

# Health Talks for Elderly Latin Americans

IMPROVING HEALTH IN LONDON CASE STUDY

**Project title:** Health Talks for Elderly Latin Americans

**Location:** Islington, north London

**Date:** November 2003–March 2004

**Funding:** King's Fund Millennium Award



**Context** Providing patients with good-quality information is fundamental to delivering a high standard of health care, enabling patients to participate in decision-making about their treatment and to manage their own conditions. But for those who don't speak English, accessing such information can be difficult. Consequently, they may miss out on opportunities within the NHS and experience poorer health as a result.

While working as a volunteer at the Latin American Elderly Project, a day centre in Islington, Lucrecia Janowicz recognised that the older members of the project were unable to access the health information that they needed because they didn't speak English. She therefore decided to organise a series of talks by Spanish-speaking health professionals on a range of health problems common among older people.

**The Millennium Awards scheme** Between 2001 and 2004, the King's Fund worked in partnership with the Millennium Commission to offer grant-funding, support and training to 255 people working at community level to improve the health of Londoners. Each person received a maximum £2,000 cash grant from Lottery funding, and took part in a 13-day King's Fund leadership development programme designed to build skills in project management and networking.

This is one in a series of case studies exploring how individuals living in London have used the King's Fund Millennium Awards scheme to make a real difference to the health of others in their communities.

# Health Talks for Elderly Latin Americans

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**Lucrecia Janowicz knew from her own experience the importance of having access to good information about health. While working as a volunteer at the Latin American Elderly Project, a day centre in Islington, north London, she recognised that the older members at the centre would benefit greatly from the chance to hear doctors speak in Spanish about health problems common among elderly people. She felt this would increase members' understanding of their symptoms, empowering them to improve their health and quality of life. Lucrecia therefore decided to use Millennium Award funding to organise a series of talks on subjects such as incontinence, arthritis and dementia, as well as a practical massage workshop.**

## Why did you get involved?

I used to be a laboratory technician working in health research, but I suffered from many health problems so decided to retire early. About six years ago, having recovered my health, I wanted to become more active again and help others, so I volunteered to work with the Latin American Elderly Project in Islington. The Latin American Elderly Project runs a day centre four days a week for Latin Americans aged 50 and over, including refugees and asylum seekers. In addition to providing lunch, the centre offers services such as interpreting, advice with housing and benefits issues and referrals to other services, as well as drop-in classes in yoga, Mexican music, English language, psychology, crafts and exercise.

The centre is run by Latin American volunteers and the local council provides the facilities. Between 20 and 40 members attend each day. When I started volunteering, my role was to help members with administrative activities such as filling in forms and making telephone calls. More recently, I have become the Treasurer on the management committee.

Many of the members suffer from a lot of health problems – in particular, cardiovascular problems and high cholesterol – but don't understand why. With my own health problems, I discovered that I could help myself by finding out more about my condition and what lifestyle changes I could make to improve my quality of life. I wanted the members to feel similarly empowered – able to understand their symptoms and underlying problems and to take steps to improve their health and minimise the side-effects of medical treatments. I felt the key was to provide them with appropriate information that was communicated in Spanish using simple language. To this end, I applied for Millennium Award funding to run a series of talks at the centre, focusing on the main health issues affecting members' lives.

## What is your project?

Using the Millennium Award funding, I arranged ten health talks in total. These were held at the centre on Saturday mornings, spread out over a period of five months from late 2003 to early 2004. Although the talks were aimed at people over 60, we invited their families to attend as well. The talks focused mainly on conditions that more commonly affect older people, such as Parkinson's disease, incontinence, colon cancer, dementia, osteoarthritis and heart disease. Each looked at how to identify symptoms, the causes of the underlying problem, how it can be prevented or treated, and what lifestyle changes are necessary to improve the situation. There was also one practical workshop on massage.

All the speakers were Latin American health professionals – mainly doctors – and the sessions were presented in Spanish. This was critical to the success of my project because most of the people who come to the centre don't speak English. Usually when they go to see the doctor, they need to take an interpreter. The language barrier between them and the health professionals means that they miss out on lots of opportunities to take control of their own health by exercising choice about what treatments they receive or learning how to manage their conditions better.

The talks lasted between 60 and 90 minutes. People always had lots of questions to ask the speakers; often they wanted to know what their symptoms meant or, having identified a problem, what action they should take. After each talk, we gave out relevant information leaflets written in Spanish and provided food for everyone.

Cancer of the colon was the topic of our most popular talk, attracting 53 people. The lowest attendance was for a talk on osteoarthritis, which attracted 21 people. However, the poor turn-out for this was largely due to the fact that it took place in January under snowy conditions. On average we had about 30 people at each session. The majority of the attendants came from the centre but we also had people who came as a result of seeing our publicity elsewhere.

## How did you get people involved?

The Latin American Elderly Project operates in a participatory way. Every few months we have a meeting and ask members what they would like to see on the programme of activities at the centre. It's vital that we involve them in this to ensure that the activities are responsive to their needs. For this reason, I followed a similar model for my own project, asking members what talks they wanted as well as making suggestions of my own.

We promoted the talks via leaflets and posters that we distributed to members of the centre as well as to other Latino organisations. I also put an advertisement in two London-based Latin American newspapers and obtained a slot to speak about my project on Vision Radio, a programme for the Latin American community in London. The centre has connections with a number of local businesses, including cafés and sandwich bars, so we were able to leave promotional material there as well. As a result of our publicity drive, we attracted people from other parts of London. This not only boosted attendance at the talks, but brought in some new members for the Latin American Elderly Project.

## What kind of help did you need?

I received a lot of support from the office staff at the Latin American Elderly Project. They helped me to design the leaflets and posters, and to co-ordinate the talks. I found some of the speakers through my own contacts and the rest with the aid of a Chilean organisation called Irmo, which gave me the names of health professionals who might help.

Both Islington and Camden councils offer very good services to support the voluntary sector, including training courses and library resources, which I try to use whenever possible. In addition, both offered help with the promotion of our talks. For example, our contact at Voluntary Action Camden, who was Latin American herself, mentioned the talks in emails to some of her contacts and included an announcement about the project in a newsletter she was producing.

I received help from members at the centre as well. Some people helped to organise the food and drink. This allowed me to attend to the speakers and welcome people as they arrived for the talks. Others distributed leaflets to Latino organisations situated close to their homes in other parts of London.

## What challenges did you face?

Getting people involved in the project and persuading them to attend the talks presented quite a challenge. Even though we handed out leaflets and put up posters everywhere, we still had to constantly remind people to come. Even then, people would turn up at the centre after the talks and say that they had forgotten about it. It was particularly difficult to get men to attend. Many were quite resistant to the idea of discussing health issues, making statements such as: 'I don't think it's appropriate for me'. It was hard work trying to overcome that resistance.

Another challenge was to organise the project professionally within a very short timescale. I had to learn very quickly how best to communicate with a range of different people and take decisions in order to get things done. These were, and still are, big challenges for me.

At the actual workshops, managing people's expectations was quite a challenge. Many brought their medication with them, hoping the speakers would be able to prescribe other medication to improve their symptoms. Unclear of the purpose of the talks, they didn't understand why speakers couldn't deal with their specific cases there and then. We



had to explain that the talks were intended to arm them with information that would help them look after their own health in collaboration with their doctor.

## What lessons did you learn?

Having completed the project I feel stronger and more confident. The King's Fund seminars taught us how to present information verbally and how to understand body language. Particularly helpful was the advice about how to recognise someone with a different way of operating or personality from you, and how to manage that difference in your interaction.

I also learned that when I'm organising something, I need to show people that I'm in charge, while recognising that I cannot manage everything on my own; I need support. Now I feel more secure in my community because I am perceived as more of a leader. I am better able to organise myself and others, to make decisions and delegate the work. When problems arise, I've learned how to identify and solve them effectively so that the project can progress.

## Where does your project go from here?

The project was extremely successful. Members are now discussing their health much more openly and with greater knowledge. There is considerable demand for more events of a similar kind, so I'm trying raise money to run another programme of talks on different topics – other types of cancer, heart problems, stroke and stomach problems, for example. I'd also like to run another workshop, perhaps on aromatherapy this time.

## What advice would you give to others?

Taking on a project is a big commitment. But if you decide you're ready to commit, I'd say go for it. Do your research first, then scope out your project. Once that's done, you can start planning and gathering together people to help you. Remember that although you're the leader, there will be times when you need to compromise to work successfully with others.

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## Interested?

The Millennium Awards scheme has now closed, but the following funding opportunities remain:

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