

Alameda County Caregiver Conversations: A Day of Learning, Support, and Information Exchange

On January 24, 2020, Family Caregiver Alliance (FCA) in partnership with a diverse group of community organizations hosted *Alameda County Caregiver Conversations: A Day of Learning, Support, and Information Exchange* at the California Endowment in Oakland, California. Convening attendees included family and friends caring for adults living with a complex illness (e.g. dementia, stroke, Parkinson’s, etc.) and professionals who offer services to caregivers in Alameda County, and county residents interested in learning more about family caregiving. More than 120 individuals attended the convening.

Four objectives framed the “Caregiver Conversations” convening: 1) raise awareness of and support for family caregivers of adults with serious illness; 2) listen and learn from caregivers caring for individuals with serious illness in the community; 3) identify service gaps, opportunities, and currently available resources for family caregivers in Alameda County; and 4) highlight the impact of race, ethnicity, language, sexual orientation, socioeconomic status, and culture on caregiver experiences and access to services in Alameda County. Funding for the convening was made possible by the Thomas J. Long Foundation. The following are brief convening highlights.

Opening Remarks

Leah Eskenazi, Director of Operations, FCA welcomed convening attendees. Pastor Micheal Pope, Executive Director of Alzheimer’s Services of the East Bay provided a non-denominational invocation that emphasized the importance of both honoring and remembering caregivers worldwide and the work they do every day for loved ones:

...With our friends beside us, and no person beneath us, With the bonds of hope between us, and our worries behind us, with our goals before us, and no task beyond us, with a thirst for knowledge, and a dream for a world where caregiving is valued and recognized. Give us the wisdom to teach and prepare a world where future caregivers/partners find love, respect, and kindness. That each caregiver/carepartner can find peace of mind in knowing they have resources.

Supervisors Nate Miley and Wilma Chan, Alameda County Board of Supervisors, and Jain Thapa, Congressional Aide for Congresswoman Barbara Lee presented opening remarks. Each thanked convening attendees—family caregivers and professionals—and acknowledged the important work they do and the contributions they make to Alameda County.

Keynote: One Size DOES NOT Fit All: The Diversity of Family Caregivers

Rita Choula, Director of Caregiving Projects with the AARP Public Policy Institute, provided the keynote address, *One Size DOES NOT Fit All: The Diversity of Family Caregivers*. Ms. Choula opened her presentation by affirming the universality of caregiving accentuated by Rosalyn Carter’s quote, “There are only four kinds of people in the world: those who have been caregivers; those who are current caregivers; those who will be caregivers; and, those who will need caregivers.

Sharing her own caregiving journey as an African American woman caring for her mother, Ms. Choula underscored the uniqueness of each caregiver's culture and the importance of abandoning multicultural caregiver stereotypes. African American, Hispanic/Latino, and Asian American family caregivers experience family caregiving in ways that reflect their cultural experiences. As such, respecting diversity means learning about each caregiver's culture and how it impacts the experience of caregiving.

Ms. Choula described several important facts regarding family caregivers in America today:

- There are 41 Million family caregivers in America
- Nearly 1 in 4 family caregivers (24%) is a millennial
- 40% of family caregivers are men
- About 40% of family caregivers represent multicultural communities
- 1 of every 6 family caregivers is in the workforce

A growing number of family caregivers today provide complex care. Ms. Choula stated that 50% of caregivers in the study, *Home Alone Revisited: Family Caregivers Providing Complex Care (2019)*, <https://www.aarp.org/content/dam/aarp/ppi/2019/04/home-alone-revisited-family-caregivers-providing-complex-care.pdf> reported performing complex care (medical/nursing tasks and managing multiple health conditions for their loved ones) often with little or no training. The study additionally indicated that caregivers who are socially isolated or have no choice about caregiving are more at risk for experiencing difficulties with complex care.

In response to the study findings and the emotional, physical, and financial stresses of caregiving, Ms. Choula recommended more action to help family caregivers. She acknowledged that significant federal and state policy changes have occurred to support family caregivers, but asserted the need for a broad, national caregiver strategy. The strategy should: 1) provide financial support to help ease the financial costs of caregiving; 2) strengthen workplace flexibility policies and paid family leave programs to assist caregivers in the workforce; and, 3) ensure that family caregivers are routinely identified and that the diversity of their needs are assessed and supported in health care and community services.

State of the Caregiver in Alameda County: Key Findings

Kathleen Kelly, Executive Director, FCA presented key facts about caregiving in Alameda County. She presented detailed demographic and caregiver services information relevant to assessing the state of family caregivers in the county ("family caregiver" includes unpaid relatives, friends, partners, and families of choice). Highlights from Ms. Kelly's presentation included the following:

- In 2010, the 65+ population was 169,000 (11.2% of the total population); by 2060, the 65+ population is projected to be 605,000 (26.7% of the total population).
- There are an estimated 239,000 family caregivers of adults living in Alameda County.
- The rates of Alzheimer's disease in the county are expected to quadruple from 2015 (18,645) to 2060 (78,861) with impact greatest for those 85+ and African Americans.

In sum, Alameda County has an aging population that will likely experience increased disability and the need for more services and supports to remain in the community. In turn, family caregivers will need more information, care planning, emotional support, case management, assessment, complex care training, and respite to manage these needs—services that are in short supply today. In a recent

caregiver survey conducted by FCA, the majority of Alameda County family caregivers reported receiving “no” or “not enough” help from family, friends, community-based organizations, and paid staff. Additional challenges reported by study respondents are presented below.

Service Challenge	Impact of Service Challenge
Poorly Trained Staff	Caregiver respondents reported encountering poorly trained staff with limited understanding of their care recipient’s needs.
Services for Younger Care Recipients	There are not enough services designed for care recipients younger than age 60/65.
Lack of Care Providers of Same Ethnicity	Caregivers noted a lack of care providers of the same ethnicity as the caregiving family to provide services and supports in the community.
Cost for Middle-Income Caregivers	Middle-income family caregivers struggle with the costs of caregiving. Of the few programs that pay caregivers, strict eligibility requirements limit access (i.e., the In-Home Supportive Services Program, a Medi-Cal program providing those with limited income who are disabled, blind, or over the age of 65)

Reflecting on the tremendous personal and economic value that family caregivers contribute in Alameda County (the economic value of the 239,000 family caregivers in Alameda County is approximately \$2.3B annually), Ms. Kelly noted that an increasing number of local and state efforts are focusing on caregivers. Examples include San Francisco’s Dignity Fund: San Francisco voters passed legislation that guarantees funding to enhance supportive services to help older adults and adults with disabilities age with dignity in their own homes and communities; California Caregiver Resource Centers (CRCs) budget augmentation: CRCs received increased state funding in 2019 for a three-year project to expand family caregiver services and supports and improve CRC information technology systems; and the California Master Plan on Aging: A blueprint for state government, local communities, and others to build environments that promote an age friendly California. Ms. Kelly encouraged convening attendees to continue to share their caregiver experiences with family, friends, their faith community, service providers and policy makers to improve the lives of family caregivers.

Caregiver Panel Discussion

Marilyn Ababio, Executive Director, Comfort Homesake moderated a panel of three caregivers: Khaleedah Muhammad, Allen Rubin, and André Rivers. The panelists told their caregiving stories and responded to moderator questions. They described when they first considered themselves a caregiver and how they manage their caregiving responsibilities. Their stories and experiences confirmed the uniqueness of every caregiver and every caregiving journey—including how their caregiving experiences have been impacted by race, income, and sexual orientation—as well as common needs and desires for support. Most caregivers want access to more information about caregiver resources and their loved one’s illness. They also want better care coordination for their loved one, more caregiver support, and a break (respite care). Key session takeaways focused on what caregivers can do to reduce the stress and isolation of caregiving. These include asking for help from others, participating in support groups (to discuss and share experiences, needs, and resources in a judgment-free supportive environment), and exploring the benefits of holistic care with their care recipients’ doctor and other service providers.

Professional Panel Discussion

Micheal Pope, Executive Director, Alzheimer’s Services of the East Bay moderated a panel of professionals representing three organizations that provide a range of caregiver and care recipient services. The organizations and representative panelists are presented below:

- **Alameda County Care Alliance (ACCA).** **Cynthia Carter Perrilliat** is the Executive Director and Co-founder of the ACCA, a faith-based program in partnership with local clinical, academic, and community organizations, engaging 25 faith-based organizations and their pastors in Alameda and Contra Costa Counties. The ACCAC Advanced Illness Care Program™ assists persons with advanced illness and their families/caregivers to holistically manage their physical, psychological, spiritual, and advanced care planning needs.
- **Alzheimer Services of the East Bay (ASEB).** **Micheal Pope** is Executive Director of ASEB, which operates three state-licensed Adult Day Health Care (ADHC) programs at centers in Berkeley, Hayward, and Fremont. ADHC is an alternative to full time care and allows loved ones to remain at home and in the community. ASEB additionally offers an Early Stage Program for individuals with mild cognitive impairment or dementia, and support groups and other support services for family members caring for loved ones with dementia.
- **In-Home Supportive Services, (IHSS) Alameda County.** **Hyun Kim** is an Administrative Specialist in Training and Outreach for the Public Authority IHSS (In Home Supportive Services) Program in Alameda County. The Public Authority for IHSS provides a registry of screened workers for IHSS recipients/consumers and seniors seeking to hire home care workers/personal assistants, and training programs for both IHSS providers and consumers.

After acknowledging the hard work of family caregivers, the panelists identified key gaps and barriers in caregiver services and supports in Alameda County. Chief among the barriers was the **lack of community awareness** about caregiver/care recipient services. The most critical gap was the **limited number of caregiver/care recipient services**, such as adult day health and respite programs to serve families needing these services in the county. Last, panelists noted there are **few services for diverse caregivers**—services responsive to the multiracial, multifait, multicultural needs of county caregivers.

Following the panel, attendees participated in a table discussion addressing the question:

In your experience or based on what you have learned from other caregivers, what do you think are the barriers to receiving caregiver support? What actions have you taken, or efforts have you been involved in to reduce these barriers—for example, with community service organizations, faith communities, neighborhoods, etc.?

Responses to these questions are summarized in the following table:

Barriers to Receiving Caregiver Support	Actions to Reduce Caregiver Barriers
<ul style="list-style-type: none"> ▪ People don’t know where to go for help or information, and information is limited and does not always clarify how to access services. ▪ Caregivers feel isolated and emotionally overwhelmed. ▪ Caregivers don’t have time to seek assistance. 	<ul style="list-style-type: none"> ▪ Connect with others through support groups, hospital social workers, legal organizations, Area Agency on Aging. ▪ Join support groups, advocate for those who cannot advocate for themselves. ▪ Educate caregivers about how to ask for help.

Barriers to Receiving Caregiver Support	Actions to Reduce Caregiver Barriers
<ul style="list-style-type: none"> ▪ Ageism—modern culture does not respect and value elders. ▪ Difficulty finding qualified caregivers especially for the IHSS program. ▪ Assisted Living Facilities are expensive. Some Long-Term Care insurance plans cover this cost, but most commercial insurance plans do not. ▪ Middle-income family caregivers are not paid for their work. ▪ Lack of transportation that is reliable, affordable, and accessible for non-English speaker riders. ▪ Many public programs that serve family caregivers have discriminatory eligibility requirements. ▪ Difficulty navigating systems and resources. ▪ Individuals with developmental and mental health disabilities are not served by many caregiver services. 	<ul style="list-style-type: none"> ▪ Advocate for system change—call legislators, organize the community, ask family to help. ▪ Train physicians on being responsive to caregivers. ▪ Explore Hawaii’s Kapuna Program (pilot helps ease the financial burden for unpaid caregivers who are also employed outside the home). ▪ Provide clear, accessible information about how caregivers can manage the costs of caregiving. ▪ Raise awareness of caregiver needs through media awareness campaign. ▪ Create a central resource directory for caregivers. ▪ Host an annual caregiver conference. ▪ Offer caregiver training programs in the home similar to CalWorks (public assistance program) visiting nurse program for new parents. ▪ Assign case workers/social workers to caregiving families.

Sustainable Compassion

Margaret Cullen, a Licensed Marriage and Family Therapist and Certified Mindfulness-Based Stress Reduction (MBSR) teacher, presented *Sustainable Compassion*. She opened her presentation with a description of compassion: an awareness and recognition of suffering; a feeling of concern for and connection to the one who is suffering; belief that you can make a difference; a willingness to respond or take action; and, a warm glow or sense of satisfaction. Self-compassion is “a kind, connected, and clear-sighted way of relating to ourselves even in instances of failure, perceived inadequacy, and imperfection.” Ms. Cullen guided attendees in self-compassion partnership exercises focused on listening, breathing, and extending soothing regard toward oneself and others. A focal point of the exercises was to breathe in painful feelings and breathe out a sense of spaciousness and well-being.

Listening and Learning from Caregivers

The final session of the convening was dedicated to small group conversations addressing Supporting Caregiver Well-Being ♦ Dealing with Caregiving Finances ♦ Managing In-Home Care ♦ Caregiving and Dementia ♦ Navigating Difficult Family Relationships ♦ End of Life Caregiving. Attendees participated in a discussion group topic of interest to them. Each group, led by a skilled facilitator, provided attendees with an opportunity to synthesize the information and perspectives heard during the day, and share their thoughts, ideas, and strategies to help caregivers. Group members were asked to discuss their responses to several questions (*How does this issue impact you as a caregiver or provider? What challenges have you experienced in this area, including challenges associated with your race, ethnicity, language, sexual orientation, income level, etc.?*) before discussing specific strategies or supports they felt were important related to the discussion topic. At the end of the session, each group wrote their top strategies and

supports to help caregivers on sticky notes and posted them on a “community wall” to share with others (see Strategies/Supports to Help Caregivers, p.7).

In addition, each group shared one key takeaway, “a pearl,” from their discussion with the larger group. The following pearls reflect the depth and breadth of caregivers’ expertise, compassion for other caregivers, and commitment to improving the lives of caregivers in Alameda County.

- Share your caregiving needs, concerns, and experiences with someone you trust.
- Provide caregivers with more information and education about the stages of end of life care.
- Explore creative caregiving arrangements such as a caregiving cooperative (share caregiving responsibilities in a cooperative program modeled on Montessori-based approach to care)
- Encourage family caregivers to speak with family attorneys for information and advice.
- Integrate social services and medical services for people with dementia.
- Delegate family caregiving roles to members of the family.
- Provide overnight care to give caregivers a break.
- Engage children in age-appropriate care activities with older family members.
- Self-care, self-care, self-care is not selfish.

Call to Action

Susan DeMarois, Director of Public Policy, Northern California & Northern Nevada Chapter, Alzheimer’s summarized how caregivers and professionals serving caregivers can advocate for improved caregiver services and supports. Referencing the prayer used by Marian Wright Edelman and the Children’s Defense Fund, “Dear Lord, be good to me. The sea is so wide and my boat is so small,” Ms. DeMarois encouraged attendees to work together to make the family caregiver boat bigger by helping to advocate for an increase in needed services and supports. Attendees can meet with local officials and state legislators, participate in advocacy efforts via the Alzheimer’s Association, <https://www.alz.org/norcal> or ask local community organizations how to get involved.

Closing Remarks

Leah Eskenazi, Director of Operations, FCA thanked caregivers, providers, presenters, and panelists for attending the convening and sharing their experiences and ideas on how to make the lives of caregivers and those for whom they provide care better. In closing, she acknowledged the importance of the convening in bringing the community together to acknowledge the tremendous contributions of Alameda County’s family caregivers and discuss opportunities to better support them.

Strategies/Supports to Help Caregivers

Small Group Discussions

Supporting Caregiver Well-Being

<p>County:</p> <ul style="list-style-type: none"> ▪ Offer more peer support groups that address different cultures and languages. ▪ Provide free respite care. ▪ Offer friendly visitors to care recipients. ▪ Change IHSS funding so low to middle-income individuals can use the program. ▪ Put together a central caregiver directory of resources accessible to the public. ▪ Create a network of caregiver aides. 	<p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Build a wider personal network of help and support. ▪ Establish a day of rest—spend the day sleeping, exercising, meditating. ▪ Pair up with another caregiver to discuss issues and share support. ▪ Work with family members to create a flexible and shared care schedule for care recipient. ▪ Practice and incorporate mindfulness.
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Managing In-Home Care

<p>County:</p> <ul style="list-style-type: none"> ▪ Find ways to reduce the cost of in-home care. ▪ Develop county plans to prepare for future caregiving needs, including in-home care. ▪ Request information about insurance companies that cover in-home care (vet this information in advance of purchasing a policy). 	<ul style="list-style-type: none"> ▪ Provide a centralized in-home care referral network/resource directory of independent providers—make it available online. ▪ Ensure that in-home caregivers have the training and language skills to provide support. <p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Ask family to help with in-home care.
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Navigating Difficult Family Issues

<p>County:</p> <ul style="list-style-type: none"> ▪ Offer more counseling and case management services and supports to family caregivers—ensure services are sensitive to cultural issues. ▪ Provide financial support to reduce caregiving financial burdens. ▪ Be prepared for some “worst case” scenarios to help manage potential family issues. 	<p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Focus on what is important to you, try to ignore family member judgments. ▪ Join a support group or online group to discuss family challenges. ▪ Model for family how to navigate challenges. ▪ Take care of yourself.
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End of Life Caregiving

<p>County:</p> <ul style="list-style-type: none"> ▪ Provide support at the end of life that is multicultural, multilingual, multi-faith. ▪ Do legal planning ahead of time (e.g., Power of Attorney, Advance Health Directive). ▪ Educate caregivers about end of life stages. ▪ Start education about advance care planning early before older adulthood. 	<ul style="list-style-type: none"> ▪ Provide more training for health care providers and doctors about end of life care and advance care planning. ▪ Offer 24-hour care for end of life support at home, especially at night. <p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Use hospice care for services, support, and supplies.
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Caregiving and Dementia

<p>County:</p> <ul style="list-style-type: none"> ▪ Promote a culture change to give caregivers more value. ▪ Provide redirection training for caregivers. ▪ Provide tax deductions for family caregivers. ▪ Integrate health care and community services for individuals with dementia. ▪ Offer more trainings on how to manage loved ones with dementia. ▪ Provide financial support to help with the costs of caring for individuals with dementia. 	<p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Join support groups. ▪ Ask friends/families for a break—ask them to watch care recipient so you can run personal errands, take needed time for yourself, etc. ▪ Share caregiving experiences with friends, faith community—create more of a village mentality. ▪ Explore adult day care options. ▪ Request more affordable day care and respite programs. ▪ Pick your battles.
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Dealing with Caregiver Finances

<p>County:</p> <ul style="list-style-type: none"> ▪ Allow respite grants to pay for adult day care. ▪ Provide financial support for caregivers, including those in the workforce. ▪ Lobby to change IHSS eligibility so more people can use the program. ▪ Lobby to increase the amount of IHSS income for family providers. 	<p>Caregivers:</p> <ul style="list-style-type: none"> ▪ Talk to family/friends about financial stressors. ▪ Prepare a financial planning checklist of services needed and their costs. ▪ Speak to a family attorney about estate planning, Durable Power of Attorney. ▪ Call FCA, Area Agency on Aging, Alzheimer’s Association for caregiver finances information. *
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* These and other caregiver resources are listed on p. 9.

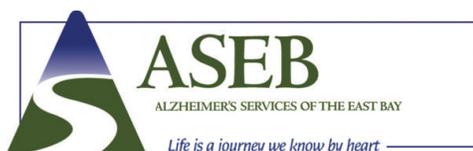
Caregiver Resources

Resource	Information	Contact: Phone/Website
211 Alameda County	211 connects Bay Area residents with health & human service programs in their local community.	211 https://www.211bayarea.org/
Ability Now Bay Area	Educates and empower adults with disabilities and their families through advocacy, wellness, and building independence.	(510) 531-3323 https://abilitynowbayarea.org/
Alameda County Health Care Alliance (ACCA)	ACCA is a faith-based community advanced illness care navigation program that uses a navigation model with care navigators and volunteer care ministers from the faith community to assist persons with advanced illness and their families/caregivers to holistically manage their physical, psychological, spiritual, and advanced care planning needs.	(510) 544-8910 https://www.phi.org/focus-areas/?program=alameda-county-care-alliance
Alameda County Veterans Service Office (VSO)	The VSO provides veterans, their dependents and/or survivors with information regarding veterans benefits, and assistance with filing benefit claims, waivers and appeals, in order to obtain and maintain all major categories of benefits and services consist (e.g., Disability Benefits, Dependents and Survivor Benefits, Education Benefits, Vocational Rehabilitation, Burial Benefits, Health Care, Veterans Homes, Home Loans, and Life Insurance).	M-F (510)577-1926 https://www.alamedasocialservices.org/public/services/veterans_services/index.cfm
Alzheimer's Association	Alzheimer's Association provides information on Alzheimer's disease and dementia symptoms, diagnosis, stages, treatment, and care and support resources, including support groups.	(925) 284-7942 https://www.alz.org/
Alzheimer's Services of the East Bay (ASEB)	ASEB operates three state-licensed Adult Day Health Care (ADHC) programs at centers in Berkeley, Hayward, and Fremont. ADHC is an alternative to full time care and allows loved ones to remain at home and in the community. ASEB additionally offers an Early Stage Program for individuals with mild cognitive impairment or dementia, and support groups	(510) 644-8292 http://aseb.org/#
Area Agency on Aging (AAA)	AAA works to coordinate existing programs and develop new services for older adults in the county by partnering with community organizations and pursuing funding resources to enhance or create new programs. AAA also provides an Information and Assistance Line (I&A) offering information, support, and referrals.	AAA Information and Assistance Line: (800) 510-2020 or (510) 577-3530 https://www.alamedasocialservices.org/public/services/elders_and_disabled_adults/area_agency_on_aging.cfm
City of Fremont Family Caregiver Support Program	The Fremont Family Caregiver Support Program provides a range of services and supports (counseling, educational training, assistance accessing services, etc.) and is available to residents of the Tri-City area who are at least 60 years old, and/or are providing care for someone 60 or over.	(510) 574-2041 https://www.fremont.gov/223/For-Caregivers
Coalition for Compassionate Care of California (CCCC)	CCCC activities include education, training, advocacy, consulting, and resources in areas ranging from advance care planning, end of life issues, Physician Orders for Life-Sustaining Treatment (POLST), and palliative care.	(916) 489-2222 https://coalitionccc.org
Comfort Homesake	Comfort Homesake is a multi-generational, multi-ethnic, and multi-faith organization that provides advance health health planning programs to families, professionals, healthcare providers, and community members.	(510) 686-1898 https://comforthomesake.com/about-us

Resource	Information	Contact: Phone/Website
DayBreak Adult Day Care Centers	DayBreak helps seniors, persons with disabilities, caregivers, and professionals find high-quality adult day care programs and services in Alameda County.	(510) 834-8314 http://daybreakcenters.org/
Family Caregiver Alliance (FCA)	FCA works to improve the quality of life for caregivers and the people who receive their care. Services include family caregiver assessment and consultation, information, care planning, education and skills training, wellness programs, respite services, and legal/financial consultation vouchers.	(800) 445-8106 toll-free; (415) 434-3388. https://www.caregiver.org/
Hand-in-Hand: Domestic Employers Network	Hand in Hand is a national network of employers of nannies, housecleaners and home attendants working for dignified and respectful working conditions that benefit the employer and worker alike. Hand in Hand collaborates with workers to change cultural norms and public policies.	(510) 590-8253 Domesticemployers.org
Health Insurance Counseling & Advocacy Program (HICAP)	HICAP provides free and unbiased community education, individual counseling, and advocacy to Medicare beneficiaries about Medicare, Supplemental Insurance, Prescription Drugs and Medicare Advantage plans, Long Term Care Insurance, Medicare Appeals, and Low Income Assistance programs.	Alameda County: 1-800-510-2020, http://www.lashicap.org/hicap
In-Home Supportive Services (IHSS)	IHSS provides assistance to MediCal eligible aged, blind and disabled individuals who are unable to remain safely in their own homes without this assistance. IHSS is an alternative to out-of-home care.	Central County: (925) 363-3677 East County: (925) 522-7673 West County: (510) 231-8299
Legal Assistance for Seniors	Legal Assistance for Seniors in Alameda County works to ensure the independence and dignity of seniors by protecting their legal rights through education, counseling, and advocacy.	(510) 832-3040 https://www.lashicap.org/
Long-Term Care Ombudsman Program Alameda County	The Ombudsman Program ensures that residents of long-term care facilities are receiving the services to which they are entitled, including quality care. All services are free and confidential. Ombudsman services in long-term care facilities include but are not limited to the following: receive and resolve complaints, misunderstandings and grievances; monitor conditions of care; solve problems with meals, finances, abuse, medications, lack of activities, etc.	Working Hours Line: (510)-638-6878 After Hours Crisis Line (800) 231-4024 https://www.alamedasocialservices.org/public/services/elders_and_disabled_adults/ombudsman.cfm
Meals on Wheels of Alameda County	Meals on Wheels of Alameda County serves as an umbrella organization to the five independent Meals on Wheels delivery programs throughout the county, which prepare and deliver nearly 3,200 meals to homebound seniors every delivery day to health and wellness.	(510) 777-9560 https://www.feedingseniors.org/about
State of California Employment Development Dept.	Paid Family Leave (PFL) provides benefits to individuals who need to take time off work to care for a seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner.	https://www.edd.ca.gov/disability/paid_family_leave.htm
United Seniors of Oakland and Alameda County (USOAC)	USOAC is a grassroots, multi-ethnic, intergenerational nonprofit organization focused on issues of concern to Alameda County seniors and their allies. USOAC utilizes techniques to educate, mobilize and enable seniors and their supporters to address the issues that affect their quality of life.	(510) 729-0852 https://www.usoac.org/

Convening Planning Committee Members & Discussion Facilitators

Convening Planning Committee Members	Discussion Facilitators
<ul style="list-style-type: none"> • Marilyn Ababio, Comfort Homesake • Erich Bagen, Stupski Foundation • Andrea Dodge, Alameda County Health Care Services Agency • Cynthia Carter Perrilliat, Alameda County Care Alliance • Leah Eskenazi, Family Caregiver Alliance • Rezsín Gonzalez, Alameda County Department of Adult & Aging Services • Grace Liu, Alzheimer's Association • Monique Parrish, LifeCourse Strategies • Bill Pelter, Ability Now Bay Area • Micheal Pope, Alzheimer's Services of the East Bay • Frishta Sharif, Caregiver Support Program, City of Fremont <p>Additional assistance from: Rachel Creed, Al Martinez and Lana Sheridan from Family Caregiver Alliance.</p>	<ul style="list-style-type: none"> • Rezsín Gonzalez, Alameda County Department of Adult & Aging Services • Amanda Hartrey, Family Caregiver Alliance • Christina Irving, Family Caregiver Alliance • Hyun Kim, Public Authority, IHSS Alameda County • Grace Liu, Alzheimer's Association • Jo McCord, Family Caregiver Alliance • Jasmin Ng, Family Caregiver Alliance • Bill Pelter, Ability Now Bay Area • Adriana Sanchez, Family Caregiver Alliance • Donna Schempp, Family Caregiver Alliance • Frishta Sharif, Caregiver Support Program, City of Fremont • Norell Walker, Family Caregiver Alliance



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