



# SPOP

Service Program for Older People

2022-2023 | ANNUAL REPORT

# SNF Nostos Conference



## Letter from the CEO and President

*Nancy Harvey, CEO Speaking at the SNF Nostos Conference in Athens, Greece*

*We have been reminded throughout this fiscal year that the pandemic has had a profound and lasting impact on older adults.* Our entire region is experiencing a mental health epidemic, and SPOP has seen a marked increase in both the number of referrals and the severity of symptoms, including urgent cases of depression, suicidal or homicidal ideation, substance misuse, complicated grief, and symptoms associated with trauma.

At SPOP, our highest priority has been to expand access to treatment and meet this urgent need. To that end we:

- Opened five new clinic satellite offices, bringing us to a total of 24 satellites across three boroughs of New York city;
- Offered a choice of treatment via telehealth or in-person sessions at our offices and community-based satellite locations;
- Provided intensive case management services to high-need clients through our STRIVE program;

- Offered training and outreach through the faith community;
- Fast-tracked high-acuity cases and coordinated behavioral healthcare with other community-based supports including medically-managed addiction treatment;
- Provided skills-based training to over 350 individuals who work with an older population; and
- Participated in the development of a New York State Master Plan on Aging.



Left to right: Meaghan Atkinson, Lois Akner

A high point of the year was the opportunity to present at the Stavros Niarchos Foundation's SNF Nostos Conference on mental health in Athens, Greece in June. Our topic was *Aging-Plus: Addressing Layers of Complexity in an Older Person*, and we were the only agency that focused specifically on the needs of older adults. The conference brought together more than 2,000 participants from around the world for three days of conversation about mental health.

It was also a pleasure to announce Lina Avalo as the first recipient of an award from the *Nancy Harvey Initiative*, which supports students and emerging leaders in the field of social work. Lina is a bilingual member of our intake team and has just completed her first year at the Silberman School of Social Work. It is an honor to be able to foster her career and studies in aging and mental health.

Looking ahead, our goals for the coming year are to advocate for the importance of mental health

care in supporting the well-being and independence of older adults, further expand our capacity to provide treatment for adults with symptoms of trauma or substance misuse, and explore new strategies to increase access to age-sensitive and culturally-responsive mental health treatment.

We extend our gratitude to the entire staff and Board of Directors of SPOP, who have worked tirelessly on behalf of older New Yorkers.

  
Nancy Harvey, LMSW CHIEF EXECUTIVE OFFICER

  
Meaghan Atkinson PRESIDENT





The mission of Service Program for Older People is to enhance the quality of life of older adults and to foster their independent living through the delivery of comprehensive mental health and supportive services, advocacy and education.

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The SPOP behavioral health clinic offers community-based service including individual, couples or group psychotherapy; psychiatry; assessments; and processing of all inquiries and referrals. Based at our central office, the clinic also offers appointments via telehealth, at satellite sites located throughout Manhattan, Downtown Brooklyn, and the Bronx, and in the home for clients with a physical or psychiatric disability.



## *Clinic, Community Programs, Group Services, & Intake*

Our staff is comprised of psychiatric social workers, psychiatrists, psychiatric nurse practitioner, and intake specialists; many are proficient in a second language. Clinicians are all trained in treating older adults and have subspecialties in cognitive behavioral therapy, dialectical behavior therapy, family/couple therapy, narrative therapy and other modalities. Intake staff respond to over 1,600 referrals and inquiries each year from hospitals, older adult centers, aging services providers, and individuals and family members. We screen incoming clients for general health, behavioral health disorders, and specialized situations such as caregiver distress or substance misuse. We also assess clients for social determinants of health including housing, food insecurity, social isolation and economic insecurity, and we connect them to other service providers to ensure that their concrete needs are met in tandem with behavioral healthcare.

This year we focused on strategies to address behavioral health needs that have emerged since the pandemic. The behavioral healthcare community has become much more focused on the impact of trauma and strategies to provide trauma-informed care

and trauma-centered treatment for older adults. Here at SPOP we have learned that over 90% of our clinic population has experienced at least some trauma, and many have a history of multiple traumas related to sexual abuse, racial discrimination, violence, or other experiences. Recognizing this need, we concentrated on building clinical skills in this area, including somatic techniques and dialogue exercises, which enable us to address a client's overall history of chronic or complex trauma.

**Community Programs** focus on a network of more than 20 older adult centers and aging services providers that host licensed clinic satellite offices. This year SPOP was the Manhattan provider for the New York City DGMH (DFTA Geriatric

Mental Health) program, with responsibility for services at 18 sites throughout the borough. Working with a hybrid of in-person and telehealth services, our staff provides therapy, screenings, educational programs, and informal engagement activities at these sites. We also offer LGBTQ+ specialized treatment at the Edie Windsor SAGE Center in Manhattan and the SAGE Bronx Center at Crotona Pride House. At VISIONS at Selis Manor, we offer specialized psychotherapy for older adults with vision loss or impairment.

**Group Services** encompass non-clinical peer-led Bereavement Support, offered free of charge for adults of all ages, and clinical therapy groups for clients with a shared mental health experience.



This year we expanded Group Services to offer more than 20 therapy groups on various topics, including managing anxiety, living with chronic pain, caregiver distress, and de-cluttering. The groups all met using telehealth and were effective in increasing social connectedness and fostering compassionate support among clients with a shared experience. We also ran six ten-week peer-led bereavement groups for a total of 46 participants.

**Our Intake department** is the first stop for all incoming clients and our staff, most of whom are bilingual, are trained to guide individuals through the process while providing reassurance and listening closely for signs of urgent need. We use standard screening tools to assess for symptoms and fast-track all high-acuity cases. We also use a proprietary tool to assess for social determinants of health, and we draw on a database of city-wide resources to refer incoming clients for additional supports such as meals, housing, financial assistance, transportation, socialization opportunities, or case management services.

## *During 2022-23 we:*

- Completed 24,000 client sessions
- Provided professional services to 856 individuals
- Processed over 1,600 referrals and inquiries
- Assessed more than 300 individuals for social determinants of health

We distributed a confidential consumer satisfaction survey to all clients, and learned that:

- 94% of respondents report that they are better able to manage daily challenges
- 92% are more likely to call SPOP than go to a hospital emergency room when they experience mental health symptoms
- 89% feel that they are better prepared to manage a crisis
- 86% feel more independent

*SG, age 87, came to SPOP two years ago after her husband died as a result of Covid. She was struggling with grief, panic attacks, and over-reliance on alcohol for self-medication. We paired her with a therapist trained in complicated grief and co-occurring substance use disorders, and she also participated in group therapy. Treatment focused on processing her grief and developing a plan to move forward with her life. The therapist also encouraged her to enroll in a 12-step program and helped her to learn techniques to manage anxiety. During the course of treatment, SG was able to move beyond grief and develop new coping skills. She now regularly attends AA meetings and is participating in several professional and community activities. She reports that she feels more stable and independent.*

*NG, age 72, was referred to SPOP by her shelter caseworker to address depression. She was desperate to find stable housing but was unable to complete applications or adhere to appointments. She was in long-term recovery from cocaine dependence and had come to equate “not doing/not moving” with safety from relapse – with the result that she slept most of the day. Working with her therapist, she gradually opened up about chronic and complex race-based trauma that she had experienced throughout much of her life. Her clinician used trauma-centered treatment including EMDR (Eye Movement Desensitization and Reprocessing) to create imagery that restored a “peaceful place” that she could envision, and which helped her build some distress tolerance when overwhelmed. She also started working on a Racial Stress Recovery plan and felt more motivated to complete tasks. She has recently signed a lease for a new apartment.*

*FL, age 72, participated in a SPOP bereavement group this year following the death of her sister. She had been part of a spousal group the previous year after the unexpected death of her husband. When her sister died, she felt distraught and alone in her grief. She remembered how helpful the SPOP spousal bereavement group had been, and the friends she’d made there, and decided to join a second time for this most recent loss. She found it to be helpful and supportive in dealing with her sister’s death.*





# Personalized Recovery Oriented Services/PROS

The *Personalized Recovery Oriented Services (PROS)* program provides group-based rehabilitation support to older adults diagnosed with serious mental illness. Our program is the only one of its kind in New York State and is defined by three key features:

- We focus on recovery and rehabilitation, new concepts for many adults whose lives have been defined largely by their illness.
- Participants are encouraged to attend on a part-time basis and while participating in other community-based activities and programs.
- Participants play an active role in the design and structure of groups – which means they gain skills in collaboration, planning and communication.

The PROS population is marginalized on multiple levels. For most participants this is their first experience in a recovery-oriented setting after a lifetime of care in a “maintenance” environment. We use a model that focuses on goal-setting and acquisition of life skills needed to achieve individual goals.

## *This year the PROS program*

- Completed over 7,200 services for participants
- Reduced hospitalization rates year-over-year
- Provided group support in person and via telehealth
- Offered three full days of on-site programming each week, including resumption of congregate meals
- Distributed food-only grocery store gift cards to low-income participants
- Offered groups on Giving Back – volunteer opportunities in the community; Self-Expression Through Story; Workplace Readiness

*BK was admitted to SPOP's PROS program last winter following a hospitalization for treatment after a suicide attempt. He was experiencing symptoms of anxiety and depression, and he stated that he felt like a failure because he was fired from his job as an accountant. He was initially reluctant to engage in PROS but began coming in and connecting to his group counselors and others. The counselor, a peer specialist, supported BK through the lens of his own lived experience of working and having a mental health relapse and putting in the recovery work to return to the workforce.*

*As BK began to participate more fully, his posture, grooming and demeanor improved, he was more talkative, and he began to focus on his goal to re-enter the workforce. He participated in our employment group and in drama therapy, where he worked on communication skills. With some ups and downs in finding the right fit, BK's success is not measured by his pursuit of employment, but rather in learning the skills to realize what does and does not work for him. He reports feeling that he is "back in the driver's seat" and is able to let go of feelings that he is "not good enough" at accounting. He is now focusing on other skills that he can apply in a workplace setting.*



*GG, 67, was referred to PROS in 2019 after his continuing day treatment program permanently closed. He had been affiliated with his former program for many years and admittedly struggled with the transition to the goal-focused PROS model. He stated that change and adjustment were difficult for him and would often connect it to his diagnosis of Obsessive Compulsive Disorder and legal blindness. He was resistant to engage at first and ultimately ended up selecting a goal focused on making meaningful social connections outside of PROS.*

*With the onset of COVID-19, this program shifted from in-person to virtual offerings for a short period of time. This shift allowed GG to develop his technology skills and become less resistant to change and*

*adjustment. He worked on enhancing his frustration tolerance skills and, with the support of his recovery counselor, who is a certified peer specialist, he connected to other community supports available to him both in person and virtually. He graduated in early 2023 after successfully engaging in an older adult center with an emphasis on visual impairment support services. He states he was thrilled to make connections there and felt "at home." During his PROS graduation address he stated, "I felt like I needed permission to leave and ultimately what this program helped me realize is that I am the one in the driver seat. I am sometimes my biggest obstacle and when I accepted that, I moved out of my own way and embraced change."*





## *Community Support and Education*

This department is comprised of Training services and our STRIVE program, a five-year Geriatric Services Demonstration Project funded by the NY State Office of Mental Health, which provides services to support aging in place.

This year we provided training to 350 individuals in New York City, all with a focus on aging and mental health. The pandemic has brought new attention to the mental health needs of older adults, and we have responded with expanded training opportunities in this area. Highlights of the year include the following:

- We completed the first year of a program, funded by the Altman Foundation, to provide mental health training within Black/African-American churches in Manhattan
- In partnership with Rutgers University, we offered a four-part series of learning collaboratives on creating psychiatric rehabilitation programming for older adults
- We provided self-care-training for staff at other agencies working in the aging sector, funded by The Fan Fox and Leslie R. Samuels Foundation, with a goal to address staff burnout

■ We presented a series of trainings to support emotional wellness for the membership of LiveOn NY on these topics:

- Loss and Bereavement
- Gathering Again: The Challenges of “Re-Entry”
- Hands-On Self Care
- Identifying Mental Health Needs in Older Adults

■ We launched a training series for SPOP staff, including New York State-accredited continuing education offerings

**The STRIVE program** is a three-way partnership among SPOP, Metropolitan Center for Mental Health (MCMH), and NYC Aging (formerly DFTA); drawing on the resources of the three agencies. The project provides

case management services, aging services, mental healthcare, and treatment for substance misuse. After a ramp-up phase, the project began client work in the fall of 2022, with referrals from the SPOP clinic and MCMH’s substance use program, FAIR (Families and Individuals in Recovery). We have admitted 13 clients during this roll-out phase; after admission and 90-day follow-up screenings, we have seen a decrease in scores on anxiety, depression and loneliness. The work has largely focused connecting clients to “age-well” services and supports for aging in place. The most urgent areas of need are housing, legal assistance, technology, and finding connections for community and socialization.





# Financial Support

SPOP extends gratitude to the following elected officials, government agencies, and institutional funders that provided financial support in this year.

Manhattan Borough President Mark Levine  
New York City Council Member Shaun Abreu  
New York City Council Member Gale A. Brewer  
New York City Council Member Keith Powers  
New York City Council Geriatric Mental Health Initiative  
New York City Department for the Aging  
New York City Department of Health and Mental Hygiene  
New York State Assemblymember Daniel J. O'Donnell  
New York State Senator Liz Krueger  
New York State Office of Mental Health  
New York State Department of Health, Child, and Adult Food Care Program

Altman Foundation  
Amazon Smile Foundation  
Rose M. Badgeley Residuary Charitable Trust  
Barker Welfare Fund  
Vladimir and Araxia Buckhantz Foundation  
Florence V. Burden Foundation  
Columbia Community Service  
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Metzger-Price Fund, Inc.  
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# SPOP Staff

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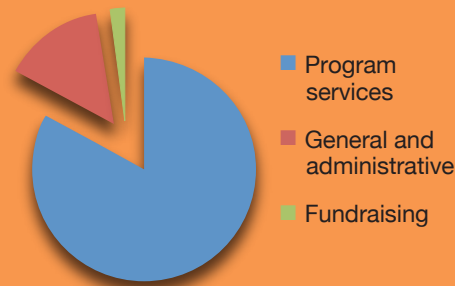
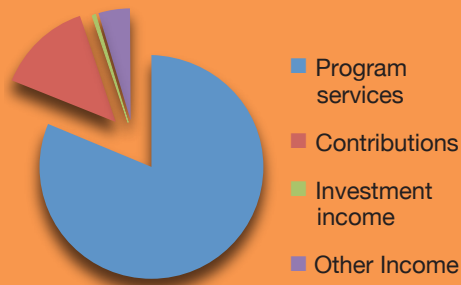
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 Chief Administrative Officer  
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 Senior VP for PROS  
 Medical Director  
 Senior VP for Community Programs  
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 Senior VP for Clinical Services  
 Bilingual Psychiatric Social Worker  
 Executive Manager  
 IT Junior Tech  
 Intake Navigator/MSW intern  
 Psychiatric Social Worker  
 Psychiatric Social Worker  
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 Recovery & Vocational Specialist  
 Psychiatric Social Worker  
 Peer Specialist  
 Program Analyst  
 Senior Social Worker  
 Bilingual Case Opener  
 Psychiatric Social Worker  
 Training Coordinator  
 Recovery Specialist  
 Psychiatric Social Worker  
 Psychiatric Social Worker  
 Psychiatric Social Worker  
 Clinic Operations Coordinator  
 Bilingual Receptionist  
 Maintenance and Housekeeping  
 Bilingual Rehab Aide  
 Psychiatric Social Worker  
 Administrative Specialist  
 Bilingual Senior Social Worker  
 Psychiatric Social Worker  
 Psychiatric Social Worker  
 Executive Assistant  
 Bilingual Psychiatric Social Worker  
 Psychiatric Social Worker  
 Psychiatric Social Worker

# Financial

Year Ended June 30, 2023



## REVENUE

|                                  |                    |
|----------------------------------|--------------------|
| Program services                 | \$5,724,585        |
| Contributions                    | \$568,059          |
| Investment income                | \$77,261           |
| Interest income                  | \$33,587           |
| Other income                     | \$160,610          |
| <b>Total revenue and support</b> | <b>\$6,565,102</b> |

## EXPENSES

|                               |                    |
|-------------------------------|--------------------|
| Program services              | \$5,059,389        |
| General and administrative    | \$818,710          |
| Fundraising                   | \$100,292          |
| <b>Total expenses</b>         | <b>\$5,978,391</b> |
| Net assets, beginning of year | \$4,544,093        |
| Net assets, end of year       | \$5,130,804        |

A complete copy of the audited financial statement for Service Program for Older People, Inc. may be obtained by writing to SPOP, 302 West 91 Street, New York, NY 10024 or the NYS Dept. of State, 41 State Street, Albany, NY 12231.

Credits Editor | Janet Rosenberg Design | Annette Geyer-Leverington  
Photo credits | Ben Asen Photography, Centre for Aging Better Cover Art | Sandra Štikane

## Offices & Clinic Satellite Sites

SPOP Main Office, Clinic, and Bereavement Support  
302 West 91st Street, New York, NY 10024

SPOP PROS/Personalized Recovery Oriented Services  
188 West 88th Street, New York, NY 10024

### Clinic Satellite Sites:

#### EAST HARLEM

- Leonard Covello Senior Center, 312 East 109th Street

#### LOWER EAST SIDE/CHINATOWN

- Manny Cantor Center, 197 East Broadway
- Mott Street Senior Center, 180 Mott Street

#### EAST VILLAGE

- Sirovich Senior Center, 331 East 12th Street

#### YORKVILLE/UPPER EAST SIDE

- Carter Burden Network, 415 East 74rd Street
- Isaacs Center, 415 East 93rd Street
- James Lenox House, 49 East 73rd Street
- Lenox Hill 415 East 74rd Street, 343 East 70th Street

#### ROOSEVELT ISLAND

- Carter Burden Roosevelt Island Senior Center, 546 Main Street

#### MIDTOWN/CHELSEA

- The Edie Windsor SAGE Center, 305 Seventh Avenue
- Encore Community Services, 239 West 49th Street
- Project FIND/Woodstock Neighborhood Senior Center, 127 West 43rd Street
- VISIONS at Selis Manor Senior Center, 135 West 23rd Street

#### UPPER WEST SIDE

- Project FIND Hamilton House, 141 West 73rd Street
- Red Oak Senior Center, 135 West 106th Street

#### WASHINGTON HEIGHTS

- Riverstone Senior Center, 99 Fort Washington Avenue

#### BROOKLYN

- Heights and Hills, 81 Willoughby Street
- GRIOT Circle, 25 Flatbush Avenue

#### BRONX

- SAGE Center Bronx, 1784 Prospect Avenue