



**Ensuring Equity in Aging Webinar
Alzheimer's Disease & Other Dementias Culturally Responsive
Services, Support, and Care
May 5, 2021 | 10:00am - 11:00am
Captioners Transcript**

10:00:38 >> GOOD MORNING EVERYONE, AND WELCOME TO THE CALIFORNIA DEPARTMENT OF AGING'S 7TH INSTALLMENT OF THE ENSURING EQUITY AND AGING WEBINAR SERIES.

10:00:49 PLEASE TO BE JOINED BY THREE SPEAKERS AND FIVE REPRESENTATIVES FROM THE COMMUNITY. TODAY WE WILL DO INTRODUCTIONS IN A FEW MOMENTS BUT FIRST I WILL GO OVER THE LOGISTICS.

10:00:59 YOU MAY JOIN BY PHONE OR WEBINAR AS YOU ALREADY HAVE. AMERICAN SIGN LANGUAGE INTERPRETATION IS AVAILABLE, AS WELL AS CLOSED CAPTIONING.

10:01:10 THE RECORDING SLIDES AND TRANSCRIPTS OF ALL OF CDA'S EQUITY AND AGING WEBINARS CAN BE FOUND ON THE EQUITY AND AGING RESOURCE CENTER.

10:01:15 RECORDING ALSO ON THE YOU TUBE CHANNEL, WE WILL POST THIS TODAY OR TOMORROW.

10:01:27 QUESTIONS AND COMMENTS ARE ABSOLUTELY WELCOME THROUGH OUT THE PRESENTATION, WE ARE THE FINAL TEN MINUTES RESERVED FOR QUESTIONS AND COMMENTS.

10:01:56 BUT YOU CAN ALSO USE THE QUESTION FEATURE ON THE BOTTOM OF YOUR SCREEN TO ASK QUESTIONS USING YOUR TOUCH PAD OR KEYBOARD DURING THE PRESENTATION AND SPEAKERS MAY BE ABLE TO ENGAGE AS THE PRESENTATION GOES ON. NEXT SLIDE. SO, THIS AS I SAID IS THE 7TH EQUITY AND AGING WEBINAR, WE HAVE THEM THE FIRST OF EVERY MONTH, HOSTING THROUGH AT LEAST THROUGH NEXT MONTH.

10:02:07 STATE AND LOCAL SPEAKERS, WITH EXPERTISE. EXCITED ABOUT THIS SERIES, PART OF THE CALIFORNIA FOR ALL AGES CAMPAIGN.

10:02:24 NEXT SLIDE, HOPE YOU CAN JOIN US NEXT MONTH, FOCUSING ON CULTURALLY INFORMED POLICY AND PROGRAMS WITH AND FOR OLDER IMMIGRANTS AND REFUGEES, MORE DETAILS ON THAT. AGAIN REGISTER ON THE RESOURCE CENTER ON THE CALIFORNIA DEPARTMENT OF AGING WEBSITE.

10:02:30 NOW I AM GOING TO PASS IT OVER TO THE DIRECTOR KIM MCCOY WADE FOR INTRODUCTIONS.

10:02:46 >> THANK YOU, AND THANK YOU TO THE 137 OF YOU JOINING US THIS MORNING TO TALK ABOUT THIS INCREDIBLY IMPORTANT TOPIC FOR AGING, WHICH OF COURSE IS DEMENTIA ALZHEIMER'S AND ALL DEMENTIAS. .

10:03:07 I AM REALLY EXCITED FOR TODAY'S PROGRAM, WE ARE FOCUSING ON DEMENTIA, WHICH IS MORE COMMON IN OLDER ADULTS, WITH THE EQUITY LENS BAKED IN. RECOGNIZING THE IMPACT OF THE DISEASE, ON PEOPLE WHO ARE DIAGNOSED WITH DEMENTIA AND FAMILY CAREGIVERS WHO THEY ARE BOTH JOYS AND RESPONSIBILITIES OF PROVIDING SO MUCH CARE.

10:03:32 AND OF COURSE WHAT WE LEARNED IN COVID, EVEN MORE THAN WE ALREADY KNEW, WAS THE INTENSE RISKS TO HEALTH WELL BEING, ISOLATION, SO MUCH MORE, BOTH AT HOME AND IN NURSING HOMES. THE CHALLENGES FACING PEOPLE WITH DEMENTIA, CAREGIVERS, LOVED ONE, ARE BIG AND URGENT.

10:03:42 WITH THAT WE ARE THRILLED THAT THE FORMER FIRST LADY LED THE BOLD ALZHEIMER'S TASK FORCE, AND ALIGNED THAT WITH THE MASTER PLAN FOR AGING.

10:03:55 SO THAT ALL OF THE GOALS FOR AGE FRIENDLY ARE ALSO DEMENTIA FRIENDLY. WHETHER IT'S HOUSING, HEALTH, INCLUSION, CARE GIVING OR AFFORDABILITY, DEMENTIA AND EQUITY ARE WOVEN THROUGH OUT.

10:04:08 SO, THAT GIVES ME HOPE THAT WE HAVE BOLD LEADERSHIP FROM THE GOVERNOR. I HAVE TO SAY THE

PRESIDENT'S NEW CALL FOR A CURE TO ALZHEIMER'S, DIABETES AND CANCER, GIVES ME GREAT HOPE.

10:04:21 PERHAPS MOST OF ALL WHAT GIVES ME HOPE IS WORK BEING DONE BY LEADERS WE HAVE HERE TODAY. I WILL BREVELY INTRODUCE EACH OF THEM AND TURN IT OVER FOR THE CONVERSATION WE ARE GOING TO HAVE.

10:04:40 WE HAVE THE FIRST SPEAKER, PUBLIC POLICY MANAGER FOR THE ALZHEIMER'S ASSOCIATION ORANGE COUNTY CHAPTER, OVER SEES GRASSROOTS IN ORANGE COUNTY AND INLAND EMPIRE, BEEN WITH THE ASSOCIATION, AND I CAME FROM THERE, TOO.

10:04:44 FROM OBAMA ADMINISTRATION, AND CONGRESSIONAL STAFFER.

10:05:05 VICTORIA I WORK CLOSELY WITH, DIRECTOR OF HER AREA AGENCY ON AGING AND WITH THE COUNTY FOR 18 YEARS, WE ARE GRATEFUL FOR HER AND COMMITMENT TO CONNECTING OLDER ADULTS AND CAREGIVERS TO RESOURCES THAT MAKE A MEANINGFUL DIFFERENCE IN QUALITY OF LIFE AND INDEPENDENCE.

10:05:27 AND, VALERIA, A COMMUNITY CAREGIVER. SHE CONDUCTS FREE WORKSHOPS AND TRAINING AND CLASSES ON CARE GIING AND ENGLISH AND SPANISH, BACKGROUND WITH PUBLIC HEALTH, AND WORKING WITH DIVERSE COMMUNITIES AND ADDRESSING DISPARITIES, USING STRENGTH TO EMPOWER COMMUNITIES.

10:05:49 THANK YOU FOR THAT WORD, WITH KNOWLEDGE AND AWARENESS WITH CONNECTIONS TO SERVICES. LAST BUT NOT LEAST, WE WILL BE JOINED BY CALIFORNIANS WITH FIRSTHAND EXPERIENCE WITH THE DISEASE AND CARE GIVING, SO GRATEFUL TO FLORENCE AND YOLAND A IN SHARING EXPERIENCES WITH LOVED ONES.

10:05:53 WITH THAT I WILL HAND THE MIC OFF AND READY TO LISTEN, THANK YOU SO MUCH.

10:06:05 >> THANK YOU KIM APPRECIATE THE OPPORTUNITY TO BE HERE THIS MORNING WITH YOU. I AM GOING TO DIVE INTO OUR FACTS AND FIGURES SPECIAL REPORT FOR 2021.

10:06:30 TO GIVE YOU ALL A LITTLE BIT OF BACKGROUND, EVERY YEAR THE ALZHEIMER'S ASSOCIATION CONDUCTS A FACTS AND FIGURES REPORT THAT PROVIDES AN INSIGHT INTO THE LATEST STATISTICAL DATA ABOUT THIS DISEASE. ON A NATIONWIDE LEVEL. IN ADDITION TO THAT PROVIDES A SPECIAL REPORT, WHICH LOOKS INTO A VERY SPECIFIC FACET INTO THE DISEASE.

10:06:45 THIS YEAR IS ON RACE AND ALZHEIMER'S IN AMERICA. AS YOU SEE ONE OF THE QUOTES WE OPENED UP WITH, FOR YEARS WE HAVE TALKED ABOUT EQUITABLE ACCESS TO HEALTH AND HEALTH CARE, FOR ALL COMMUNITIES.

10:07:03 HOWEVER WE ALL KNOW WE ARE FAR FROM ACHIEVING THAT. BUT ALL HERE WORKING TO GETTER TO GET THERE AS SOON AS POSSIBLE. GO TO THE NEXT SLIDE. SO A LITTLE BIT OF BACKGROUND ON THE SPECIAL REPORT. WHAT WE DID THIS YEAR, LAST YEAR ACTUALLY. RELEASED IT THIS YEAR. .

10:07:09 WE CONDUCTED TWO NATIONWIDE SURVEYS WITH U.S. ADULTS AND ALZHEIMER'S CAREGIVERS.

10:07:35 2500 U.S. ADULTS AND 1400 ALZHEIMER'S CAREGIVERS. AND THE RESPONSE INCLUDED FOLKS FROM ASIAN BLACK HISPANIC NATIVE, AND WHITE COMMUNITY. SIGNIFICANT IS THAT FOR THE FIRST TIME, WE WERE ABLE TO GET A LARGE ENOUGH SAMPLE FROM ASIAN AND NATIVE AMERICANS TO INCLUDE DATA ON THEM.

10:08:08 WE ARE EXCITED ABOUT THAT. WE TOUCHED ON WHAT YOU SEE THERE. ONE OF THE THINGS WE LEARNED BEFORE I JUMP INTO IT IS I THINK WE UNDERSTAND THERE IS HEALTH DISPARITIES, SOME COMMUNITIES UNFORTUNATELY ARE MORE SUSCEPTIBLE TO CERTAIN DISEASE THAN OTHERS. INCLUDING ALZ. BUT THE HEALTH CARE DISPARITIES ARE SOMETHING I THINK HAVE NOT BEEN FOCUSED ON ENOUGH. WE ARE REALLY JUMPING INTO THAT WITH THIS REPORT. TO SEE THE BARRIERS THAT PEOPLE ARE EXPERIENCES.

10:08:32 IN GETTING THE CARE FOR THEMSELVES OR FOR THE LOVED ONES. WE CAN GO TO THE NEXT SLIDE. SO, ONE OF THE TOP LINE ISSUES WE SAW HERE IS THAT PRETTY MUCH EVERY COMMUNITY OF COLOR EXPERIENCED DISCRIMINATION WHEN SEEKING HEALTH CARE. SOME MORE THAN OTHERS, BUT THAT SEEMED TO BE THE COMMON TREND AMONGST ALL OF THESE COMMUNITIES.

10:08:51 YOU KNOW NONWHITE POPULATIONS EXPECT AND EXPERIENCE BARRIERS WHEN NAVIGATING THIS CARE. AND, WE DID WITH THE RESPONDENTS FROM CAREGIVERS THESE NUMBERS WERE HIGHER.

10:09:01 AS CAREGIVERS NAVIGATED TO SEEK CARE, THEY EXPERIENCED HIGHER TRENDS OF DISCRIMINATION.

10:09:15 THAT IS SAD BECAUSE THEY ARE EXPERIENCING DISCRIMINATION MEANS THEY ARE NOT GETTING CARE THEY NEED AND DESERVE, WITH THIS DISEASE THAT IS TRANSLATED INTO THE LATER DIAGNOSIS.

10:09:22 THE LATER YOU GET DIAGNOSED THE MORE EXPENSIVE IT IS FOR GETTING CARE YOU NEED WHEN YOU NEED.

10:09:39 IF YOU HAVE A DIAGNOSIS OF SOME KIND OF DEMENTIA OR ALZHEIMER'S, IN A TIMELY MANNER, YOU MAY HAVE FOUR YEARS BEFORE THE DISEASE PROGRESSES TO MAKE ARRANGEMENTS SO YOU ARE IN A GOOD PLACE WHEN THE DISEASE GETS WORSE.

10:09:47 WELL, IF YOU GET THAT DIAGNOSIS LATER. YOU ARE AT A POINT, TOMORROW YOU HAVE TO MAKE A DECISION, YOUR OPTIONS ALL OF THE

10:09:51 SUDDEN BECOME MORE LIMITED AND EXPENSIVE.

10:10:05 THAT IS UNFORTUNATE THAT COMMUNITIES OF COLOR HAVE TO BEAR THAT BURDEN MORE THAN OTHERS. ONE OF THE TYPES OF DISCRIMINATION WE SEE, THEY ARE FEELING THEY ARE NOT LISTENED TO BY HEALTH CARE PROVIDERS.

10:10:27 OR MADE TO FEEL THEY ARE NOT SMART, THEY AND FAMILY MEMBERS KNOW WHAT IS HAPPENING AND KNOW

SOMETHING IS WRONG WITH THEMSELVES OR LOVED ONES OF THEY ARE NOT BEING PAID ATTENTION TO AS THEY WOULD LIKE, LEADING TO DELAY IN DIAGNOSIS. GO AHEAD TO THE NEXT SLIDE. AS I MENTIONED, DISCRIMINATION IS A BARRIER OF CARE.

10:10:49 FOR A SIGNIFICANT NUMBER OF PEOPLE OF COLOR. WHILE THERE IS DESIRE FOR CULTURALLY COMPETENT PROVIDERS, THERE IS LOW CONFIDENCE THAT ACCESS IS BEING PROVIDED. WE ALL KNOW THE IMPORTANCE OF HAVING THAT CULTURALLY COMPETENT PHYSICIAN OR NURSE ATTEND TO OUR FAMILY MEMBERS.

10:11:05 BUT IT IS NOT PROVIDED ENOUGH. THAT IS UNFORTUNATE, AND PARTICULARLY WITH BLACK AMERICANS WE SAW A HIGHER LEVEL OF DISTRUST IN CLINICAL TRIALS AND HALF OF THEM DOUBT THAT THE ADVANCES IN ALZHEIMER'S WILL BE SHARED OR ACCESSIBLE TO THEM.

10:11:14 SO WE NEED TO MAKE SURE THAT WHEN WE FIND A CURE OR WHEN WE FIND A DISEASE ALTERING TREATMENT FOR ALZHEIMER'S.

10:11:37 IT IS BOTH AVAILABLE AND ACCESSIBLE TO EVERY COMMUNITY. AND JUST IN WHEN KNOWLEDGE AWARENESS AND CONCERN AND SIGMA ABOUT ALZHEIMER'S VARIES ACROSS RACIAL GROUPS. BUT, WE HAVE NOT DONE A GOOD JOB OF LETTING THESE COMMUNITIES UNDERSTAND THE KEY, THE KEY WHEN IT COMES TO ALZHEIMER'S.

10:11:52 THE RED FLAGS AND WHAT THEY SHOULD KNOW ABOUT THE DISEASE AS OTHER COMMUNITIES HAVE. SO, I AM GOING TO LEAVE YOU WITH THIS LAST SLIDE, WHICH IS OUR WEBSITE AND 800-PHONE NUMBER.

10:12:07 IF YOU CAN GO TO THE NEXT SLIDE, FOR ANY OF YOU WHO MAY NOT INDIVIDUALS WHO HAVE THIS DISEASE WHO ARE A CAREGIVER, PLEASE, REFER THEM TO OUR 800-LINE. WHICH IS A GREAT RESOURCE, ONCE WE GET TO THE NEXT SLIDE YOU WILL SEE THAT NUMBER.

10:12:22 IT IS AVAILABLE IN OVER 200 LANGUAGES AND IT IS REALLY A LIFELINE FOR MANY OF OUR CAREGIVERS, MAYBE ARE CARING FOR THEIR LOVED ONE. THEY HAVE A SITUATION THAT IS NOT QUITE EMERGENCY BUT NEED SOMEBODY TO WALK THEM THROUGH IT.

10:12:48 THAT IS A GREAT RESOURCE, AND IF THEY HAVE ANY QUESTIONS IN GENERAL ABOUT THE DISEASE, IT IS A PLACE TO GO AND CALL ABOUT AND GET QUESTIONS ANSWERED. WITHOUT FURTHER ADIEU I AM GOING TO PASS IT OVER TO TWO OF OUR OUTSTANDING VOLUNTEERS. AND TALK TO YOU MORE ABOUT WHAT THE EXPERIENCE HAS BEEN LIKE IN NAVIGATING THE CARE FOR LOVED ONES.

10:12:50 I AM GOING TO HAND IT OVER.

10:13:12 >> THANK YOU SO MUCH DANIEL. SO YEA I WANT TO TALK ABOUT MY OWN PERSONAL EXPERIENCE WITH THE DISEASE. AND JUST AS A LITTLE INTRODUCTION, I AM A RECENT ADVOCATE FOR THE ALZHEIMER'S ASSOCIATION IN NORTHERN CALIFORNIA AND CURRENT COLLEGE STUDENT AT THE UNIVERSITY OF CALIFORNIA IRVINE.

10:13:29 REGARDING MY PERSONAL EXPERIENCE, MY CONNECTION IS THROUGH MY LATE GRANDMOTHER. GROWING UP I REMEMBER SHE WAS ALWAYS A PERSON WHO TOOK CARE OF ME AND SELFLESS WITH HER TIME. AND SOMETHING THAT I REMEMBER MY PARENTS TELLING ME WAS THAT WHEN I WAS REALLY YOUNG.

10:13:43 MY PARENTS WERE WORKING, SORRY, DURING THE DAY, AND ALSO TAKING CLASSES AT NIGHT. SO, SHE WAS THE ONE WHO WAS KIND OF CARING FOR ME FOR THE WHOLE DAY AND LIVING IN SAN FRANCISCO AT THE TIME.

10:13:59 SHE WOULD ALWAYS TAKE ME AROUND TO GROCERY SHOP AND VISIT MY FAVORITE CHINESE BAKERIES, WHICH WAS A FOND MEMORY FOR ME. WHEN WE LATER MOVED, SHE LIVED WITH US FOR A FEW YEARS AND ALWAYS WALKED ME TO SCHOOL.

10:14:17 AFTER WE WOULD DRINK TEA AND HELP HER COOK AND GARDEN, I GOT REALLY CLOSE WITH HER. IF YOU GO TO THE NEXT SLIDE I THINK THE NEXT ONE AFTER THIS, THANK YOU. YES. SO, YOU CAN SEE IN THIS SMALLER PICTURE I HAVE HERE ON THE SLIDE.

10:14:44 YOU SEE THAT THIS IS KIND OF ONE OF MY FAVORITE ACTIVITIES TO DO, COOKING, AND THIS WAS ONE OF MY FAVORITE RECIPES, CALLED [FOREIGN LANGUAGE] SHE WOULD MAKE A BUFRMG AND SHARE IT WITH THE FAMILY AND COMMUNITY. SO, THEN SOMETHING I REMEMBERED. .]

10:14:58 SHE WOULD GO AROUND THE CITY AND LOOKING FOR INGREDIENTS TO MAKE THIS RECIPE AND SPEND ALMOST THE WHOLE WEEKEND, WRAPPING AND PREPARING AND COOKING THESE RICE DUMPLINGS TO PREPARE.

10:15:13 I REMEMBER THAT MEMORY TEACHING ME HOW TO WRAP AND FILL THEM. MINE NEVER TURNED OUT AS GOOD. UNFORTUNATELY, IN 2014 AND 2015, WE STARTED NOTICING THINGS THAT WERE REALLY CONCERNING TO MY FAMILY.

10:15:28 BEGINNING TO FORGET THINGS ABOUT US, AND I THINK THE TIPPING POINT, WE DECIDED TO LOOK FOR CARE, AND LOOK FOR DIAGNOSIS OR SOMETHING FROM A DOCTOR, WAS WHEN SHE WAS KIND OF WANDERING AROUND AND WOULD BE TAKING BUS ROUTES.

10:15:46 SHE WAS SELF-SUFFICIENT, AND WOULD BE TAKING BUS ROUTES THINKING SHE WAS LIVING IN SAN FRANCISCO, WHEN SHE WAS LIVING WITH US IN EAST BAY. WE WERE WORRIED SHE WAS GOING TO HURT HERSELF OR BE LOST AND THEN WE WOULD NOT BE ABLE TO HELP HER IN THAT SITUATION.

10:16:00 SO, THEN AROUND THE SAME TIME WE STARTED LOOKING FOR DOCTORS TO START GIVING US CLEAR ANSWERS AND A DIAGNOSIS FOR WHAT SHE WAS GOING THROUGH. HER FIRST DOCTOR UNFORTUNATELY WAS QUITE DISMISSIVE OF HER SYMPTOMS.

10:16:29 AND THEN THERE WAS A LANGUAGE BARRIER, BECAUSE SHE WAS NOT EXACTLY FLUENT IN ENGLISH AND THE DOCTOR KIND OF DISMISSED HER SYMPTOMS AND TOLD US THESE THINGS WERE NORMAL FOR HER AGE, WE KNEW THEY WERE NOT, AND LOOKING FOR SOMEONE WHO WOULD UNDERSTAND THE CULTURAL BACKGROUND AND ALSO KIND OF WHO WOULD ACTUALLY UNDERSTAND WHAT SHE WAS GOING THROUGH AS AN AGING ELDERLY PERSON OF CHINESE BACKGROUND.

10:16:51 WITH THE DOCTORS NOT REALLY LISTENING AND THE LANGUAGE BARRIER MAKING IT DIFFICULT, HARD FOR HER TO COMMUNICATE WITH HER PHYSICIAN BECAUSE A LOT OF THINGS WERE LOST IN TRANSLATION. I THINK THE ONLY THING THAT HELPED WAS WHEN MY FATHER AND UNCLE HAD TO REACH OUT AND FIND DOCTORS WHO WERE FLUENT IN THE LANGUAGE.

10:17:04 AND THEY WERE ALSO THERE, AND HAD TO ATTEND EACH APPOINTMENT WITH HER TO MAKE SURE EVERYONE WAS ON THE SAME PAGE AND SHE WAS BEING UNDERSTOOD AND THEN SHE ALSO UNDERSTOOD WHAT WAS HAPPENING TO HER.

10:17:22 I THINK THAT IS ALSO A PROBLEM WHERE DOCTORS KIND OF SPEAK TO US AND THEN WE KIND OF SAY WE AGREE WITH WHATEVER THEY ARE SAYING BUT DON'T REALLY UNDERSTAND WHAT IS HAPPENING TO US. SO, WE TRY HARD TO MAKE SURE SHE WAS UNDERSTANDING AND STILL AROUND THE TIME WHEN HER SYMPTOMS WERE NOT TOO BAD.

10:17:43 SHE WAS STILL PRETTY INDEPENDENT AND USE TRANSITION INTO GETTING CARE FOR HER. AFTER A FEW MONTHS, WE SAW SYMPTOMS WORSENING, WE DECIDED TO SEEK CARE, AS DANIEL SAID YOU GET THAT DIAGNOSIS LATER THAN YOU SHOULD IT'S HARDER AND YOU HAVE LIMITED OPTIONS IN SEEKING CARE.

10:17:53 BY THE POINT HER CONDITION WAS DETERIORATING IN 2015 AND 2016, WE HAD TO LONG FOR LONG TERM CARE OPTIONS.

10:18:12 WE CONSIDERED NURSING HOMES, OF THE ONES NEAR BY WE COULD VISIT FREQUENTLY, ALACK OF CULTURAL COMPETENCE AND A LOT OF THE STAFF DID NOT SPEAK CHINESE,

AND WERE AFRAID SHE WOULD NOT BE ABLE TO COMMUNICATE AND WOULD FEEL ISOLATED IN THAT SPACE.

10:18:36 SO, THEN, KIND OF MY UNCLE MADE A SACRIFICE OF QUITTING HIS JOB TO BE A CAREGIVER FULL-TIME, AND HUGE SACRIFICE FOR HIM. ALLOWED US TO VISIT AND TAKE CARE OF HER, AND WE SIT FREQUENTLY AND MADE SURE SHE WAS GETTING RESOURCES SHE NEEDED.

10:19:00 I AM GRATEFUL FOR THAT SACRIFICE BY MY UNCLE BECAUSE WE WERE ABLE TO SPEND TIME WITH HER BEFORE SHE PASSED IN EARLY 2020. I KNOW SHE HAD A GREAT LIFE AND I HAD SO MANY GREAT MEMORIES WITH HER, I REALLY THINK THAT MAYBE GETTING MORE RESOURCES AND HAVING DOCTORS WHO HAD BETTER TRAINING AND EDUCATION ABOUT THIS DISEASE.

10:19:13 ABOUT DEMENTIA AND ALZHEIMER'S, I THINK WE REALLY COULD HAVE DIAGNOSED HER CONDITION EARLIER. AND ALSO SPEND MORE TIME WITH HER BEFORE, EASING THAT TRANSITION INTO CARE FOR HER IN THE LAST YEARS OF HER LIFE.

10:19:18 AND THAT'S KIND OF ALL I WANTED TO SAY, THANK YOU SO MUCH. AND I WILL PASS IT ON.

10:19:41 >> GOOD MORNING, THANK YOU FOR INVITING ME TO BE HERE THIS MORNING TO SHARE MY STORY. I AM AN ADVOCATE, STATE CHAMPION AND HERE AT THE ALZHEIMER'S CHAPTER.

10:19:55 I LOOK FORWARD TO SHARING MY STORY AND INFORM THE WORK MOVING FORWARD. NEXT SLIDE, PLEASE. THESE PICTURES ARE MY MOTHER, UNCLE, AND MY BROTHER AND I.

10:20:19 MY MOTHER AND UNCLE WERE BOTH INSPIRATION TO OUR FAMILY. AS SIBLINGS THEY WERE SO VERY CLOSE. UNFORTUNATELY THEY LOST THEIR BATTLE TO THIS DREADFUL DISEASE IN SEPTEMBER OF 2018, LESS THAN 24 HOURS APART. MY UNCLE'S WIFE AND MY MOM AND THEIR SIBLINGS ASKED HOW DID THIS HAPPEN TO A FAMILY WITHIN 24 HOURS YOU LOSE TWO LOVED ONE.

10:20:31 WE REST WITH THE STORY MY UNCLE CANNOT BEAR KNOWING THAT MY MOTHER WENT AND HE IS STILL HERE. WE

REST ON THAT STORY THEY WANTED TO JOIN EACH OTHER TOGETHER.

10:20:44 WE NEVER RECEIVED A TIMELY DIAGNOSIS OR PROPER DIAGNOSIS FOR MY MOTHER. I WILL SPEAK ABOUT HER SPECIFICALLY. MY BROTHER AND I WERE TOLD THE BEHAVIORS WERE RESULT OF A GRIEVING SPOUSE.

10:21:09 WE LOST MY FATHER IN 2010, THEN TOLD SHE WAS GETTING OLD. AND AT SOME POINT ALONG THE JOURNEY, HER PRIMARY CARE. GOT A NEW PRIMARY CARE, WHO STILL DID NOT QUITE UNDERSTAND THE CONCERNS WE HAD. PRESCRIBED HER A DRUG TO SLOW DOWN MEMORY LOSS, NO ADDITIONAL TESTS OR SCREENINGS CONDUCTED.

10:21:26 ALL OF THE SUDDEN YEARS LATER HER MEDICAL SUMMARIES IN THE MAIL, I LIVED THREE HOURS AWAY. SUMMARIES CAME, AND BEGAN TO REFLECT THAT MY MOTHER WAS ELDERLY AND DEMENTED. .

10:21:45 AROUND THAT TIME REFERRED TO A NEUROLOGIST, AGAIN, NO ASSESSMENTS TO TELL US WHAT WAS HAPPENING. HER JOURNEY LASTED 8 YEARS, WE WERE ABLE TO KEEP HER AT HOME. MY BROTHER WAS WITH HER FULL-TIME.

10:21:54 GOT TO A POINT, HE COULD NOT DO THE THINGS SHE NEEDED FOR FULL-TIME CARE, BEING A MALE AND HER NOT COMFORTABLE. .

10:22:10 WE WERE ABLE TO HIRE SUPPORT THAT CAME IN SEVERAL TIMES AND A COUSIN THAT MOVED IN. KNOWING THE COSTS WAS A CONCERN, MAYBE A LACK OF RESOURCES.

10:22:17 GRATEFUL WE WERE ABLE TO TAKE CARE OF HER, BUT, WHAT WE NEEDED NOT JUST FINANCES, WE NEEDED SUPPORT.

10:22:40 WE NEEDED A CULTURALLY RESPONSIVE PRIMARY CARE PHYSICIAN, YOU SEE MY MOTHER, THAT GENERATION, MIND SET IS THAT THE DOCTORS KNOW BEST. MY MOTHER HAD MINIMAL EDUCATION, NEITHER OF MY PARENTS ASKED QUESTIONS ABOUT WHY THEY WERE TAKING CERTAIN PRESCRIPTIONS.

10:22:56 WHEN MEDS ARE PRESCRIBED THE DOCTOR KNOWS AND TRUST THE DOCTOR. AND ADDITIONALLY IN THE AFRICAN AMERICAN COMMUNITY, ALL HAD HIGH BLOOD PRESSURE, AND MANY HAD DIABETES.

10:23:16 AT SOME POINT I BEGAN TO LOOK AT THE SIDE EFFECTS, I AM GETTING IRRITATED AND ASKED QUESTIONS ABOUT WHY IS MY MOTHER ON THREE BLOOD PRESSURE MEDICATIONS? AND I ASKED THOSE QUESTIONS AFTER REALIZING THE SIDE EFFECTS FOR ALL OF THE MEDICATIONS FOR MEMORY LOSS.

10:23:23 THE RATIONAL WAS NOT GIVEN, THE RESPONSE SIMPLY WAS WE CAN TAKE HER OFF.

10:23:40 I SAID I NEED YOU TO TELL ME WHY SHE IS ON THEM IN THE FIRST PLACE. AND DOCTOR BECAME IRRITATED AND ADMONISHED ME, SAID IN THE FUTURE IF I SHOW UP, I NEED TO GIVE A HEADS UP TO SCHEDULE ENOUGH TIME TO DEAL WITH MY QUESTIONS.

10:23:58 DEAL WITH MY QUESTIONS IS A BIG PART OF IT, FRUSTRATING AND DISMISSIVE, AND WE NEEDED SOMEONE THAT WOULD LISTEN AND TRULY HAD INTEREST THAT WOULD TAKE THE EXTRA TIME TO GUIDE US, ONE WHO IS KNOWLEDGEABLE ABOUT THE DISEASE.

10:24:05 KNOWING WHERE TO GUIDE US FOR SUPPORT, AND ASSISTANCE, AND MOST IMPORTANTLY A TIMELY DIAGNOSIS.

10:24:26 WE DO HAVE AND MY MOTHER'S FATHER HAD ALZHEIMER'S. SO, BASICALLY WE JUST NEED ACCESS. CARING PHYSICIAN, WHO IS NOT DISMISSIVE, REMEMBER WE HAD TWO, AND WE NEEDED SOMEONE WITH EXTRA.

10:24:51 KNOWING THAT AFRICAN AMERICANS SUFFER WITH THIS DISEASE GREATER RISK AS POPULATIONS AS WELL AS HIGH BLOOD PRESSURE. YOU DON'T WANT TO GO TO RACE INITIALLY, BUT HER LIFE IS EXPECTED SHE IS GOING TO HAVE HIGH BLOOD PRESSURE AND GET DEMENTIA OR ALZHEIMER'S OR FORM OF IT.

10:25:19 MY HOPE IS THAT DOCTORS CONTINUE TO BE EDUCATED AND KNOW HOW TO RESPOND AND RECOGNIZE THE QUESTIONS

TO ASK. AND RECOGNIZE THAT ALL LIVES ARE AS IMPORTANT. AND I DO KNOW OTHER FOLKS HAVE BEEN ABLE TO NAVIGATE THE SYSTEM MUCH EASIER. AND I SINCE LEARNED AWHOLE LOT MORE AS A RESULT, I HAVE BEEN ABLE TO EDUCATE AND SUPPORT MY CHURCH FAMILY.

10:25:33 MAKING SURE THAT FOLKS ARE NOT SHY TO ASK THE QUESTIONS TO ADVOCATE FOR THEMSELVES. WHEN WE DON'T HAVE PROFESSIONALS THAT WE FEEL THEY ARE ADVOCATING FOR US OR HAVE OUR INTERESTS IT'S IMPORTANT WE KNOW WHICH QUESTIONS TO ASK.

10:25:44 SOMETIMES, AFRICAN AMERICANS ARE NOT LIKELY AS WE ALREADY HEARD IN RESEARCH TO PARTICIPATE IN CLINICAL TRIALS BUT ALSO NOT FEELING LIKE WE HAVE RIGHT ANSWERS.

10:26:05 OR HAVE A KNOWLEDGE TO BE ABLE TO ASK THE QUESTIONS, PARTICULARLY THE OLDER GENERATIONS, SO I AM APPRECIATIVE TO BE HERE, AND HOPEFUL WHAT I SHARED WILL BE INFORMATION THAT IS HELPFUL, AS WE MOVE FORWARD AS A SYSTEM TO SUPPORT ALL LIVES THAT ARE AFFECTED AND IMPACTED BY THIS DISEASE, THANK YOU VERY MUCH.

10:26:28 >> THANK YOU FOR YOUR POWERFUL TESTIMONIES. IT JUST YOU KNOW, THESE KINDS OF STORIES THAT MAKE IT THAT MUCH MORE IMPORTANT THAT WE ARE PROVIDING CULTURALLY RESPONSIVE PROGRAMMING AT THE LOCAL LEVEL.

10:26:47 NEXT SLIDE, PLEASE. I WILL PROVIDE A BRIEF INTRODUCTION TO OUR PROGRAM, AND AT THE END, THIS SLIDE WITH HOW TO CONTACT ME AND THE AGENCIES AVAILABLE, SO PEOPLE HAVE ADDITIONAL QUESTIONS. .

10:27:14 I WOULD SAY THAT BUILT INTO OUR DNA AS A COUNTY AREA AGENCY ON AGING IS AN UNDERSTANDING OF WHO LIVES IN OUR COMMUNITY. WHAT THEIR NEEDS ARE AND HOW REALLY WE CAN SUPPORT THEM, WITH THE GOAL OF ALLOWING PEOPLE WITH ALZHEIMER'S OR RELATED DEMENTIA TO LIVE IN THE COMMUNITY AS LONG AS POSSIBLE.

10:27:28 JUST IN OUR COUNTY WE ARE DEALING WITH 44-55% OF OUR POPULATION RIGHT NOW IDENTIFIES AS LATINX, AND REMAINDER, MIX OF OTHER RACES. .

10:27:37 WE KNOW THE DEMOGRAPHICS THAT IS GOING TO OUR LATINX POPULATION IS GOING TO INCREASE OVER THE NEXT COUPLE OF YEARS.

10:28:01 NEXT SLIDE, PLEASE. SO, JUST BRIEFLY, WE HAVE DEVELOPED A FUNDED ALZHEIMER'S DISEASE AND RELATED DEMENTIA PROGRAM THAT PROVIDES SUPPORT FOR ALZHEIMER'S. PEOPLE WITH ALZHEIMER'S THAT LIVE ALONE, ONE OF OUR TARGETED POPULATION.

10:28:17 INDIVIDUALS WITH ALZHEIMER'S DISEASE OR RELATED DEMENTIA THAT LIVE WITH A CAREGIVER OR PARTNER. ALSO INDIVIDUALS WITH A INTELLECTUAL OR DEVELOPMENTAL DISABILITY THAT HAVE ALZHEIMER'S OR RELATED DEMENTIA OR ARE LIKELY TO DEVELOP IT.

10:28:34 WE KNOW FROM RESEARCH THAT IN PARTICULAR INDIVIDUALS WITH DOWN SYNDROME HAVE A STATISTICALLY HIGHER PROBABILITY OF MANIFESTING ALZHEIMER'S AND A LOT EARLIER IN 40'S AND 50'S.

10:28:54 WE HAVE A COMPREHENSIVE CASE MANAGEMENT PROGRAM THAT PROVIDES RESPITE, TRANSPORTATION, PERSONAL CARE, HOME MODIFICATIONS, A LOT OF CAREGIVER SUPPORT. INCLUDING CAREGIVER WITH CASE MANAGEMENT, CAN BE COUNSELING, A LOT OF TRAINING AND ALSO OTHER SERVICES.

10:29:26 NEXT SLIDE, PLEASE. SO, HOW DO WE DO THAT? I THINK OUR STORY STARTS WITH DEMENTIA FRIENDLY COUNTY. BACK IN ABOUT 2015, WE KNEW STORIES LIKE YOLANDA'S THAT WERE COMING TO US. THIS IS WHAT IT MEANS TO LIVE IN THE COMMUNITY WITH THE DISEASE AND THESE ARE THE HELPS WE ARE NOT RESOOEING. .

10:29:42 WE HEARD THAT OVER AND OVER AGAIN. SO, WE STARTED LOOKING AT WHAT CAN WE DO. SO, WE INVESTIGATED

BECOME DEMENTIA FRIENDLY COUNTY. AND BELIEVE WE ARE ONE OF THREE IN THE STATE. SO, WE DID OUR RESEARCH.

10:30:06 ONE OF THE MEMBERS OF THE BOARD OF SUPERVISORS AT THE TIME ASKED US TO SEEK DESIGNATION. AND THEY ACTUALLY IN THE ANNUAL AREA PLAN WE TAKE TO THE BOARD OF SUPERVISORS EVERY YEAR, THE SUPERVISOR ACTUALLY ASKED THAT LANGUAGE BE INCLUDED THAT WE SEEK THIS DESIGNATION, IT IS IMPORTANT TO HER BECAUSE SHE HAD FAMILY MEMBERS WITH ALZHEIMER'S.

10:30:20 SO, SHE WANTED US TO HAVE THAT DESIGNATION, WE SAID OKAY, WE FORMED A COMMUNITY BOARD THAT REPRESENTED ALL KINDS OF SECTORS OF THE COUNTY.

10:30:34 TO REALLY LOOK AT HOW CAN WE BECOME A DEMENTIA FRIENDLY COUNTY? WE HAVE REPRESENTATIVES FROM HEALTH CARE, MEDICAL, PRIVATE, YOU KNOW, HOME CARE AGENCIES.

10:30:58 WE HAVE PEOPLE WITH LIVES EXPERIENCE, INDIVIDUALS WHOSE FAMILY MEMBERS AND PARTNERS HAVE THE DISEASE. SO, WE HAVE DEVELOPED THIS REALLY ROBUST GROUP OF DEDICATED PEOPLE, THAT THE WHOLE GOAL WAS TO MAKE THE COUNTY DEMENTIA FRIENDLY.

10:31:17 WE DEVELOPED A REWARD PLAN TO WORK ON, EDUCATING, COMMUNITY, TRAINING BUSINESSES, LOOKING AT DIFFERENT SECTORS. LEGAL, BUSINESS, HOME CARE, FIRE, ALL OF THE DIFFERENT SECTORS. HOW WE CAN TRAIN THEM TO BE DEMENTIA FRIENDLY AS WELL.

10:31:36 AND ONE OF THE THINGS THAT CAME UP WAS A OPPORTUNITY FOR AN ADMINISTRATION FOR COMMUNITY LIVING GRANT. TO ACTUALLY PROVIDE THE FUNDS THAT WE COULD YOU KNOW DEVELOP A WHOLE PROGRAM THAT WE REALLY SAW WAS NEEDED, SO, WE SAID, WHY NOT? WE WILL APPLY FOR A FEDERAL GRANT.

10:31:53 SO, WE ENDED UP BEING SUCCESSFUL, IN OUR GRANT, IN ADDITION TO THE AREA AYEN SI ON AGING WE PARTNERED WITH

THE ALZHEIMER'S ASSOCIATION, THEY ARE CRITICAL IN ANY PROGRAM RELATED TO ALZHEIMER'S AND RELATED DEMENTIA.

10:32:05 BUT ALSO PULLED IN THE INDEPENDENT LIVING RESOURCE CENTER. WITH OUR GRANT WE PROVIDE FUNDS TO THE ALZHEIMER'S ASSOCIATION, AND INDEPENDENT LIVING RESOURCE CENTER.

10:32:21 THEY EACH HAVE A STAFF PERSON DEDICATED TO IT. FOR THE ALZHEIMER'S ASSOCIATION, WHAT THIS LOOKS LIKE, IS THAT PROVIDE A LOT OF THE TRAINING AND CARE, CONSULTATION AND OUTREACH INTROO THE XHUPTY.

10:32:31 FOR THE INDEPENDENT LIVING RESOURCE CENTER THEY ARE PROVIDING CASE MANAGEMENT TO THE POPULATION.

10:32:40 WE HAVE BEEN ABLE TO TAKE OLDER AMERICANS ACT FUNDS AND FAMILY CAREGIVER FUNDS AND LEVERAGE THEM AND MAKE THEM GO FURTHER TO SUPPORT THESE POPULATIONS.

10:32:58 YOU KNOW, WHERE THERE IS A NEED. SO, HOW DO WE GET OUR REFERRALS? ONE OF THE BIGGEST BARRIERS THAT WE HEARD GOING INTO IT WAS HOW ARE YOU EVER GOING TO GET PEOPLE THAT ARE GOING TO SELF-IDENTIFY AND RAISE THEIR HAND AND SAY YOU KNOW I NEED HELP.

10:33:19 SO, WE DID A LOT OF THINKING AS PART OF OUR DEMENTIA FRIENDLY COUNTY GROUP ABOUT HOW CAN WE MAKE THIS WORK. SO, WE DO GET REFERRALS FROM THE ALZHEIMER'S ASSOCIATION. AND THE INDEPENDENT LIVE RESOURCE CENTER AND OTHER SOCIAL SERVICE AGENCIES.

10:33:48 IN OUR COUNTY WE HAVE THREE FAMILY CAREGIVER CENTERS. INCLUDING ONE THAT SPECIALIZES IN PROVIDING SERVICES TO SPANISH SPEAKING CAREGIVERS. WE WORK WITH OUR CAREGIVER CENTERS TO GET REFERRALS TO THE CASE MANAGEMENT PROGRAM. WE ALSO HAVE CAREGIVER RESOURCE CENTER THAT SERVES THE TRICOUNTY AREA. THAT ALSO PROVIDES REFERRALS TO US.

10:34:11 WE HAVE A LOT OF PEOPLE THAT SELF-REFERRAL. WE FOUND WITH COVID, MORE AND MORE PEOPLE ARE WILLING TO

SELF-IDENTIFY, IN PARTICULAR FAMILY MEMBERS THAT LIVE OUT OF STATE. WE DO SCREENING THROUGH OUR INFORMATION AND REFERRAL SYSTEM. SO, WE ARE ONE OF 6 DESIGNATED AGING AND DISABILITY RESOURCE CONNECTION PROGRAMS IN THE STATE.

10:34:36 SO, WHAT WE DO, WHEN ANYBODY CALLS IN FOR ANY TYPE OF ASSISTANCE, WE DO A SIMPLE SCREENING. THE SCREENING IS FOR TO DETERMINE PEOPLE'S SATISFACTION. REALLY A PHQII SCREENING, LOOKING AT THE LEVEL OF SATISFACTION IN IN LAST TWO WEEKS OF PEOPLE BEING DISINTERESTED IN LIFE.

10:34:47 BASED ON THE RESULTS OF THAT SIMPLE SURVEY, IT WILL GO TO ANOTHER SOCIAL WORKER WHO WILL ACTUALLY DO A MORE LONGER SCREENER IF THERE IS POSITIVE RESULTS.

10:35:02 AND WE HAVE FOUND THROUGH DOUNG THAT WE HAVE FOUND A NUMBER OF INDIVIDUALS THAT HAVE BEEN YOU KNOW OUT THERE THAT ARE NEEDING ASSISTANCE AND PARTICULARLY PEOPLE THAT LIVE ALONE.

10:35:12 SOMETIMES THEY WILL BE SCREENED FOR ANOTHER PROGRAM AND COME OUT IN THE CONVERSATION THEY HAVE ALZHEIMER'S OR YOU KNOW ANOTHER FORM OF DEMENTIA AND THEY ARE IN NEED OF HELP.

10:35:18 SO, WE HAVE REALLY NOT HAD A LOT OF ISSUES GETTING YOU KNOW CLIENTELE.

10:35:30 LIKE YOU BUILD IT AND THEY WILL COME. I THINK IF YOU BUILD IT RIGHT AND MAKE IT SOMETHING RESPONSIVE TO WHAT THE COMMUNITY NEEDS AND IT'S EASY TO ACCESS, PEOPLE WILL COME TO THE PROGRAM.

10:35:41 WITH SETTING UP OUR WHOLE PROGRAM WE WANTED TO MAKE SURE THAT WHAT THE SERVICE THAT WE ARE PROVIDING WAS REALLY RESPECTIVE TO WHO LIVES IN OUR COMMUNITY.

10:35:52 SO, WE MAKE AN EFFORT TO REALLY HIRE BICULTURAL AND BILINGUAL STAFF AND MULTIPLE LANGUAGES.

10:36:06 PEOPLE CAN TALK TO THE SOCIAL WORKER IN THE LANGUAGE THEY SPEAK. THEY HAVE UNDERSTANDING OF THE CULTURE AND BARRIERS AND ACCESSING SERVICES. AND REALLY HOW WE NEED TO COMMUNICATE AND WORDS WE NEED TO USE.

10:36:40 WE ALL FEEL THAT DIFFERS BETWEEN DIFFERENT POPULATIONS YOU ARE PROVIDING SERVICE TO. WITH ALSO MAKE EFFORT TO DO CONTINUOUS TRAINING FOR OUR SOCIAL WORKER STAFF. AS WELL AS INFORMATION AND REFERRAL STAFF. WE PROVIDE TRAINING WITH INDEPENDENT LIVING CENTER AND ALZHEIMER'S ASSOCIATION, AND THIS IS SOMETHING THEY DO ANNUALLY. THEY ALL GET THE TRAINING, THEY ALL KNOW THE SIGNS AND SYMPTOMS, BUT ALSO SPECIALIZED TRAINING SPECIFIC TO LATINX OLDER POPULATION.

10:36:57 AND TRAINING FOR DEALING WITH INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AS WELL. AND, ALL TRAINING PROVIDED IS PERSONAL CARE, PERSON-CENTERED CARE.

10:37:13 THAT'S IT ABOUT OUR PROGRAM. THERE IS A LOT MORE TO IT, IF ANYBODY IS INTERESTED IN YOU KNOW APPLYING FOR ONE OF THESE GRANTS OR SETTING UP DEMENTIA-FRIENDLY COMMUNITY, PLEASE CONTACT ME, I HAVE MY INFORMATION PROVIDED HERE. THANK YOU.

10:37:47 >> FANTASTIC THANK YOU SO MUCH FOR THE INFORMATIVE PRESENTATION YOU JUST GAVE, A LOT OF OUR COMMUNITY MEMBERS NEED THIS INFORMATION. WHETHER THEY KNOW ABOUT YOUR ORGANIZATION, OR THEY JUST NEED TO INFORM THEMSELVES A LITTLE MORE AND JUST SPREAD THE WORD AND TELL FELLOW PEERS AND FAMILY MEMBERS ABOUT THIS INFORMATION.

10:38:13 TODAY I AM HAPPY AND HONORED TO BE HERE, TO TALK ABOUT SERVICES THAT ARE AVAILABLE FOR FAMILY CAREGIVERS. NEXT SLIDE, PLEASE. I AM HERE REPRESENTING SOUTHERN CAREGIVER RESOURCE CENTER, SOME INDIVIDUALS MAY KNOW WHAT WE ARE ABOUT OR KIND OF SERVICES WE OFFER. I AM

HERE TO TELL EVERYONE WE ARE HERE TO HELP THE FAMILY CAREGIVER.

10:38:42 FLORENCE GAVE HER BEAUTIFUL TESTIMONY ABOUT EXPERIENCE THAT SHE HAD BEING A CAREGIVER, WHETHER MAYBE SHE ADMITS OR RECOGNIZES IT, OR MAYBE NOT FULLY YET. HOPEFULLY AT THE END OF THE PRESENTATION, SHE WILL. BUT ALL OF THE SERVICES I WILL TALK ABOUT IN THIS PRESENTATION AGAIN ARE FOR THE FAMILY CAREGIVER, THE INDIVIDUAL WHO DOES THE CARING. WE ARE HERE TO CARE FOR THOSE WHO CARE FOR OTHERS.

10:39:00 TALK ABOUT THE CAREGIVER JOURNEY, CAN BE VERY DIFFICULT AND OFTENTIMES WE FORGET TO CARE FOR OURSELVES, SPEAKING FROM PERSONAL EXPERIENCE, AND PROFESSIONAL SERVICE PROVIDER. I KNOW THAT CAREGIVERS WE FORGET TO CARE FOR OURSELVES.

10:39:18 FACE IT, WE DO IT ALL AS CAREGIVERS, WE BECOME, WHETHER YOU ARE A PARENT, FULL-TIME WORKER, WE DO ALL THIS CARING WHILE CARING, AND PICKING UP ON VARIETY OF DIFFERENT RESPONSIBILITIES WHEN WE ARE CARING FOR OUR LOVED ONE THAT MAY HAVE A FORM OF DEMENTIA LIKE ALZHEIMER'S.

10:39:26 THAT MAY HAVE A COGNITIVE IMPAIRMENT LIKE TRAUMATIC BRAIN INJURY OR MAYBE WE ARE CARING FOR A FRAIL OLDER ADULT.

10:39:37 WE BECOME THE COOK, THE DRIVER, THE LEGAL ADVISER, WE HELP THIS INDIVIDUAL WITH ALL OF THE ACTIVITIES OF DAILY LIVING WE DO ON A DAILY BASIS.

10:39:47 SOMETIMES THESE ACTIVITIES BECOME OVER WHELMING, AND WITHIN OF THE THINGS I HAVE SEEN ALONGSIDE MY TEAM OF WHY ONE OF THE REASONS WHY CAREGIVERS DON'T REACH OUT TO US.

10:40:07 WHY THEY DON'T UPSET THE HELP OR RECEPTIVE TO RECEIVING THE EXTRA SUPPORT IS BECAUSE THEY HAVE A FEAR OF DEPORTATION WITHIN THE LATINO COMMUNITY, OR INDIVIDUAL

THAT IS UNDOCUMENTED. THEY DON'T REACH OUT BECAUSE THEY BELIEVE WE ARE GOING TO ASK FOR PROOF OF DOCUMENTATION.

10:40:28 THAT IS NOT TRUE, WE DON'T ASK FOR THAT. SOME OF THEM DON'T REACH OUT BECAUSE THERE IS A LANGUAGE BARRIER, FORTUNATE ENOUGH WE SPEAK BOTH ENGLISH AND (EN ESPANOL) SPANISH AS WELL P. WE ARE HERE TO HELP EVERYONE WITHIN OUR COMMUNITY.

10:40:54 ASIAN, AFRICAN AMERICAN, LATINO COMMUNITY. WE ARE HERE TO HELP EVERYONE, AT THE END OF THE DAY WE ARE ALL CAREGIVERS. WHETHER YOU IDENTIFY AS A CAREGIVER YOURSELF, BEEN A CAREGIVER YOURSELF OR KNOW SOMEONE WHO IS A CAREGIVER, WHETHER THAT IS PART TIME OR 24 HOUR FULL-TIME, AT THE END OF THE DAY WE ARE ALL CAREGIVERS.

10:41:11 THERE IS DIFFERENT LEVELS OF CAREGIVERING, REALLY THE RESOURCE CENTER IS HERE TO HELP YOU AND THE CAREGIVER WITH IT ALL. NEXT PLEASE. WE ARE VERY FORTUNATE TO FORM PART OF A LARGER COLLABORATIVE EFFORT, SOUTHERN CAREGIVER RESOURCE CENTER.

10:41:22 SPECIFICALLY, IT'S LOCATED IN THE SOUTHERN AREA, WE ARE AGAIN PART OF A LARGER COLLABORATIVE EFFORT OF CAREGIVER RESOURCE CENTERS.

10:41:43 WE FORM PART OF A NONPROFIT 11 CAREGIVER RESOURCE CENTER THROUGH OUT THE STATE OF CALIFORNIA. WE ARE HERE TO OFFER FREE SERVICES TO THE FAMILY CAREGIVER, THAT MUCH NEEDED SUPPORT OFFERED STATEWIDE ALL THROUGH OUT THE STATE OF CALIFORNIA.

10:41:53 THESE ORGANIZATIONS AGAIN, OFFER FREE SERVICES TO THE FAMILY CAREGIVER AND SOME OF THESE SERVICES VARY DEPENDING ON THE LOCATION, DEPENDING ON THE COMMUNITY THEY ARE SERVING, THE NUMBERS OF COURSE. .

10:42:06 AGAIN, SOME OF THESE SERVICES MAY VARY, SPECIFICALLY THE SERVICES THAT I AM GOING TO TALK ABOUT

TODAY ARE THE SERVICES THAT WE OFFER AT SOUTHERN CAREGIVER RESOURCE CENTER.

10:42:31 THESE SERVICES OFFERED THROUGH AUTOSAN DIEGO COUNTY, WE ARE HERE TO HELP THE FAMILY CAREGIVER, CARING FOR SOMEONE WITH FORM OF DEMENTIA, ALZHEIMER'S, COGNITIVE IMPAIRMENT, MAYBE A OLDER ADULT CHILD. MAYBE YOU AS A CAREGIVER YOU KNOW SOMEONE CARING FOR SOMEONE WHO IS A FRAIL OLDER ADULT 60 YEARS AND OLDER.

10:42:46 THESE SERVICES ARE FOR THE CAREGIVER, IF YOU ARE LOCATED OUT O SIDE OF THE COUNTY, NO NEED TO WORRY, AGAIN WE ARE PART OF THE LARGER COLLABORATIVE EFFORT, YOU CAN GO AHEAD AND CHECK OUT THE STATEWIDE WEBSITE OF THE CAREGIVER RESOURCE CENTERS.

10:42:56 YOU CAN BASED ON YOUR LOCATION, TYPE IN YOUR ZIP CODE AND SEE WHAT CAREGIVER RESOURCE CENTER IS AROUND YOU AND CLOSEST TO YOU.

10:43:17 BASED ON THAT LOCATION YOU CAN CHECK OUT AND GET MORE INFORMATION ON THE KIND OF SERVICES THAT ARE AVAILABLE TO YOU WITHIN YOUR LOCATION. NEXT PLEASE. NOW THE FIRST STEP TO CONNECT WITH US, CONNECT WITH ALL OF THE CAREGIVER RESOURCE CENTERS, OF COURSE, PICK UP THE PHONE AND CALL US.

10:43:22 LET US KNOW I AM A FAMILY CAREGIVER I WOULD LIKE TO USE YOUR SERVICES.

10:43:37 YOU CAN CHECK OUT OUR WEBSITE. OR CONNECT WITH US PERSONALLY ON OUR 800 NUMBER.

10:43:45 AFTER YOU LET US KNOW, I AM A CAREGIVER, I NEED TO ACCESS SERVICES THAT YOU OFFER, WE WILL CONNECT WITH YOU AND GET YOU SQUARED AWAY.

10:44:03 INTAKE COORDINATOR IS THE FIRST INDIVIDUAL YOU SPEAK TO. THIS INDIVIDUAL WILL ASSESS YOUR PERSONAL SITUATION, WE ALL KNOW YOU HAVE DIFFERENT SITUATIONS. AFTER THAT YOU WILL BE CONNECTED WITH A FAMILY CONSULTANT.

10:44:23 MAY SOUND CHEESY. I LIKE TO SAY, THEY WILL BE YOUR BEST FRIEND THROUGH OUT YOUR JOURNEY, A LOT OF THE TIMES AS CAREGIVERS WE MAY NOT NECESSARILY RELATE TO OTHERS WHO ARE NOT CAREGIVERS OR CARING FOR SOMEONE WITH A FORM OF DEMENTIA OR ALZHEIMER'S.

10:44:39 SOMETIMES IT'S DIFFICULT TO RECEIVE THE SUPPORT YOU MAY NEED, FAMILY CONSULTANT WILL CONNECT YOU TO ALL OF THESE SERVICES THAT ARE ON THE SCREEN, MAYBE YOU NEED A FEW OF THEM, MAYBE YOU NEED ONE OF THEM OR MAYBE AGAIN, YOU NEED TO USE ALL OF THESE SERVICES.

10:44:57 FAMILY CONSULTANT WILL ASSESS YOUR SITUATION, AND DEPENDING ON YOUR SITUATION, THEY WILL CREATE A SPECIALIZED PLAN. THIS SPECIALIZED PLAN WILL INCLUDE FOR EXAMPLE, MAYBE A SUPPORT GROUP. WHICH IS ONE OF OUR SERVICES, OUR SUPPORT GROUPS.

10:45:04 OUR SUPPORT GROUPS ARE PROFESSIONALLY FACILITATED AT ALL TIMES.

10:45:35 DURING THIS TIME, RIGHT NOW I KNOW THE COVID-19 VACCINE IS OUT. BUT WE ARE NOT 100% BACK TO NORMAL. THINGS ARE DIFFERENT, ES SPERLLY FOR THE CAREGIVER, ESPECIALLY FOR CARING FOR SOMEONE. SOMETIMES, AGAIN, RIGHT NOW WE NEED THAT HUMAN INTERACTION AS CAREGIVERS, WE NEED THAT SUPPORT. IN OUR SUPPORT GROUPS OUR CAREGIVERS CAN CONNECT WITH OTHER INDIVIDUALS THAT MAYER MAY NOT BE GOING THROUGH THE SAME SITUATION.

10:46:05 ALSO OBTAIN TIPS AND ADVICE, OR SUPPORT GROUPS CAN BE USED AS ME TIME, SOMETIMES YOU RELAX AND HAVE THAT HUMAN INTERACTION THAT THE CAREGIVERS NEED. NOW ON THE OTHER HAND WE HAVE CAREGIVERS THAT MAY BE ATTENDING OTHER SUPPORT GROUPS AT OTHER ORGANIZATIONS AND FACILITIES. AT THEIR HOSPITAL OR SOMETIMES THEY DON'T WANT THAT GROUP SETTING.

10:46:33 WE DO OFFER ANOTHER SERVICE, WHICH IS OUR COUNSELING SESSIONS, DURING OUR COUNSELING SESSIONS, AGAIN, THEY ARE LED BY A MASTERS LEVEL CLINICIAN WHO

UNDERSTANDS OUR SITUATION AND WHAT YOU ARE GOING THROUGH. MASTERS LEVEL CLINICIAN WILL GIVE YOU PERSONAL ONE-ON-ONE SUPPORT TO HELP YOU FACILITATE.

10:47:07 HELP YOU BETTER NAVIGATE YOUR CAREGIVER JOURNEY, WHICH CAN BE OVER WHELMING. IF YOU DON'T WANT TO USE OUR SESSIONS WE HAVE MANY OTHER SERVICES AVAILABLE TO YOU FOR FREE, NO CATCH, THESE SERVICES FOR FREE FOR THE FAMILY CAREGIVER, WE OFFER OUR EDUCATION AND TRAINING SERVICES. AS A COMMUNITY EDUCATOR I MAY BE A LITTLE BIAS, THIS IS MY DEPARTMENT, I REALLY ALONGSIDE MY TEAM TRY TO EMPOWER OUR COMMUNITY BY RAISING AWARENESS ON WHAT CAREGIVERS DO. .

10:47:24 BECAUSE AGAIN NOT A LOT OF INDIVIDUALS, IN FACT, RARELY, THERE ARE RARELY INDIVIDUALS THAT PERSONALLY IDENTIFY AS CAREGIVERS. WE THINK THAT THE CAREGIVER IS A PAID PROFESSIONAL AT A HOSPITAL.

10:47:31 LIKE A NURSE OR DOCTOR, OR CARE PROVIDER AT A FACILITY. WE ARE CAREGIVERS.

10:47:58 IN OUR EDUCATION AND TRAINING DEPARTMENT, YOU CAN FIND OUR PRERECORDED PRESENTATIONS, PRERECORDED WORKSHOPS OR OUR LIVE STREAM CLASSES WE HAVE ON THE WEBSITE, CAREGIVER CENTER. YOU ARE LEARN ABOUT YOUR LOVED ONE'S DIAGNOSIS, WHAT IS ALZHEIMER'S, DIFFERENT TYPES OF DEMENTIA, WHAT TO DO IN EMERGENCY, PREPAREDNESS, WHAT'S GOING TO HAPPEN WITH YOUR LOVED ONE.

10:48:27 WHAT TO DO WHEN YOU THINK ABOUT MEAL PLANNING. WHETHER IT'S PROGRESSIVE OR HAS NOT, YOUR LOVED ONE'S MEAL IN THE MEAL PLAN WILL CHANGE. NOT ONLY THE LOVED ONE, BUT THE WHOLE EXPERIENCE WILL CHANGE FOR YOU AS WELL. WE HAVE VARIETY OF DIVERSE CLASSES OFFERED IN BOTH ENGLISH AND SPANISH ON THE WEBSITE. AND AGAIN, IF YOU DON'T HAVE TIME TO WATCH OUR LIVE STREAM CLASSES OR ANYTHING.

10:48:53 THESE ARE ALWAYS PRERECORDED ON THE WEBSITE, SO YOU CAN GO BACK AND CHECK THEM OUT, SPREAD THE WORD, SHARE TO YOUR SIBLINGS AND LOVED ONES AND FAMILY MEMBERS AND COWORKERS ALL OF THESE RESOURCES AVAILABLE ON THE WEBSITE FOR FREE. IF YOU ARE LOCATED OUTSIDE OF THE STATE OF CALIFORNIA, OUR EDUCATION AND TRAINING SERVICES WILL BE ACCESSIBLE TO YOU FROM ANYWHERE.

10:49:13 ANOTHER OF THE SERVICES THAT IS VERY POPULAR HERE, IS THAT WE HAVE OUR RESPITE CARE PROGRAM. OUR RESPITE CARE PROGRAM, ES SPEN SHLLY PROVIDES A MUCH NEEDED BREAK FOR THE CAREGIVER, SOMETIMES YOU NEED TO STEP AWAY FROM YOUR RESPONSIBILITIES.

10:49:25 MAYBE YOU NEED TO GO TO A DOCTOR OR DENTIST APPOINTMENT, I HAVE HAD INDIVIDUALS OR CAREGIVERS COME TO ME AND SAY I HAVE A DENNEST APPOINTMENT IN MEXICO ON THE OTHER SIDE OF THE BOARDER.

10:49:56 I NEED ONE SO COME CARE FOR MY MOM OR SPOUSE. BUT I HAVE NO ONE TO HELP ME DURING THIS TIME. BUT I NEED TO GO TO THIS APPOINT. SO, DURING THIS TIME WE OFFER TEMPORARY SUPPORT TO THE CAREGIVER FOR FREE. IF YOU DO NEED TO GO GROCERY SHOPPING AND MUCH NEEDED APPOINTMENT TO FOCUS ON SELF-CARE, TAKE CARE OF YOURSELF, WE WILL SEND PROFESSIONAL CAREGIVER HAS BEEN BACKGROUND CHECKED AND FINGERPRINTED.

10:50:22 THAT IS A PROFESSIONAL WHO KNOWS WHAT THEY ARE DOING TO GO CARE FOR YOUR LOVED ONE DURING THIS PERIOD. ALWAYS TAKING THE CDC AND COUNTY HEALTH RECOMMENDATIONS, AGAIN WE ARE STILL IN A PANDEMIC, BUT, WE KEEP THIS SERVICE, BECAUSE OUR CAREGIVERS NEED THIS MUCH NEEDED SUPPORT AND BREAK FROM THE RESPONSIBILITIES.

10:50:48 THAT IS THE RESPITE CARE PROGRAM, NO CATCH, SOMETHING THAT IS MADE POSSIBLE BY GRANTS AND DONATIONS WE RECEIVE, AND AGAIN THAT'S OUR RESPITE CARE PROGRAM.

WE ALSO OFFER LEGAL AND FINANCIAL CONSULTATION. DURING THIS TIME, WITH THE COVID-19 PANDEMIC, ES SPESHLLY WHEN IT BEGAN, OUR CAREGIVERS DID NOT KNOW WHAT TO DO WITH THE WILL, POWER OF ATTORNEY, WITH A HEALTH CARE DIRECTIVE.

10:51:08 IF YOU NEED HELP WITH THESE DOCUMENTS WE PARTNER WITH ATTORNEYS AND LAWYERS THAT CAN HELP YOU WITH THE DOCUMENTS FOR FREE. FEEL FREE TO CONTACT US, CHECK OUT OUR WEBSITE FOR MORE OF THE SERVICES WE OFFER, AS YOU SEE ON THE SCREEN, WE HAVE VARIETY OF SERVICES AVAILABLE TO YOU.

10:51:35 I KNOW IT IS DIFFICULT TO ASK FOR HELP, BUT DOESN'T HAVE TO BE HARD, AS A FORMER CAREGIVER I KNOW IT IS IMPORTANT TO USE THE FREE SERVICES AVAILABLE. ONLY HELPS US AS CAREGIVERS, AGAIN, PRED THE WORD IF YOU KNOW A CAREGIVER AND SERVICE PROVIDER, CONNECT THEM.

10:51:47 IN OUR PORTAL YOU CAN FIND ALL OF THIS INFORMATION INCLUDING WHAT I JUST TALKED ABOUT OUR SERVICES OUR EDUCATION AND TRAINING, WORKSHOPS, CLASSES, EVENTS.

10:52:12 ALL OF THIS IS AVAILABLE ON OUR I CARE PORTAL AT CAREGIVER CENTER. YOU CAN LISTEN TO THE POD CAST, CAREGIVER CORNER NEWSLETTERS, HEALTH BULLETINS, CAREGIVER EVENTS WHERE WE HAVE ALL OF OUR INFORMATION, FEEL FREE TO CHECK IT OUT AND CONNECT, WE ARE HERE TO HELP.

10:52:27 THIS IS OUR PERSONAL INFORMATION, IF YOU ARE LOCATED OUTSIDE OF THE SAN DIEGO COUNTY, FEEL FREE TO CONNECT WITH ME, FEEL FREE TO CONNECT WITH ANY OF MY COLLEAGUES THROUGH THIS PHONE NUMBER. (ON SCREEN).

10:52:36 WE WILL GET YOU SQUARED AWAY AND GET YOU HELP THAT YOU NEED. THERE IS HELP OUTSIDE OF THE SAN DIEGO COUNTY.

10:52:46 PART OF THE LARGER COLLABORATIVE EFFORT, FEEL FREE TO CONNECT WITH US, VERY HAPPY TO BE HERE, I HOPE

THIS INFORMATION WAS HELPFUL TO ALL OF YOU, THANK YOU SO MUCH, APPRECIATE IT.

10:53:12 >> THANK YOU SO MUCH EVERYBODY. THAT WAS A FANTASTIC PRESENTATION, WE WANT TO MAKE SURE WE TURN TO Q AND A, I KNOW THERE IS ACTIVITY IN THE Q AND A BOX, DISCUSSION HAPPENING THERE. I WANT TO RECOGNIZE THAT PARTICIPANTS ARE REALLY GLAD TO HEAR FROM BOTH FLORENCE AND YOLANDA ABOUT THE EXPERIENCE.

10:53:29 WE KNOW THE STORIES REALLY HIT HOME. AND I WANT TO PAUSE HERE, SEE IF ANYBODY ELSE HAS QUESTIONS OR COMMENTS. IF YOU ARE JOINING BY ZOOM WEBINAR, USE THE A AND A FUNCTION, OR RAISE YOUR HAND AND UNMUTE YOUR LINE AND HEAR DIRECTLY FROM YOU.

10:53:50 IF YOU ARE DIALLING IN BY PHONE, IT'S STAR 9 THAT WILL ALLOW US TO SEE YOU HAVE A QUESTION OR COMMENT AND UNMUTE YOUR LINE THAT WAY, TAKE A LOOK. JUST A COMMENT. HAPPY TO HEAR THE COUNTY IS DEMENTIA-FRIENDLY.

10:54:07 MY MOM LIVES THERE AND NOW EXPERIENCING SYMPTOMS, I AM NEAR BY IN SANTA BARBARA COUNTY. ANYBODY ELSE HAVE QUESTIONS OR COMMENTS? OKAY, WE HAVE ONE. .

10:54:30 HOW IS CARE COORDINATED WITH THE HEALTH PLANNER PROVIDER ORGANIZATION CASE MANAGER? ANYBODY WANT TO RESPOND TO THAT? I DON'T MEAN TO PUT YOU ON THE SPOT, DO YOU HAVE ANY SENSE HOW THAT IS DONE, THE COORDINATION?

10:54:55 >> HI, YOU KNOW, THAT'S NOT REALLY MY AREA OF EXPERTISE, ALL I DO KNOW IS THAT I DON'T KNOW SEMANTICS OF IT, I KNOW THAT RELATIONSHIP IS ESTABLISHED AND FIGURE OUT A WAY TO WORK COLLABORATIVELY, SO THAT THE INDIVIDUAL IS GETTING A BETTER COORDINATED CARE. OPPOSED TO THEM GOING AT IT BY THEMSELVES.

10:55:02 AS FAR AS EXACTLY HOW THAT HAPPENS, I AM NOT KEEN TO THAT.

10:55:03 >> UNDERSTOOD.

10:55:41 >> THIS IS VICTORIA, I CAN ANSWER FROM OUR PERSPECTIVE, WE HAVE VARIOUS CASE MANAGEMENT PROGRAMS. AND, WHAT WE TYPICALLY DO IS WE HAVE A RELEASE, AND DEPENDING ON THE PROGRAM WE WILL PULL THE MEDICAL RECORDS OR TALK TO THE PHYSICIAN, AND, SO, THE CONNECTION STARTS ON OUR END REALLY JUST TO UNDERSTAND MORE OF WHAT THE ACTUAL DIAGNOSIS IS. AND REALLY HELPS DETERMINING WHAT OUR PLAN OF TREATMENT IS GOING TO BE FOR THE INDIVIDUAL.

10:56:02 >> THANK YOU. COUPLE MORE QUESTIONS COMING IN. DOES SOUTHERN CAREGIVER RESOURCE CENTER OFFER FREE RESPITE CARE ALL OVER THE STATE. THIS INDIVIDUAL IS IN NORTHERN CALIFORNIA WOND R HOW THEY CAN GET SERVICES.

10:56:28 >> YES, DEPENDING ON YOUR LOCATION, MAJORITY OF THE CAREGIVER RESOURCE CENTERS THROUGH OUT THE STATE OF CALIFORNIA. WE OFFER RESPITE CARE FOR FREE. DEPEND ON THE AMOUNT, AGAIN, BUDGET THEY RECEIVE AND DONATIONS RECEIVED. BECAUSE THE RESPITE CARE SERVICE THAT WE OFFER SPFKLY AT SOUTHERN CAREGIVER RESOURCE CENTER IS BASED ON THE CERTAIN AMOUNT OF HOURS WE CAN PROVIDE TO EACH OF OUR CAREGIVERS.

10:56:39 SO, DEPENDS ON THE LOCATION THEY ARE IN. BUT MAJORITY OF US OFFER RESPITE CARE. OUR RESPITE CARE SERVICES.

10:57:03 >> THANK YOU SO MUCH. IF YOU STILL HAVE A QUESTION OR COMMENT, FEEL FREE TO JUMP IN THERE. DOES-- BACK TO YOU, DOES SOUTHERN CAREGIVER RESOURCE CENTER OFFER SPEECH THERAPY MY MOTHER RECENTLY DIAGNOSED.

10:57:17 >> NO, UNFORTUNATELY, WE DO NOT OFFER SPEECH THERAPY. ALL OF THE SERVICES WE OFFER, AGAIN, IN THE STATE OF CALIFORNIA, CAREGIVER RESOURCE CENTERS, ALL OF THESE SERVICES ARE SPECIFICALLY FOR THE CAREGIVER.

10:57:36 A LOT OF THE TIMES AGAIN, MOST OF THE SERVICES ARE FOR THE CARE RECEIVER, THE LOVED ONE OR PATIENT. BUT THE SERVICES WE PROVIDE SPECIFICALLY AT CRC OR ALL OF THE

CAREGIVER RESOURCE CENTERS IN THE STATE OF CALIFORNIA ARE SPECIFICALLY FOR THE CAREGIVER.

10:57:47 IN THAT CASE WE DON'T OFFER SPEECH THERAPY FOR THE RECEIVER.

10:57:52 >> THANK YOU VERY MUCH, QUESTION FROM BOB I SEE YOU HAVE PUT IT IN THE Q AND A.

10:58:09 >> FOR THE TESTIMONY WE HAVE HEARD TODAY, HOW CAN THE STORIES BE SHARED WITH MORE THAN THE 137 FOLKS ON THE WEBINAR. ARE THERE ANY PLANS TO SHARE THESE STORIES WITH LEGISLATORS OF THE UPCOMING NATIONAL ALZHEIMER'S FORUM? I DON'T KNOW IF YOU CAN SPEAK TO THAT.

10:58:35 >> ABSOLUTELY, THAT IS EXACTLY WHAT WE PLAN TO DO, YOU KNOW WE HAVE A ONCE A YEAR EVENT, MENTIONED HERE, ALZHEIMER'S NATIONAL FORUM. WE WILL GIVE THESE INDIVIDUALS A PLATFORM TO SHARE THEIR STORY WITH LEGISLATORS IN EFFORT TO ADVANCE CERTAIN LEGISLATION WITH THE MEMBERS OF CONGRESS. THROUGH OUT THE YEAR WE ARE ALSO ENGAGING IN ADVOCACY EFFORTS.

10:58:49 IN THEIR OWN COMMUNITY. ANYBODY HAS A STORY OR ANYBODY IS PASSIONATE ABOUT THIS AND TAKE IT TO THE NEXT LEVEL TO ADVOCATE FOR PUBLIC POLICY THAT CAN HELP EVERYONE. I ENCOURAGE YOU TO REACH OUT TO THE ASSOCIATION.

10:58:56 WE CAN PUT YOU IN TOUCH WITH THE PERSON DOING THE GRASSROOTS ADVOCACY, SO YOU CAN TELL YOUR STORY.

10:59:11 >> THANK YOU SO MUCH, I WANT TO TURN TO DELORES, WE OPENED YOUR LINE, YOU SHOULD BE ABLE TO UNMUTE AND ASK YOUR QUESTION AND MAKE A COMMENT, GIVE YOU A COUPLE SECONDS.

10:59:31 >> YEA, HI, THANK YOU, I WONDERED IF THERE ARE PROGRAMS IN OTHER LANGUAGES BESIDES THE ONES THAT WE HAVE HEARD ABOUT. COULD ANY OF THE SPEAKERS ADDRESS THE ISSUE THAT MULTIPLE LANGUAGES THAT CAREGIVERS MIGHT NEED TO BE ADDRESSED IN.

10:59:55 >> I CAN TAKE ON THAT QUESTION. GREAT QUESTION. SOUTHERN CAREGIVER RESOURCE CENTERS, AGAIN, WITH CAREGIVER RESOURCE CENTERS THROUGH OUT THE STATE OF CALIFORNIA. WE DO OFFER A VARIETY OF OTHER PROGRAMS, SOME SERVICES MAY BE DIFFERENT BASED ON THE LOCATION, SOME OF THESE INCLUDE OTHER LANGUAGES.

11:00:13 THAT COULD BE AGAIN IN SPANISH, YOU JUST NEED TO GO AHEAD AND CHECK OUT OUR WEBSITE AND BASED ON YOUR LOCATION, YOU CAN SEE WHAT KIND OF SERVICES THEY OFFER, AND WHAT DIFFERENT LANGUAGES THEY HAVE IT IN.

11:00:48 >> I COULD ALSO ADD OUR 800-NUMBER WITH ASSOCIATION, WE HAVE MASTER'S LEVEL CLINICIANS TO HELP FOLKS, AND DIRECT THEM TO RESOURCES IN THE COMMUNITY IN OVER 200 LANGUAGES. 800-272-3900, GREAT RESOURCE TO HELP CONNECT FOLKS TO SERVICES THEY NEED. AND TALK THROUGH A CERTAIN SITUATION, NONEMERGENCY THEY NEED IN CARING FOR THEIR LOVED ONE.

11:01:12 >> FROM A TRIPLE-A PERSPECTIVE, WE PROVIDE SERVICES IN THRESHOLD LANGUAGES IN THE COUNTY. AND THOSE WE DO NOT SPEAK WE USE THE LANGUAGE LINE INTERPRETERS. SO, PEOPLE REALLY SHOULD BE ABLE TO ACCESS SERVICES IN THE LANG WAGE THEY SPEAK THROUGH AT LEAST LANGUAGE LINES.