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*Cultural  
Competency  
Toolkit*

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CHAPTER **7**



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## **Outreach to Seniors**

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## Executive Summary

Aiken County, South Carolina is rated as one of the top 100 places to retire in the United States, but local mental health services to the elderly are not sufficient for this high population of senior citizens. While eleven percent of the people residing in the area are seniors, only four percent of the consumers served by the local mental health service agency are of this age group. The Mental Health Association in Aiken County (MHAAC) proposed to confront this problem by forming a Seniors Task Force made up of local mental health organizations, organizations providing services to older Americans, and mental health consumers and caregivers. This task force would discuss how best to improve mental health services to Aiken County's senior citizens, and would then act upon these recommendations.

### Project Goals

- To form a Seniors Task Force of elder-serving agencies, consumers, family members, caregivers and other interested parties.
- To follow the recommendations set by the task force.

## Introduction

Aiken County, South Carolina is rated as one of the top 100 places in the United States to retire, and accordingly the region is home to a substantial elderly population. Yet research conducted by the Aiken-Barnwell Mental Health Center (ABMHC), the county's public, outpatient mental health provider, suggests that county mental health services to the elderly are lacking.

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Aiken County, South Carolina, rated one of the top 100 places in the United States to retire, is home to a substantial elderly population.

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ABMHC offers a traditional range of services including psychiatric evaluations, medication management, case management, crisis intervention, and outpatient therapy and psychosocial rehabilitation, to people of all ages and functional levels. For the most part, this organization does a very competent job of meeting the community's needs and it has received high marks in consumer satisfaction surveys.

As a function of its quality improvement process, ABMHC evaluates its service delivery in light of accessibility, secondary and tertiary consumer satisfaction, and effectiveness and efficiency of services. This evaluation process, which entails a minimum of one major satisfaction survey and one needs assessment conducted annually, involves a review of internal clinical and administrative data; input from consumers, families, agencies, and ABMHC staff; and comparison of ABMHC demographics with county and state demographics.



## Outreach to Seniors

In the two years preceding this grant proposal, reviews of ABMHC’s services and operations revealed services to the elderly to be an area of concern. While eleven percent of the people residing in ABMHC’s catchment area were 65 years old or older, only four percent of the consumers served by the organization were of this age group. ABMHC did not have any programs or services designed specifically for the elderly, nor did it employ a geriatric mental health specialist.

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At the time of this grant proposal, Aiken’s public mental health provider did not have any programs or services designed specifically for the elderly.

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### Members of the Aiken Senior Task Force

- Aiken Area Council on Aging
- Aiken-Barnwell Mental Health Center
- Aiken County Coroner’s Office
- Aiken Psychiatric Associates
- Aurora Pavilion
- Cornerstone Baptist Church
- Department of Health and Environmental Controls
- Department of Social Services
- Edengardens of Aiken
- Lower Savannah Council of Government
- Mental Health Association of Aiken County
- Parker’s Community Center
- Pepperhill Nursing Center
- Shadow Oaks
- Southern Home Care Services
- Vocational Rehab
- We Care

## Program Plan

**M**HAAC proposed to confront the problem of insufficient mental health services for senior citizens in its area by forming a Seniors Task Force made up of local mental health organizations, organizations providing services to older Americans, and mental health consumers and caregivers. This task force would discuss how best to improve mental health services to Aiken County’s senior citizens, and would then act upon these recommendations.

## Organizational Overview

**M**HAAC began in 1967 as a volunteer organization dedicated to improving services to people with mental illness, removing the stigma of mental illness, and promoting good mental health. One of twenty affiliates of the National Mental Health Association in South Carolina, MHAAC has been recognized with a number of local awards and honors, including receiving the Outstanding Affiliate Award by the state mental health association five times in ten years.

MHAAC’s primary focus is the improvement of quality of life for persons with serious mental illness through advocacy and direct intervention. When deinstitutionalization became South Carolina’s policy of dealing with many of the state’s severely and persistently mentally ill consumers, this mission took on increased urgency. Assimilation of consumers into the mainstream of the community has become one of MHAAC’s primary goals.



Accordingly, MHAAC has developed a number of programs and events to support persons with mental illness residing in Aiken County. These included, “A Place of Our Own” Drop In Center, where consumers can socialize, partake in leisure activities, learn psychosocial and employment skills, and get additional support as needed; Operation Santa, which ensures that adults with mental illness living in the community and adolescents in state hospitals receive gifts and a holiday meal at Christmas; the Consumer Trust Fund to provide consumers with assistance in budgeting, financial management and banking; and onsite leisure and socialization activities provided at local community care homes. In addition, MHAAC provides transportation for consumers in Aiken County, since the public transportation system is almost non-existent.

## Implementation

MHAAC’s first step in implementing this project was to invite elder-serving agencies in the area to join a senior task force to review mental health needs of Aiken County’s senior population. MHAAC was enormously successful in this endeavor, managing to bring together some 45 representatives of 17 different organizations who then met regularly, twice

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Senior caregivers from different agencies — including consumers, family members and professionals — gathered to evaluate the mental health needs of area seniors.

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per month. Senior caregivers from different agencies, including consumers, family members and professionals throughout the Aiken County community gathered to evaluate the mental health and related needs of seniors, to identify barriers to seniors getting their mental health needs met, and to develop a plan to address those needs and barriers.

The task force decided initially to focus on providing public education on the mental health needs of seniors. In cooperation with the City of Aiken, they planned and

organized a half-day “Senior Spectacular,” emphasizing mental and physical health during the aging process. Seniors and other interested persons who attended could gather educational materials, visit interactive exhibits, attend speeches, fill out a needs assessment survey (to be used later by the task force), participate in screenings, and enjoy food and prizes.

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“Many people think that depression is just a part of growing old. They don’t realize that older adults can be successfully treated just like anyone else.”

— Constance Shepard,  
project director

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## Discussion and Conclusion

Aiken County’s Senior Task Force provided a forum where leaders in the mental health community were able to exchange valuable insights and ideas. Mostly, the group concurred that misconceptions about senior citizens’ mental health needs abound. Says Constance Shepard, project director, “there is a great deal of public education that still needs to be done concerning older adults and mental health. Many people — including treatment providers — think that depression is just a part of growing old. They don’t realize that older adults can be successfully treated just like anyone else.”



Shepard readily acknowledges that getting the task force off the ground was much more difficult than she had anticipated. “It took more time than I expected for the group to gel... In the beginning, everyone was invited to participate, but it took a little while to learn which groups were really serious about participating and contributing.” Some advice she offers to others attempting to replicate this project: “It is best to make it clear what it means to collaborate from the beginning.” In this way, organizations can honestly evaluate whether they truly have the time and resources needed to participate.

But now that the Aiken County Senior Task Force is a stable, functioning group, its work will continue beyond this grant period. Based upon the results of the needs assessment distributed at the Senior Spectacular, the task force will be setting new goals for improving mental health services to the elderly in Aiken County. In particular, the Aiken-Barnwell Mental Health Center, Aiken Psychiatric Associates, and Aurora Pavilion of Aiken Regional Medical Services intend to take a leadership role in improving mental health service delivery.

The task force will also be turning to the broader question of providing culturally competent services to older Americans of diverse ethnic backgrounds. At the time of this writing, task force members were planning an upcoming “Aging and Mental Health: Facts and Fiction” conference that would include a discussion on cultural competency. Additionally, they were planning to offer a county-wide cultural competency training in the near future.



*A King and Queen are crowned at the Senior Spectacular.*



## Additional Resources

### Publications

Fogel, Barry S., Furino, Antonio and Gottlieb, Gary L. *Mental Health Policy for Older Americans: Protecting Minds at Risk*. Washington, D.C.: American Psychiatric Press. 1990.

Gatz, Margaret (editor). *Emerging Issues in Mental Health and Aging*. Washington, D.C.: American Psychological Association. 1995.

Knight, Bob. *Outreach With the Elderly: Community Education, Assessment and Therapy*. New York: New York University Press. 1989.

Smyer, Michael A. and Qualls, Sara H. *Aging and Mental Health (Understanding Aging)*. Malden, Massachusetts: Blackwell Publishers. 1998.

Tice, Carolyn J. and Perkins, Kathleen R. *Mental Health Issues and Aging: Building on the Strengths of Older Persons*. Pacific Grove, California: Brooks/Cole. 1996.

Zarit, Steven H. and Zarit, Judy M. *Mental Disorders in Older Adults: Fundamentals of Assessment and Treatment*. New York: Guilford Press. 1998.

### Organizations

American Association for Geriatric Psychiatry  
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E-mail: [ushc@unitedseniorshealth.org](mailto:ushc@unitedseniorshealth.org)  
Website: [www.unitedseniorshealth.org](http://www.unitedseniorshealth.org)

### Internet Resources

*Medicare: The Official U.S. Government Site for Medicare Information.* [www.medicare.gov](http://www.medicare.gov)

*Mental Health Association of Southeastern Pennsylvania: Mental Health and Aging.*  
[www.mhaging.org](http://www.mhaging.org)