

MINUTES OF THE HOUSE KANSAS FUTURES COMMITTEE

The meeting was called to order by Chairman Carlos Mayans at 1:30 p.m. on February 1, 2001 in Room 526-S of the State Capitol.

All members were present except: Representative Karen DiVita - excused
Representative Carl Krehbiel - excused
Representative Mike O'Neal - excused
Representative Dixie Toelkes - excused

Committee staff present: April Holman, Legislative Research Department
Lynne Holt, Legislative Research Department
Amy Kramer, Legislative Research Department
Lois Hedrick, Committee Secretary

Conferees appearing before the committee:

Deborah Donaldson, Director of COMCARE of Sedgwick County
Annette Graham, Executive Director of Sedgwick County's Department
On Aging and the Central Plains Area Agency on Aging
Randy Class, Chairman of the Wichita/Sedgwick County Multicultural
Mobilization Coalition
Carolyn Benitez, Executive Director, LaFamilia Senior/Community Center
Jim Beckwith, President, Kansas Association of Area Agencies on Aging
(K4A)

Others attending: See attached list

Chairman Carlos Mayans introduced Deborah Donaldson.

COMCARE and Sedgwick County's Suicide Prevention Task Force

Ms. Donaldson described COMCARE, its Crisis Intervention Program, and the new Suicide Prevention Task Force. COMCARE offers the Crisis Assessment Program for Seniors, where a qualified mental health professional assesses the mental status of an individual and provides intervention or referral as required. The Task Force, formed as a result of an increasing suicide rate among the elderly, is developing a plan for suicide prevention to complement the work of COMCARE's program. Ms. Donaldson suggested policy changes for consideration: (1) support program flexibility, (2) increase education about aging and mental health, and (3) develop a state plan to address these problems. (See testimony, Attachment 1.)

Sedgwick County's Aging and Mental Wellness Coalition

Annette Graham described the County's 56-member Aging and Mental Wellness Coalition that has developed a guide for its members and physicians; and a pamphlet with information on suicide and the elderly for Coalition members, case managers and senior centers. Its mission is to identify issues facing elders, provide mental health education, assess and refer those in need of assistance to available resources, and advocate new resources based on identified needs. (See testimony, Attachment 2.)

Representative Sloan noted the Oregon law on euthanasia and suggested that may be a pattern Kansas should consider for the "end of life" issue. Representative Bethell described the Oregon process for euthanasia and noted there are over 4,000 physicians in that state and to date, of 240 requests, only one in six has been approved.

Representative Miller suggested, that because of funding shortages, the possibility arises for development of a model project between fee-based organizations, volunteers, and professionals to address the needs

CONTINUATION SHEET

MINUTES OF THE HOUSE KANSAS FUTURES COMMITTEE at 1:30 p.m. on February 1, 2001 in Room 526-S of the Capitol.

identified by the Coalition; such as translation services for Asians and Hispanics, health insurance coverage for those disenfranchised from coverage, continued cultural diversity for service providers, and strengthening the infrastructure to obtain funding.

Wichita/Sedgwick County Multicultural Mobilization Coalition

Randy Class described the Coalition as a 50-member voluntary alliance of business, social, medical, and consumer provider organizations, for the purpose of mobilizing resources to address unmet needs and strengthen the integrity and stability of multicultural families. (See testimony, Attachment 3.)

Carolyn Benitez described LaFamilia's mission to provide meals, home care services, medical services, and a variety of services for access to social services. She stated in Wichita there is a need for funds to train and certify accurate translators; and indicated the state must hire more bilingual professionals and provide funding for programs that will benefit the various cultures in Kansas. (See testimony, Attachment 4.)

Kansas Association of Area Agencies on Aging (K4A)

Jim Beckwith presented an update on Services for Seniors in Kansas with a litany of programs and needs for services for aging Kansans, including:

- The population explosion of older Kansans and their needs for long-term-care.
- Cost-shifting by Medicare to local government, providers, and consumers.
- Severe problems to retain service providers.
- Funding.
- The major increase in the continuum of care needs.
- Growing waiting lists for services.
- Anticipated shortage of funding.

He then listed several recommendations for consideration:

- The Legislature determine a statewide long-term-care philosophy.
- Establish a Health Care Trust Fund with the Tobacco Settlement money.
- Provide a wage pass-through for HHA workers.
- Continue the Single Point of Entry for seniors.
- Examine long-term-care insurance concerning standardization of coverage and benefits and its compatibility with existing services.
- Fund a Prescription Drug benefit.
- Cut red tape.
- Innovate programs (i.e., China's *Time Bank*).

The next meeting, a tour, is scheduled for February 5, 2001.

KANSAS FUTURES COMMITTEE
GUEST LIST
FEBRUARY 1, 2001

[PLEASE PRINT YOUR NAME]

[REPRESENTING]

Annette Graham

Sedg Co Dept on Aging

Deborah Donaldson

Division of Human Services
COMCARE of Sedgwick County
Family Consultation Service
WIC/ATH/AS.

Randy Glass

Carla Benitez

La Familia Senior Comm.

Marco Benitez

Student

Linda Wright

Johnson County Area Agency on Aging

Leon Klaber

KCP

Lindsay de la Torre

KDOA

Hugh W. Work

Spelman Glasscock - Staff

Jim Beckwith

Ks Assoc of Area Agencies on Aging

Sheli Eweeney

KDOA

Bill Henry

Ks Assn Area Agencies on Aging

DAVID MCCLURE

KANSAS HEALTH INSTITUTE

Sedgwick County, Kansas

Division of Human Services

COMCARE

- Community Mental Health Center
- Community Developmental Disability Organization

Department on Aging
Department of Corrections



Deborah Donaldson, Director
Administrative Center
635 N. Main, Wichita, KS 67203-3602
316-383-8251
Fax: 316-383-7925

Testimony for Kansas Future: A strategy for Demographic Change Committee

Aging and Mental Health

February 1, 2001

Presented by Deborah Donaldson

Many of us continue to believe myths and misconceptions about the aging population. Contrary to popular belief, this is a population which tends to be active and healthy. Unfortunately, this is also a population which can suffer from undiagnosed and untreated mental illness which may affect most aspects of their life. For example, it is not normal for older adults to feel depressed. This is not a normal part of aging. Fortunately, if appropriately diagnosed, depression tends to be a highly treatable illness.

Of particular interest was the press release, which was sent out two days ago, from the Kansas Department on Aging about the results of an extensive survey of seniors which was just completed. In the press release Secretary Hubbell stated, "I was particularly interested in a new concern which seniors expressed - maintaining mental wellness, which ranked among the top ten concerns. Of the entire sample, 22 percent indicated they did not know how to obtain mental wellness services. This points to a need to increase awareness of available mental health services in our communities and the importance of mental wellness in older adults." These results would indicate almost one in every four seniors has a concern in this area.

I would like to share with you what we have been developing in anticipation

HOUSE KANSAS FUTURES

Of particular interest was the press release, which was sent out two days ago, from the Kansas Department on Aging about the results of an extensive survey of seniors which was just completed. In the press release Secretary

2-1-01
Attachment 1

of these escalating needs and the work being done to meet current demand.

Sedgwick County has recently established a Suicide Prevention Task Force. This is in response to the Surgeon General's "Call To Action," which stated that "suicide rates are highest among the elderly," and data indicates most visited their primary care physician close to the time of the suicide. The data show 20 percent visited the same day, 40 percent within one week and 70 percent within one month. This leads to the question of what can our community do to help educate physicians to identify the signs of depression and provide or refer to appropriate treatment. There has been some work done on this by the Aging and Mental Wellness Coalition which Annette Graham will share with you in her testimony. The array of possible symptoms, which suggest problems with depression, can include tearfulness, excessive sadness, changes in eating or sleeping habits, and feeling worthless or helpless.

The Suicide Prevention Task Force has called a meeting February 20 and 21, 2001 to focus on these issues and determine next steps to complete and implement a plan for suicide prevention. The aging population and its needs will likely be an important component of that plan in collaboration with the Aging and Mental Wellness Coalition. Ms. Graham is also scheduled to speak at that meeting.

COMCARE's Crisis Intervention Program, in collaboration with the Department on Aging, currently offers the Crisis Assessment Program for Seniors (CAPS). This program provides services to individuals 60 years of age or older who reside in Sedgwick County. Referrals are accepted on a 24 hours/7 day a week basis. All contacts are made within two to three days. Anyone can make referrals to the program, such as family members, case managers from the Department on Aging, and Adult Protective Services.

A qualified mental health professional will make up to three visits at the home of the person referred to assess the mental status and provide appropriate intervention or referral. An example of how this intervention works involved a referral from a family regarding their 81-year-old mother, who lived in a small community. The mother was becoming increasingly depressed and withdrawn. She had seen her family physician and had been given an antidepressant, but it was not helping. She refused to see a mental health professional, but did agree to the CAPS therapist visiting her. A total of three visits were made to the home and it was evident the woman was clinically depressed. By the third visit the therapist

was able to help the woman accept she did need help, and she was successfully referred to the outpatient program to see the aging specialist. The family was pleased the outreach was able to convince the mother to seek help.

The experiences we've had would lead us to suggest policy changes that (1) support flexibility when working with the aging population, which include working with this population in whatever setting is most comfortable for them and eliminate any financial disincentives to do so; (2) education, not only for the providers of care and families, but the entire community about aging and mental health; and (3) a state level plan developed which address these issues.



SEDGWICK COUNTY DEPARTMENT ON AGING

Annette Graham, *Director*

510 N. Main, Suite 502

Wichita, Kansas 67203-3752

Phone: (316) 383-7298

Testimony to the House Kansas Futures Committee
February 1, 2001

Good afternoon, my name is Annette Graham. I am the Executive Director for the Sedgwick County Department on Aging and the Central Plains Area Agency on Aging.

Thank you, Chairman Mayans and the other members of this committee for the opportunity to provide you with information about the Aging and Mental Wellness Coalition of Sedgwick County. Today I will inform you about the history of this coalition, our membership, our purpose, activities and goals. I will talk about the challenges and opportunities we are facing.

In August of 1998 the State Mental Health and Aging Coalition sponsored a two-day conference on building local coalitions. Out of that conference a group of professionals began developing our local coalition. We began meeting in November of 1998 and developed some initial goals, a mission and identified some issues to begin work on.

Since those initial meetings the coalition has accomplished several of these goals. Our accomplishments include the development and dissemination of a brochure on Suicide and the elderly, a local resource guide, presentations and articles about the coalition, and participation in the National Depression Awareness screening week.

The Coalition is made up of over 56 individuals representing a wide array of agencies, organizations and consumers and we continue to expand our membership. I have included a membership list in your packet.

The mission of the coalition is to: promote mental wellness through resources, education, quality services and advocacy for the aging population

HOUSE KANSAS FUTURES

2-1-01

Attachment 2

Information & Assistance: (316) 383-7824

Fax: (316) 383-7757

in Sedgwick County. The coalition works to identify mental health needs and gaps in services, and to collaboratively work together to develop resources and identify possible solutions to these.

We identified the need for a resource guide for mental wellness and then developed a local guide that has been disseminated through our members. We are working to get it out to physicians.

The coalition found a lack of information on suicide and the elderly and then developed a pamphlet on this topic. This pamphlet has been provided to the coalition for distribution to their staff, to case managers and senior centers.

The coalition participated in the National Depression Awareness week by setting up two sites for screenings: one at a senior center and one at an elderly focused housing complex. Mental Health professionals from the coalition volunteered to provide presentations and screenings at the sites. The screenings were well received and the participants were receptive to the information shared.

The coalition has now embarked on a depression education and screening initiative. Through volunteers on the coalition from: The Central Plains Area Agency on Aging, COMCARE, Prairie View, the Via Christ Life Unit we plan to provide presentations on mental wellness and conduct depression screenings at senior centers and elderly focused housing sites in Sedgwick County this year.

The coalition has through a collaborative and coordinated effort been able to identify the issues facing elders in our community related to mental health and mental wellness. We have established goals to begin to address some of these issues and through working together we can provide education for elders, family members, professionals, agencies, and caregivers. Through this process we are also providing assessments and referrals to individuals in need of services and at the same time gathering data so we can advocate for resources based on the needs identified. This is an opportunity for us to work together, to join forces and tackle a growing need as our population ages.

Mental Health services for the aging requires a non-traditional delivery system and the Aging and Mental Wellness Coalition of Sedgwick County has taken some initial steps towards that goal.

Thank you for this time to present this information to you. I will be happy to address any questions you have.



560 North Exposition at McLean
Wichita, Kansas 67203

Ph. 316 • 264 • 8317
Fx. 316 • 264 • 0347

Emergency Phone
316 • 263 • 3770

John Reiff, President
Tony Madrigal, 1st Vice President
Liz Armstrong, 2nd Vice President
Debbie Cook, Secretary
Shelly Hammond, Treasurer
Mary Ann Chitwood
Jake Coniglio
Philip Davidson
Tom Hulsey
Vici Jackson
Margaret Kline
Joan Layman
Betty Leader
Ron Leupp
Liz McGinnes
Judith Nelson
Susan Shannon
Ken Stoppel
Walt Thompson
Val Wachtel

Licensed Mental Health Center

Affiliated with
COMCARE
of Sedgwick County

Charter Member
Since 1922



**Kansas Futures: A Strategy for Demographic Change Committee
Testimony (on behalf of): Multicultural Mobilization Coalition
Wichita/Sedgwick County**

**Presenter: Randy Class, Chairman
Date: February 1, 2001**

It is a pleasure to have this opportunity to present information to this esteemed committee. My name is Randy Class, Chairman of the Multicultural Mobilization Coalition of Wichita/Sedgwick County. Chairing this vigorous organization the past year has been both an honor and a challenge: an honor to represent organizations serving our cultural and ethnic diverse brothers and sisters and a challenge to sensitize myself and become more aware of my own cultural misconceptions.

Today I will provide you a sketch of the Coalition; our mission, the growing membership, consumers served, and the diversity of services provided. Next, I will illustrate the unique needs of our culturally diverse aging populations and how critical the welfare of our aging populations is to a stable and productive society.

After my presentation, I will introduce Carolyn Benitez, Executive Director of La Familia in Wichita, a unique and grass roots team of citizens organized to meet the needs of elderly Hispanics.

The Multicultural Mobilization Coalition is just what the name implies: a voluntary alliance of business, social, medical, and consumer provider organizations organized to mobilize resources to address the unmet needs of our multicultural residents. The mission of the Coalition is to: "Alleviate all barriers to health and quality of life resulting from access, communication, and cultural inadequacies affecting different racial and ethnic groups."

The Coalition has grown from two founding organizations (Family Consultation Service and WASAC) in 1997 to over 50 member organizations in 2001. (See Coalition Attachment) Most recent data collected from member organizations shows a population of 52,417 beneficiaries (consumers) of services from Coalition membership in 2000 alone and demand for services is growing.

Needs identified by our Coalition membership are many and varied. Topping the list in priority is: 1) Translation services for first generation Asians and Hispanics – basic services are often available but communication barriers hinder access and efficient use of services, 2) Health insurance coverage (medical and mental health on a parity basis) to the large populations of working poor disenfranchised from employer benefits and not eligible for Medicaid assistance, 3) Cultural diversity training and education for all service providers on an on-going basis, 4) Lack of an infrastructure and a strategic plan to coordinate grant, foundation, and legislative funding of needed services.

Our future is only as successful as understanding our past and those who contributed to it. One institution remains that is primary to the values and principles that guide a strong nation: the family. The integrity and stability of the family is the greatest key to maintaining our strength and vitality.

Our elderly family members represent our greatest resource in family stability. Our nation prospered in its development and evolution because of a strong nuclear and extended family. Grandparents are the guardians of our values, principles, and standards of behavior and are essential in instilling and enhancing these characteristics in our children. One of the greatest threats to our nation and democracy is the lessening dependence, distancing and isolation of our elderly family members.

These pressures are particularly acute for our aging culturally diverse populations. First-generation immigrant families with aging seniors who are past their productive years are particularly vulnerable to depression and estrangement brought on by a sense of isolation, the loss of cultural values and seeing grandchildren assimilated by the lure of a techno and stimulus oriented society.

Initiatives that strengthen the family and enable our elderly to retain their value and dignity are encouraged. Health care funding, mental health parity, enhanced home health care for the elderly, enhanced prescription medication access and reduced costs and community based multicultural services and events are but a few examples requiring your attention, sponsorship and support.

MULTICULTURAL MOBILIZATION COALITION

Wichita, Kansas

The Multicultural Mobilization Coalition (MMC) is a voluntary alliance of individuals and organizations dedicated to identifying the unmet needs and developing resources for Wichita and Sedgwick County's culturally diverse residents.

Membership: Membership includes a growing list of organizations serving the health, social and cultural needs of our culturally diverse residents. It is estimated that the following organizations provide direct services that touch the lives of over 50,000 consumers in Sedgwick County.

Member Organizations:

Adult Care Management Services	Alzheimer's Association
Big Brothers & Sisters	Catholic Charities
Census Bureau	Child Care Association
City of Wichita	COMCARE
Community Health Department	Community Mission Service
Development Systems	Family Consultation Service (FCS)
Health Options for Planeview (HOP)	HOPE Services Inc.
Hunter Health Clinic	KPTS Public TV
LaFamilia Senior/Community Center	Medical Service Bureau
Madrigal & Associates	Mennonite Housing
Mid-American Indian Center	Midtown Community Resource Ctr.
Our Gang (HIV/AIDS Outreach)	Project Access
Senior Services	SER Corporation
Sedgwick County Dept of Aging	South East Asia Baptist Church
Tran Medical Clinic	United Methodist Health Clinics
United Way Of The Plains	USD 259
Waco Avenue Methodist Church	Wichita Area SRS Office
Wichita Area Sexual Assault Center	WSU Dept of Minority Studies
WSU Dept Of Psychology	WSU Dept of Public Health
Wichita Indochinese Center	Wichita Indian Mission
Wichita Sedgwick County Health Dept.	Wilson Building Maintenance Inc.
Word Today	

2000 Coalition Officers:

Chair	Randy Class, Family Consultation Service
Vice Chair	Margaretta LaFarelle Hunt
Secretary/Treasurer	Mary Fusco, United Way of the Plains

Contact Information:

Randy Class (264-8317)
Mary Fusco (267-0937)



841 West 21st. North
Wichita, Kansas 67203-2464

Phone: 267-1700
Fax: 267-7112

Testimony for
Kansas Futures: A Strategy for Demographic Change Committee

La Familia Senior/Community Center

Good afternoon. My name is Carolyn Benitez, Executive Director of La Familia Senior/Community Center located in Wichita's Spanish Speaking community. I am also here as a member of the Multicultural Mobilization Coalition of Wichita.

In my remarks today, I want to focus on the importance of services for this States' Latino elderly.

When we talk about Hispanics we are speaking about individuals from more than 20 different nations, with countless dialects, different skin colors, and varying tastes in food and music. Some are descended from immigrants who have been in this nation hundreds of years, others are new arrivals, having been here only a week or a year, seeking a better life in America.

As throughout the rest of the nation, Kansas has experienced a dramatic growth in it's Hispanic population...and it has been rapid. Within this group is a increasing number of elderly Hispanics.

We know that about 23.8 % of elderly Hispanics in the United States live in poverty and consistently under use social services. Older Hispanics as a minority group are subject to the disadvantaged status ascribed to all minorities. They must confront, as well, the discrimination experienced by the aged. Added to these the disadvantage of frequent inability to communicate and comprehend effectively and fluently in English. Access to social services is even more impeded to the degree that cultural differences including language, inhibit their full use of Anglo provided services.

Statistics show that between 1997 and 2030, the elderly Hispanic population in this country will grow by 368%, meaning there will be a greater demand of services among elderly Hispanics who are not fluent in English. Home meal delivery and care services, nursing services, physical and mental health programs, especially for Alzheimer's patients, are examples of services who will see an increased demand to assist this group.

La Familia Senior/Community Center attempts to assist this population. Our organization has been serving the Latino elderly since 1989. We offer bilingual/bicultural services to the community living in census tracts 1,2,3,4, and 82. This area includes North Broadway to Amidon (east/west) and 13th Street to 29th Street North (south/north). Census Bureau statistics indicate that 75% of all households in these tracts have incomes at or below \$34,000., thereby defining the

neighborhood as predominantly low to moderate income. Statistics also show that 21% of the population lives below poverty levels. The average income of households in these areas is \$25,430.

La Familia serves as a central point of entry for many Spanish Speaking persons in Wichita. Our mission is to assist an undeserved Hispanic elderly community and help them with utilizing services they historically have underutilized. Last year approximately 2,300 individuals entered our doors. Many are seeking assistance and information. On a monthly basis we serve hot lunches to nearly 650 seniors. These meals are provided to us through the Good Neighbor Nutrition Program. We receive funds from Sedgwick County Department on Aging and the National Hispanic Council on Aging to provide daily programs which include, assistance with obtaining benefits and social services, transportation, translations, health clinic, support group, advocacy, completing applications, nutrition, educational programming, computer classes, information & referral, and recreational/cultural activities.

Although the majority of members are of Mexican decent our Center is very multicultural in that several cultures from Latin America and the Caribbean are represented. We have members who originate from Puerto Rican , Cuba, Costa Rica, El Salvador, Honduras, Colombia, Peru, Bolivia, and Chile. We share a common language and similar cultures but vary among ourselves. This is especially true when it comes to interpreting in Spanish. Because Wichita has such a diverse Spanish Speaking population finding trained certified translators who can accurately translate continues to be problem for many agencies serving Spanish speakers. La Familia is often first to be called as we have noncertified volunteers who when available will assist. There is a great need in Wichita to provide funding to agencies specifically to train and certify translators

According to a survey from the National Association for Hispanic Elderly 40% of older Latinos use no social services: 76 % report unmet needs for social services. It was also found that only 55% of elderly Latinos aged 65 years and older receive Social Security. This compares to 75% of non-Spanish whites who receive social security benefits. Many Hispanics who migrated to the United States worked in factories with very low wages and consequently receive low Social Security assistance to pay for rent, medicines, food and other personal needs. Generally speaking Hispanic elderly will not utilize services simply due to lack of knowledge, lack of access, fear of deportation, pride, poor communication skills, and fear of going alone.

I am encouraged you are rethinking Kansas' Future. Today I ask you to make and implement plans which are more culturally competent. Programs need to understand the African-Americans in Northeast Wichita, the Vietnamese in Planeview, and the Hispanics in North Wichita. These cultures, deal differently with a frail parent. If we acknowledge those families, those beliefs, those family styles...we will be able to deal with that flexibility. The state must hire more professionals who are bilingual, compensate them for their skill, and provide funding for programs which will benefit these populations. Thank you.