Your Relationships

Latino Caregiving Issues

Just as with the overall population in the US, diversity among senior caregivers and care recipients here is increasing rapidly. Today, about one in six seniors is a member of a racial or ethnic minority. By the year 2030, this proportion will increase to one in four. By then, the US white senior population is projected to increase by 81% but the Latino senior population will grow by 328%. All senior caregivers and care recipients will be affected by these changes directly or indirectly. Here are some considerations for helping to provide quality caregiving for Latino seniors:

- Poverty may be a significant issue for many senior Latinos. Many of those who have worked in the US have not been able to participate in Social Security or employer-supported pension plans. A recent study indicated that senior Latino women who lived alone or with nonrelatives had the highest poverty rates of any senior minority group (38%).
- About one in three Latino baby boomers are caring for a parent, compared to one in five white boomers. Among seniors age 70 and older who require care, whites are most likely to receive help from their spouses; Latinos are most likely to receive help from their adult children; and blacks are most likely to receive help from a nonfamily member.
- Senior Latino caregivers seem to experience greater psychological distress, such as depression, for reasons that are not clear.
- A common assumption is that Latino social networks are well-developed and are a potential source of senior caregiving. Recent studies, however, show that Latino caregivers identify fewer social support networks (than majority group caregivers) and are less likely to have a caregiver available in the future to help them.
• Latinos (and most other racial/ethnic minorities) tend to receive a lower quality of healthcare, compared to non-minorities. This is true even when factors such as insurance status and income are the same, and it is true across many disease conditions.

For many Latinos in this country, limited English language skills (reading, writing and speaking) are a major barrier in receiving and providing quality caregiving. Verbal or written recommendations from an English-speaking healthcare provider may be misunderstood, especially when the healthcare provider is rushed, and many older Latino seniors are hesitant to speak up and ask for clarification. Younger family members may have a better grasp of English, but many seniors (Latino and otherwise) are reluctant to depend on their children or grandchildren for information that is often personal and sensitive.

Many Latino seniors share beliefs and preferences about what is “proper” with other persons their age. For example, women have historically provided most of the hands-on care of family members in need. Latino men are often uncomfortable with, or simply don’t know how to, provide personal hygiene care to their wives who may need assistance. These same men often resist seeking outside help because of modesty or embarrassment.

A strong belief among many Latinos is "compromiso," a sense of obligation to support extended family members. When family members are nearby and in a position to provide such support, such caregiving can be wonderful. When this is not the case, or when younger generations don’t share the value of "compromiso," disputes about family caregiving can arise.

Latinos tend to respect the authority of physicians, even more so than the majority US population. Physicians who are aware of this can try to make sure that they fully understand not only the facts of a caregiving situation, but also the values and attitudes in Latino families.

“Cultural competence” is a term being used more and more to refer to the ways that we interact effectively and respectfully with all persons. As the US grows ever more diverse, our senior caregiving can be enhanced by building our cultural competence within all our families and communities.


### Your Resources

**Remain Vigilant to Avoid Telemarketing Scams**

The National Do Not Call list has helped thousands of Georgians to significantly reduce annoying telemarketing
calls at home. Registration is free, lasts for five years, and prohibited calls stop within about three months. If you have not signed up, it’s not too late. Call a toll free number (1-888-382-1222) or visit http://www.ftc.gov/donotcall to register. Use only this number or website as scammers are pretending to represent the National Do Not Call List with fake web sites and other ruses to gain personal information about you.

Signing up for the National Do Not Call list eliminates most but not all telemarketing calls. Charities, political organizations, surveyors, and companies you have existing relationships with can still legally call. Just because an organization is exempt from the list, however, doesn’t mean their intentions are good.

When you are on the National Do Not Call List, be very alert about any telemarketing calls that you may receive. Scam operators will still call, as they are very unlikely to know who is and isn’t on the National Do Not Call list. Even if you are not on the list, you can still ask any telemarketer to stop calling -- they are legally required to do so or face an $11,000 fine.

Con artists will always look for opportunities to take advantage of consumers over the phone. Some simple tips can help you to thwart the attempts of telemarketers who may try to rip you off. When you answer a telemarketing call, stay calm and make good decisions. Remember that if it sounds too good to be true, it probably is. High-pressure sales tactics and insistence on an immediate decision are also signs of a scam. The best protection against telemarketing fraud is common sense.

Make sure the person you are talking with represents a legitimate organization. Never rely on phone numbers or web sites provided by a caller. It is much wiser to check directory assistance or other official sources for a phone number or web site URL. If you need to research the organization, don’t hesitate to do so. Ask the caller to mail you information. Never give out any personal information such as bank account numbers, credit card numbers, or your social security number.

If you are on the National Do Not Call list and receive an illegal call, report it to http://www.donotcall.gov or call the toll free number 1-888-382-1222. If for any reason you feel like you are the victim of telemarketing fraud, take action. Contact the National Consumer's League at http://www.fraud.org, and call the Georgia Governor’s Office of Consumer Affairs at 1-800-869-1123. Do not allow yourself to be a victim – take advantage of the opportunities you have to protect yourself as a consumer.

Brad Hobby, HACE Student Intern for Michael Rupured
Your Health

“Low-Carb” Foods - The Answer to Weight Loss?

If you’re looking at “low-carb” foods to help you lose weight, look a little more carefully. They may not have the effect you have in mind.

The most popular low-carbohydrate diets are the Atkins and South Beach diets, both of which severely restrict the number of grams of carbohydrate for weight loss. No potatoes, fruits, bread, or milk - but lots of meat, fish, poultry, cheese and eggs along with some vegetables and plenty of oil, butter, and salad dressings. It’s not what you typically associate with a healthful, weight loss diet. Many attribute the weight loss to the lack of variety in the diet - after all, how much meat can you eat day after day and forgo whole groups of foods?

A few years ago, along came the avalanche of low-carb processed foods in health food stores, on the internet, and on supermarket shelves. Many of the “low-carb” products like pasta, cookies, ice cream and snacks were “Atkins Approved.” Some food manufacturers began making up their own labeling terms to try to sell their products to the growing number of low-carb food buyers. Stated on the front of food packages were claims that these products had a low number of “net carbs,” “impact carbs,” or “effective carbs.” Consumers were advised to ignore the grams of Total Carbohydrate on the Nutrition Facts label. The grams of “net carbs,” “impact carbs,” or “net effective carbs” are calculated by subtracting the grams of sugar alcohols and fiber from the grams of Total Carbohydrate. These manufacturers state that sugar alcohols and fiber should not be counted because they have little impact on blood sugar.

So, instead of eating a steak and salad for dinner, many people began eating the steak and salad along with the “low-carb” pasta and “low-carb” cookies - and perhaps a “low-carb” beer or two. The diet was no longer as rigid and monotonous. With more variety, people were eating more. Along with the extra calories came less weight loss.

Are “low-carb” products really lower in calories? Unfortunately, many people incorrectly assume that along with the “disappearing” carbs, calories are also reduced. A recent study by Consumer Reports showed that many “low-carb” products are actually higher in calories and fat than the regular product. Right now there are no regulations by the Food and Drug Administration on the use of low-carbohydrate food claims, although they are expected in the near future.

How do the carbohydrates magically disappear in “low-carb” foods? In some
cases, high-fiber ingredients replace refined wheat flour. Sugars are often replaced with sucralose (Splenda®) or sugar alcohols. Nuts and other fats may be added. Note that manufacturers then market their products as lower in carbohydrate by subtracting the grams of carbohydrate in these ingredients to get their “net carbs,” “impact” carbs, or “net effective carbs.” In some cases, portion sizes are made smaller to reduce the carbohydrate in a serving. Some foods that used to be “sugar-free” and never contained carbohydrate are now being labeled “low carbohydrate.” Many “low-carb” processed foods have a “cardboard” taste, contain more calories and fat, and cost 2-4 times as much as the regular products.

The popularity of “low-carb” products is a trend just as fat-free products were years ago. People found out then that eating a box of fat-free cookies did not help them lose weight. Now they’re finding out that “low-carb” cookies and snacks won’t either. The bottom line is that calories still count.

1. Preheat oven to 400 degrees. In large nonstick skillet, heat oil over medium heat. Add vegetables. Cook, stirring often, 5 minutes or until slightly softened. Remove from heat and toss with tarragon or dill, salt and pepper.

2. Fold four 12-inch sheets of aluminum foil in half. Unfold and place a piece of salmon in center of each sheet, along the fold. Place 1/4 of the vegetable mixture over each piece of salmon. Fold foil over salmon and vegetables. Tightly seal. Bake 12-18 minutes or until salmon is cooked through.

Make 4 servings.
Exchanges: 2 vegetables, 2 medium-fat meat

- Carbohydrate 9 grams
- Protein 18 grams
- Fat 12 gram
- Fiber 2 grams
- Sodium 82 milligrams


Herbed Salmon with Vegetables

2 teaspoons olive oil
1 medium onion, sliced (about 1 1/2 cups)
2 carrots, cut into 2-inch matchsticks
2 stalks celery, cut into 2-inch matchsticks
2 teaspoons chopped fresh tarragon or dill
(or 1/2 teaspoon dried)
Salt and pepper, to taste
12 ounces salmon fillet, skin removed, cut into 4 pieces

Cooperative Extension Service  The University of Georgia
Dear Friend:

SENIOR SENSE is a quarterly publication provided by your local county Extension Service office. It is prepared by Extension Family & Consumer Sciences specialists at The University of Georgia specifically for the educational needs of older Georgians.

Please contact your local Extension Service office for more information on these and related topics.

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