavioral issues.

**Additional Information**

The U.S. Administration on Aging has developed eight toolkits in this series that focus on different aspects of providing home and community based services to people with dementia and their caregivers. These online toolkits are available at the Administration on Aging Alzheimer's Disease Program page. Toolkit titles include:

1. Consumer-Directed Care
2. Disaster Preparedness
3. Resources for Individuals and Families
4. Serving African American Families
5. Serving Asian and Pacific Islander Families
6. Serving Hispanic Families
7. Single Point of Entry Systems
8. Supporting Family Caregivers

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