



The Center on Holocaust Survivor Care
Institute on Aging and Trauma

Celebrating Lessons Learned from the ACL Grant

May 9, 2023

Shelley Rood Wernick, Vanessa Rubenstein, Hayley Herzog



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Remarks from Derek Lee

Regional Administrator

Administration for Community Living



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Objectives

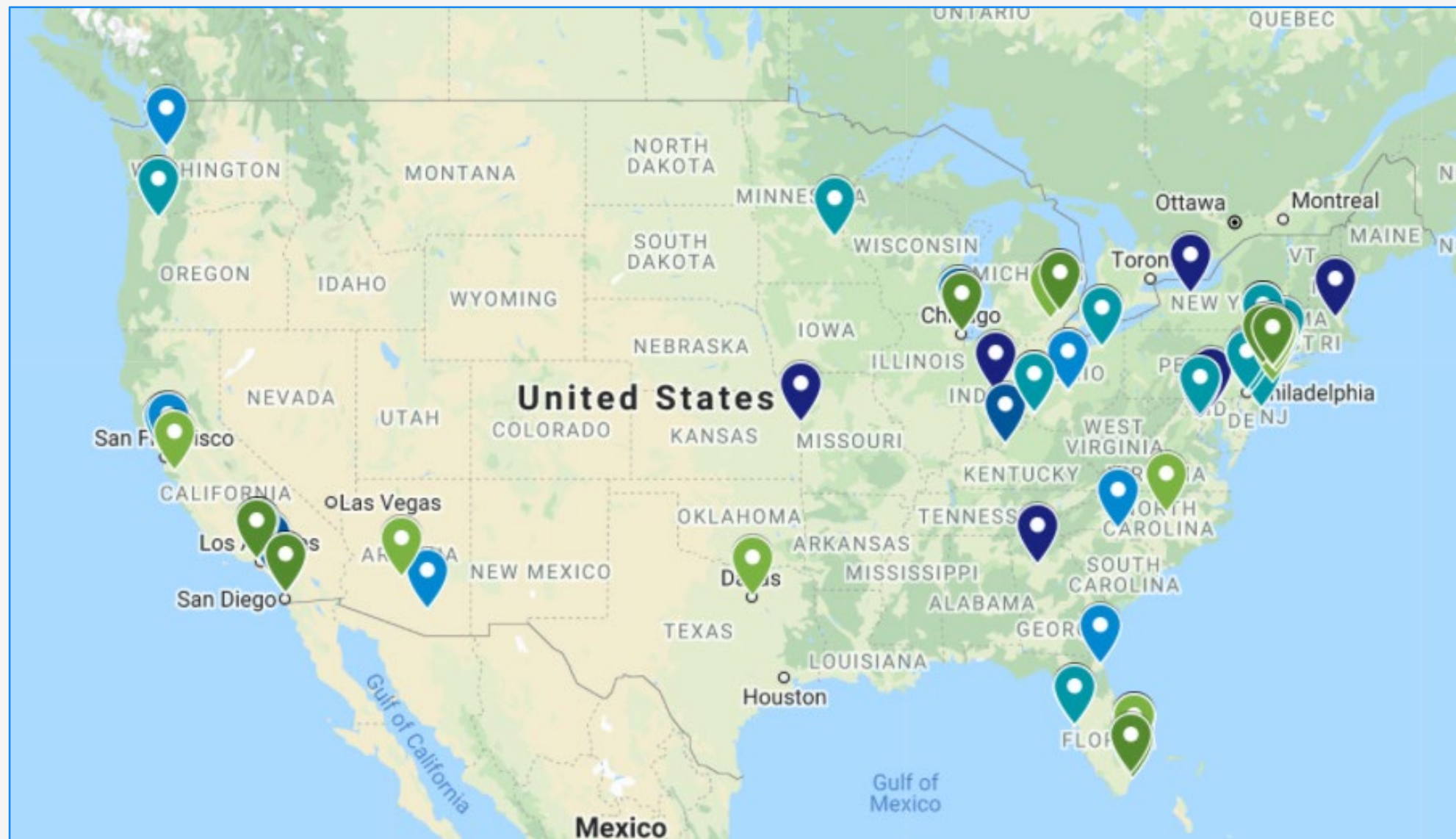
1. Describe the trends JFNA identified across subgrantees' programs and educational initiatives and how these takeaways inform JFNA's next steps.
2. Identify one lesson learned and how it might apply in your own work setting.
3. Describe their role in advancing the field of PCTI in aging services.



**Through our Innovations,
National Networks, Promising
Practices, and Expanded Critical
Supports subgrantees, we
learned:**



Grant Programs



21 States
400 Programs
+
40,000 Holocaust Survivors Served
19,000 Professionals Trained
7,000 Family Caregivers Supported
8,000 Older Adults with a History of Trauma Served

From 2016-2022



6 principles of trauma-informed approach



Safety



Trustworthiness &
Transparency



Peer Support



Collaboration &
Mutuality



Empowerment,
Voice, & Choice



Cultural, Historical, &
Gender Issues



Program Trends



Safety

- PCTI principles in program procedures and policies
- Clients know they are not required to continue a project or activity
- Avoid retraumatization
- Personalized to client needs



Trustworthiness & Transparency

- PCTI principles are implemented into client care
- Programs build trusting and transparent relationships
- Programs evolve and evolution is communicated

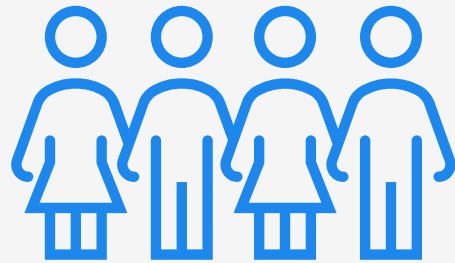


Peer Support

- Connecting clients to peers with shared lived experiences and cultures
- Staff trainings in PCTI principles and methods to use in project facilitation



Program Trends



Collaboration & Mutuality

- Community involvement is focused
- PCTI trainings are provided to community partners, organizations, and professionals



Empowerment, Voice, & Choice

- Clients are given choice
- Clients' voice is acknowledged
- Clients are encouraged to share with each other and with staff
- Family caregivers are empowered to attend programs



Cultural, Historical, & Gender Issues

- Culturally informed activities
- Utilize the participants' native language
- Programs and staff address internal biases and stereotypes



Evaluation Trends

Safety



- Feedback is anonymous and/or confidential
- Limited survey attempts and reminders
- Short and simple surveys
- PCTI-trained staff perform evaluations
- Alert for signs of distress and retraumatization
- Evaluations done separately from programming

Trustworthiness & Transparency



- The objective of data collection is clear to the client
- Participants know the value of their input
- Staff is available to respond to questions and concerns
- Explain that feedback has no bearing on services received

Peer Support

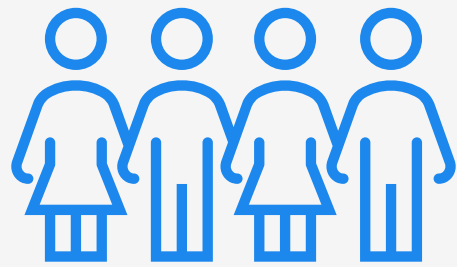


- Ensuring client assistance is available by family, translator, healthcare providers, or peers
- Encouraging participation in evaluations
- Encouraging client support of their peers



Evaluation Trends

Collaboration & Mutuality



- Participants are involved in evaluation
- Collect participant feedback on feelings, experiences, and satisfaction with projects
- Clients are aware that their feedback will improve future programming
- Identify what works and what needs improvement
- Staff are trained in how to collect data

Empowerment, Voice, & Choice



- Assistance is provided during evaluations and supportive referrals are available
- Participation is optional and refusal is honored
- Clients have the opportunity to assist in evaluation

Cultural, Historical, & Gender Issues



- Translators are used, as appropriate
- Language that avoids retraumatization and is culturally informed
- Shorten and simplify survey language



Trends

1. Flexibility
2. COVID-19
3. Technology
4. Staffing



Trends in Flexibility

JFNA subgrantees showed:

flexibility with program
and adapting to change

focus on participant
feedback and needs

- Focus on the individual needs of each client
- Differences in projects reflect the differences in needs of diverse populations
- Translation services and bilingual staff is necessary
- Program growth places challenges

Trends in the impact of COVID-



19

JFNA subgrantees reported challenges associated with the COVID-19 pandemic

- Negative impacts on functional, cognitive, and emotional health
- Need for essential and medical resources
- Altered program plans and made implementation difficult

Trends in implementing technology

JFNA subgrantees reported the need to increase technology use in their program due to COVID-19

- Older adults learned how to access online programming
- Virtual programs increased participation, cognitive health, and a sense of connection for older adults



Trends in staffing difficulties

JFNA subgrantees reported:

Staffing challenges

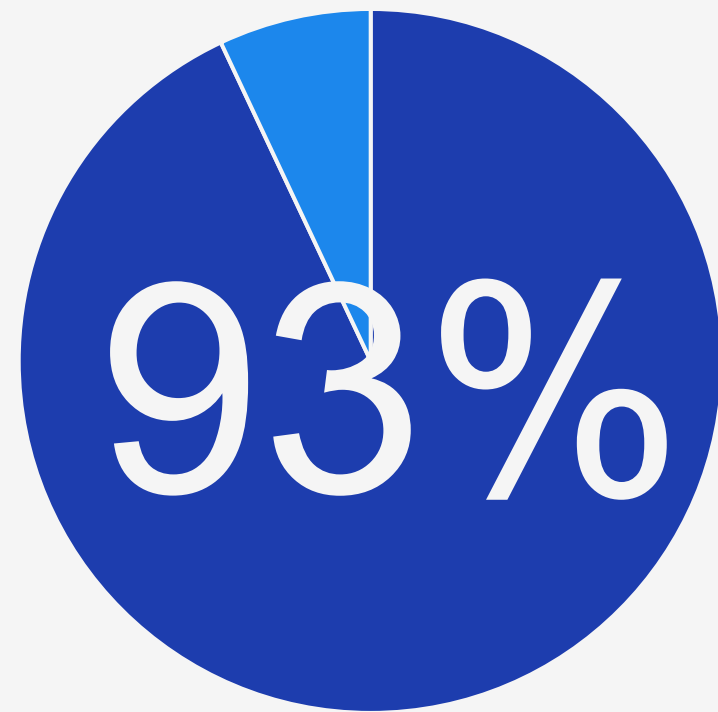
language barriers or
use of translation
services

- Difficulties in recruiting, hiring, and retaining staff and volunteers
- Low wages for a physically and emotionally demanding job
- Lack of bilingual staff and/or translation and interpretation services
- Other staff filling in, using volunteers, part-time staff, and hiring consultants.

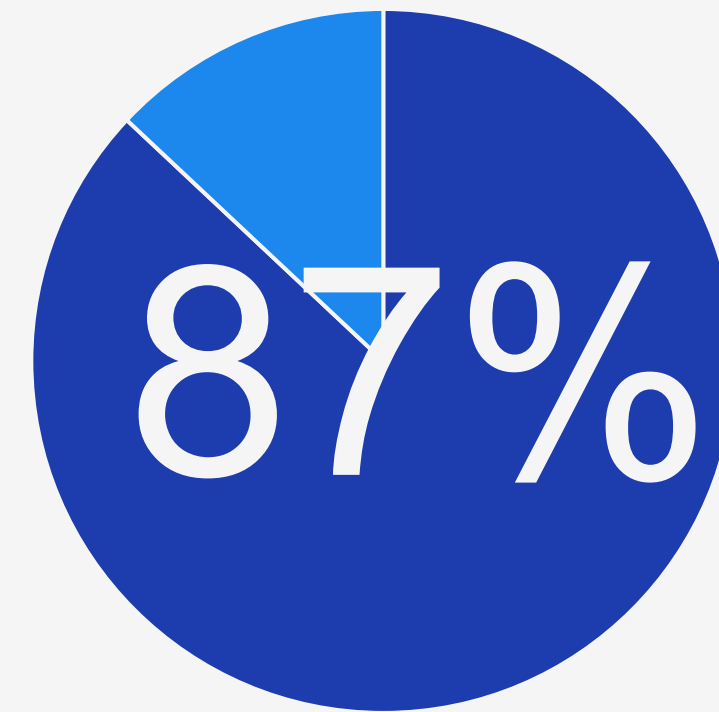


**From our Educational Initiatives,
we learned...**

Awareness & Understanding

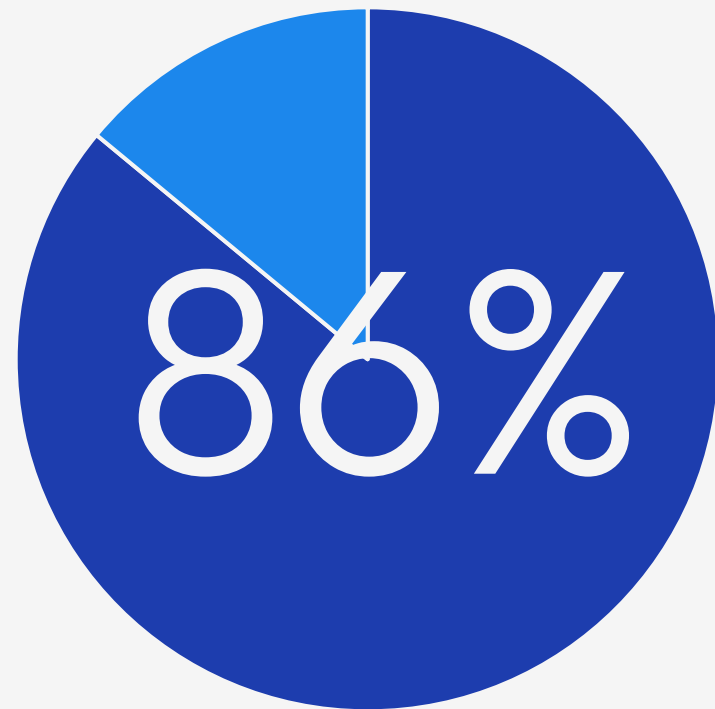


of JFNA subgrantees reported **organization-wide awareness** of PCTI care

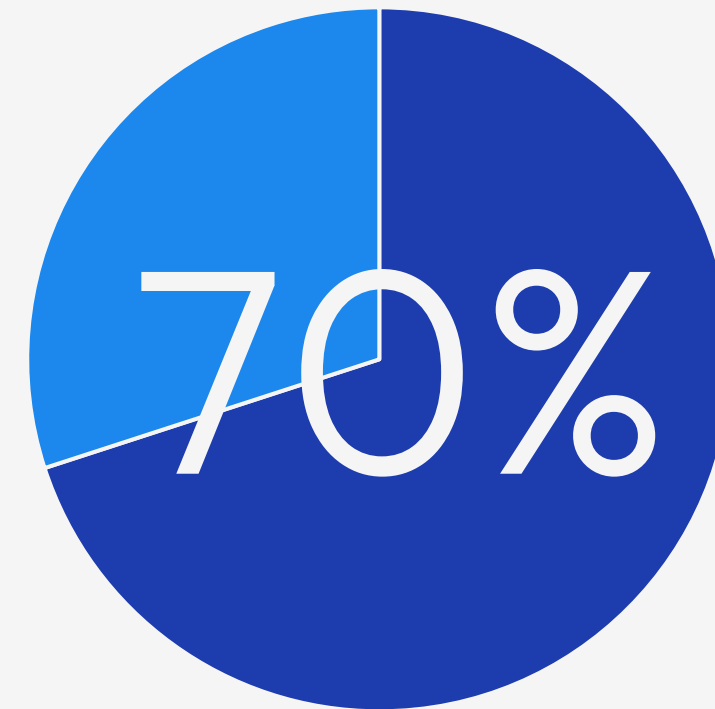


of JFNA subgrantees reported a **deep understanding** of aging with a history of trauma

Capacity



of **JFNA subgrantees** reported high or very high capacity to provide PCTI care to older adults with a history of trauma.



of **JFNA subgrantees** demonstrated high or very high capacity to provide PCTI care to older adults with a history of trauma.



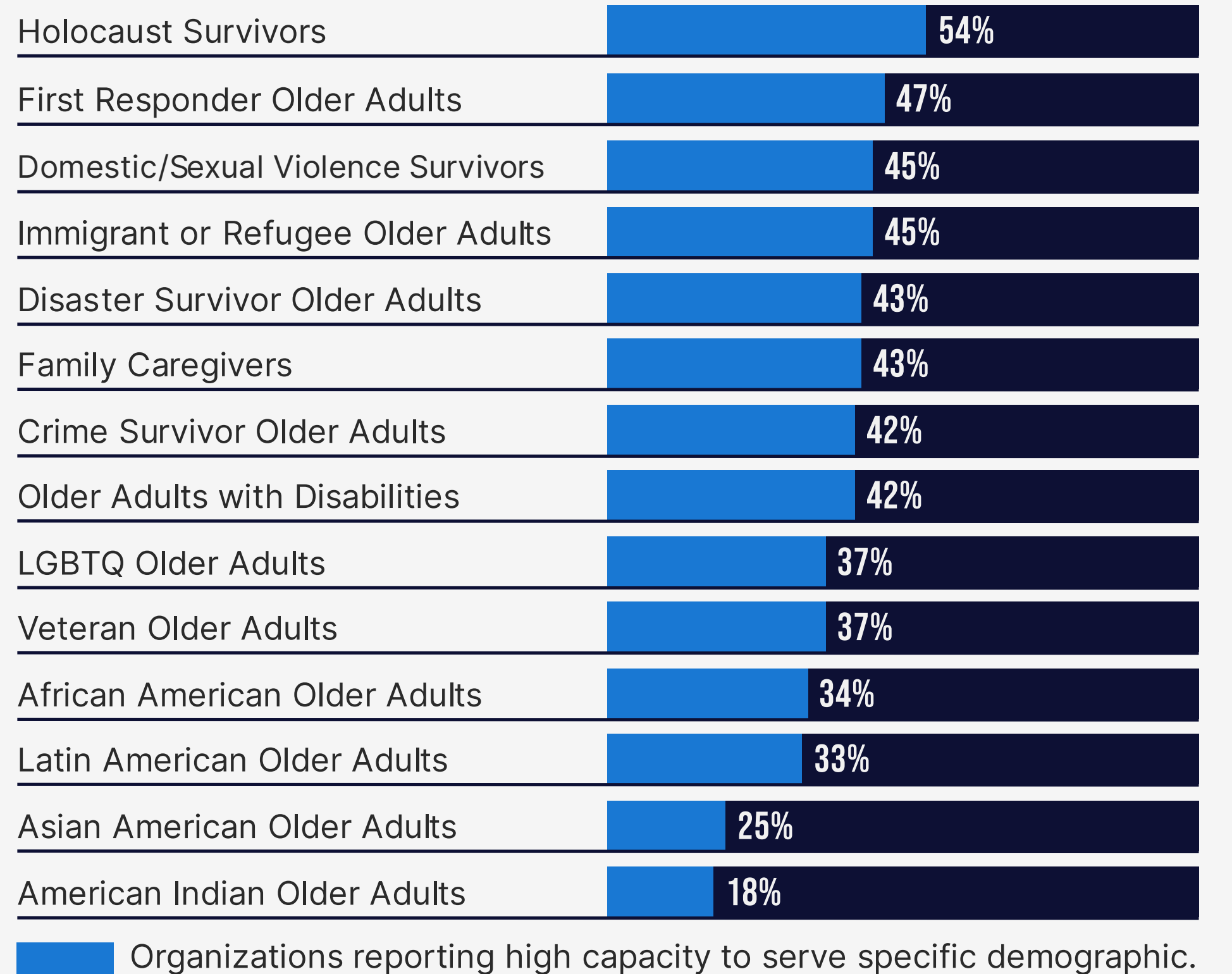
PCTI-care across demographics

- JFNA is using the lessons learned from serving Holocaust survivors and applying those lessons to other older populations with a history of trauma
- Trauma can be a result of one's identity or result of one's experience
- Trauma is layered and complex
- Those who have experienced trauma, can also be members of religious, racial, or gender-based minorities
- This intersectionality has implications for the broad application of the knowledge JFNA has gained by serving Holocaust survivors



Capacity Across Demographics

Aging services providers report having uneven PCTI care capacity across diverse client demographics.



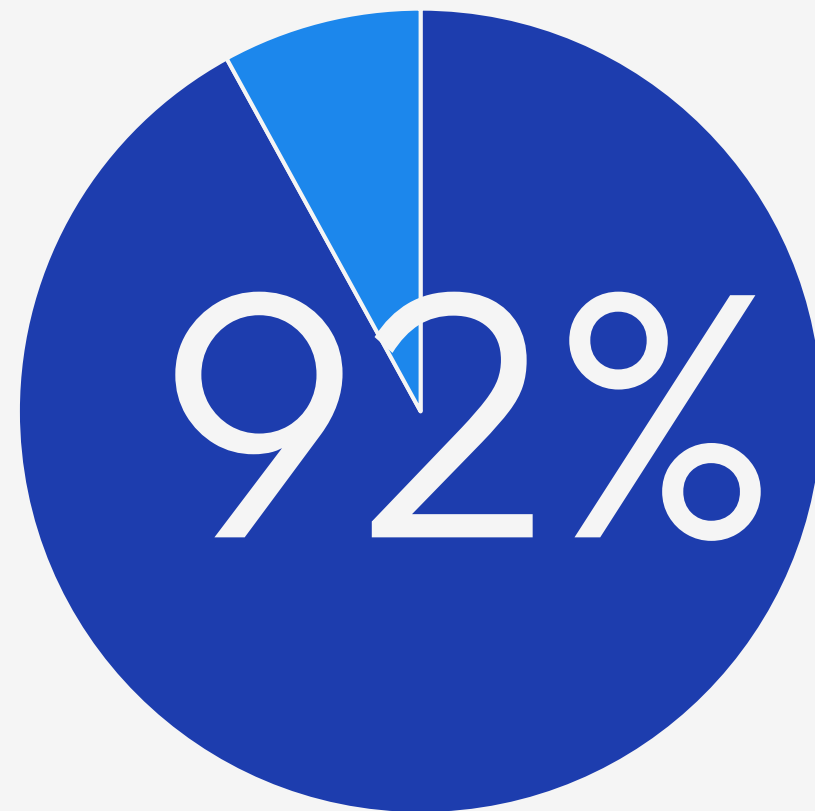


“the PCTI program has allowed our staff to apply this training to any traumatized population, such as veterans, ethnic minorities, the LGBTQ community, immigrants, and anyone who has been mentally, physically, and/or sexually abused.”

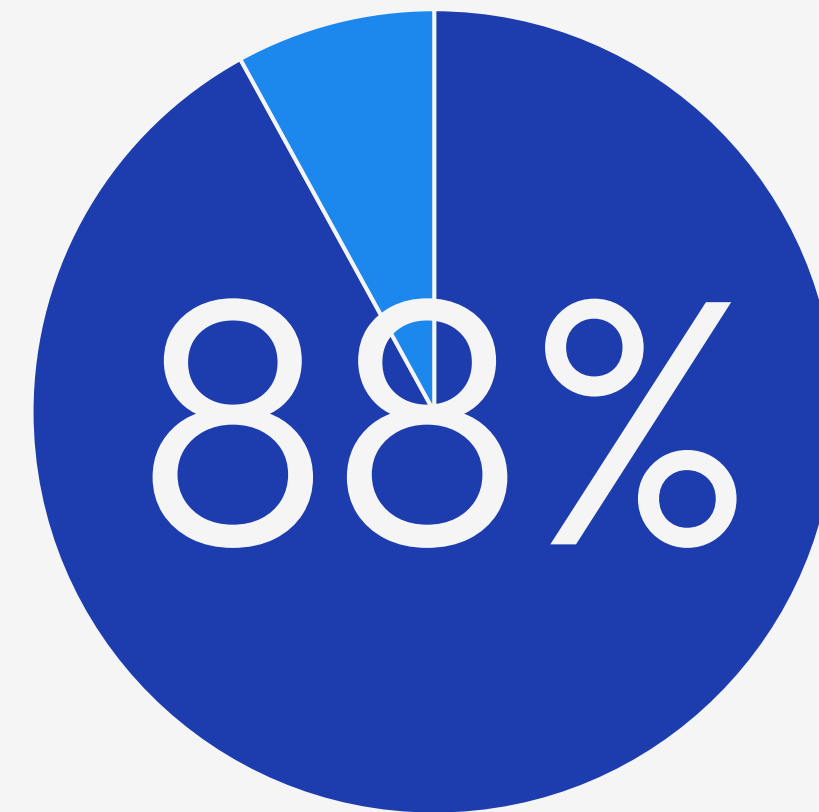


The importance of PCTI-care in evaluations

After the PCTI Evaluation
Webinar...



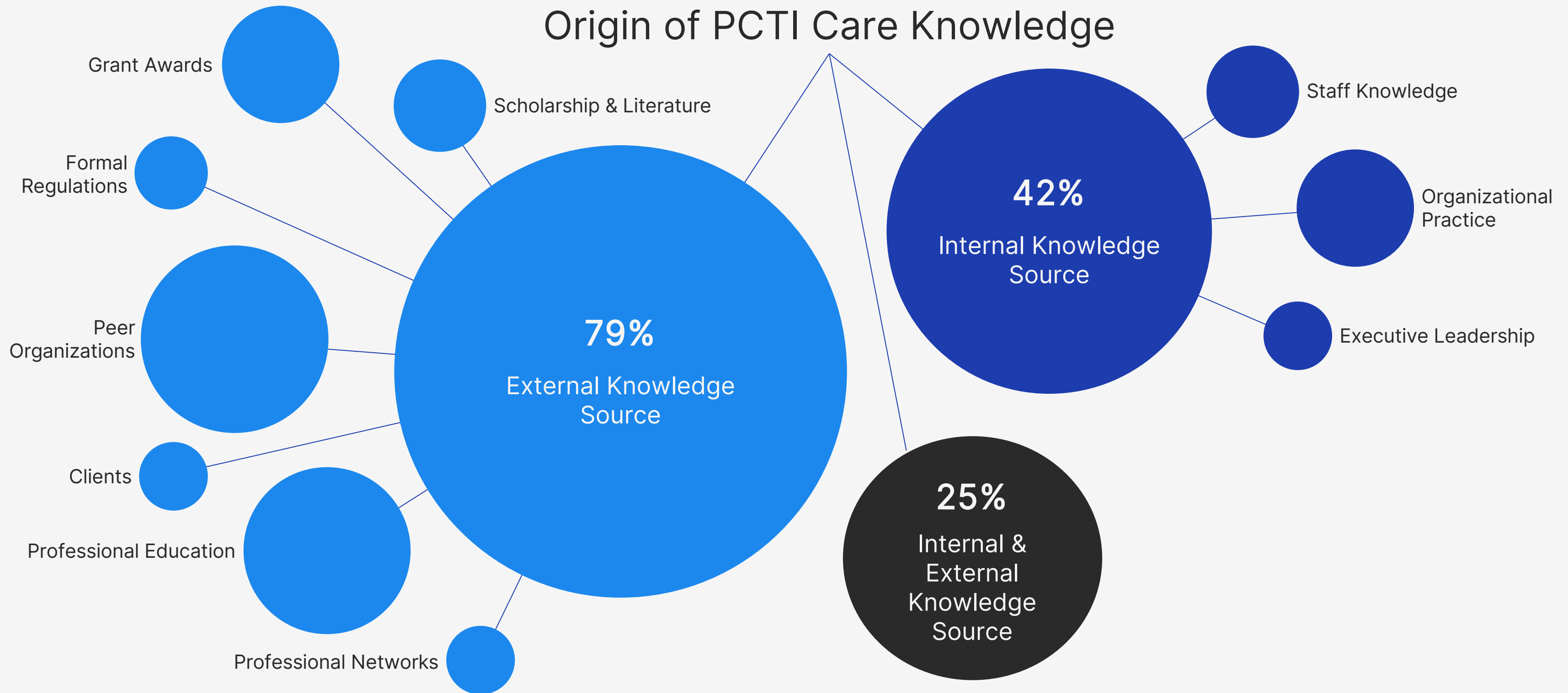
Of agencies reported a better understanding of how to implement person-centered, trauma-informed principles into their evaluation work.



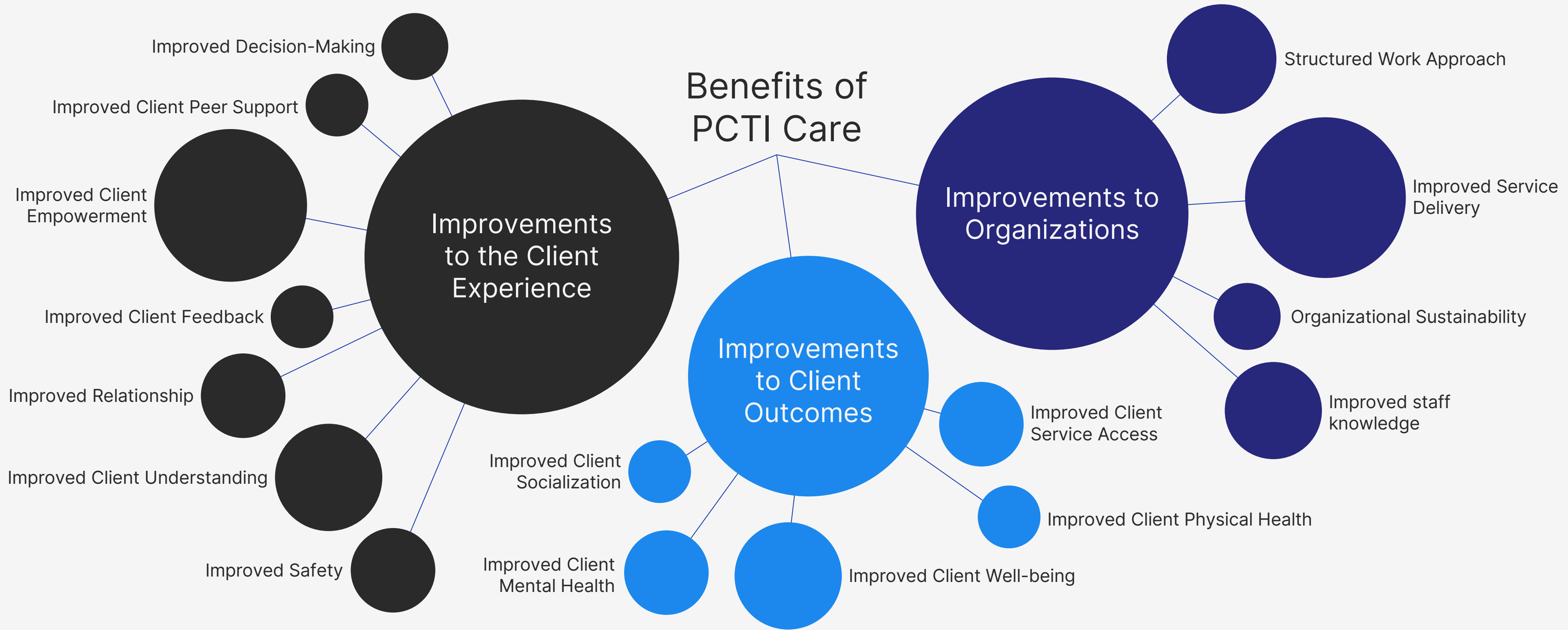
Of agencies reported they plan on implementing learnings from this webinar into their evaluation work.

LEARNING SOURCE

Origin of PCTI Care Knowledge



BENEFIT





An 82-year-old Holocaust survivor with numerous health issues was disoriented and agitated while hospitalized, due to trauma experienced during the Holocaust and her limited English skills. The agency connected her to a Russian-speaking home care aide resulting in improved health and stability, and ultimately a discharge from the hospital.

**Improvements
to the Client
Experience**

**Improvements
to
Organizations**

“as the leader of the project within our organization, I am now completely proficient in the PCTI modality and have successfully trained my entire staff as well. We now utilize this approach for all trauma survivor patients within our practice.”

In a cognitive stimulation lab 71% of participants agreed with the statement, “I am less stressed.”

**Improvements
to Client
Outcomes**



JFNA's Next Steps



Increase grant programs

- Innovations Program Demand
 - The number of applications received for Grapevine is **double** the number received for Fig Tree.
- Expanded Critical Supports is continuously growing
 - Increasing **funding** and **populations served**, including **extra funds to support older refugees**
- National Networks is expanding
 - Continuing to build out the social isolation technology interventions like **Uniper & Memory Lane with the Network**
 - KAVOD SHEF Outreach and Support, Match Grants, and soon Emergency Homecare Grants
 - Habitat for Humanity
 - Expanding out to different networks in **2024**



Elevating the field of PCTI care

- PCTI Training Program in partnership with the Network
- Family Caregiving Expertise
- Develop the field of PCTI Evaluations



Growth & Partnerships

- **Aging and Trauma Work Group** will have more members and more of an active role in elevating the field
- **Educational Advisory Task Force** will guide the development of educational events and materials
- **Aging services foundations** will be included in Center activities and encouraged to utilize the PCTI approach.
- **Holocaust Survivors and Older Adults Spokespeople** will be national ambassadors for creating PCTI culture of care across the lifespan



Conclusion

“I learned greater sensitivity to potential sources of trauma issues.”

“Learning about specific triggers is a useful guide for direct contact with survivors.”

“With every client I encounter, I will use a PCTI approach”

“I have been inspired to try new things in my work with survivors.”

“I learned that PCTI can apply to the agency as a whole”



Remarks from Greg Link

Director, Office of Supportive and Caregiver Services
Administration for Community Living

Q&A



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Thank You!