

People Working Cooperatively Service Learning Assignment

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People Working Cooperatively (PWC) is a nonprofit organization in Cincinnati, Ohio with the mission of providing services to improve health and safety for low-income homeowners so that they can remain in their homes and live independently as long as possible. Their services include critical home repairs, accessibility modifications, home safety inspections, home safety education, and fall prevention classes for the elderly. These services address all social determinants of health that encompass and contribute to home safety and security. For example, lead exposure is a known contributor to morbidity and mortality among both adults and children. Given the age of Cincinnati, lead is a material known to be present in most homes. PWC not only provides free home lead inspections but also performs contracts through the city of Cincinnati to generate profit that directly supports their nonprofit work for low-income citizens.



Figure 1: People Working Cooperatively logo

Source: <https://www.pwchomerepairs.org/>

Most people that receive services from PWC are low-income individuals. Socioeconomic status is often a predictor of health, and worse overall health was a negative predictor of COVID-

19 prognosis. Because of the combination of the demographic served by PWC and the characteristics of the virus, PWC was unable to provide services for a substantial portion of those who needed them. PWC transitioned to online services for a small portion of their wider selection but was limited in their work. Because of their limited services and number of customers, it was also more difficult for PWC to secure grants for funding.

PWC's work is supported in a variety of ways. Primarily, PWC receives grants and donations from the government or individuals. PWC also partners with a wide array of other nonprofit organizations and charity foundations, as well as other organizations all around the greater Cincinnati area. Some notable partners of PWC include TriHealth, Cincinnati Children's Hospital, and the City of Cincinnati, but there are many more.

PWC addresses several social determinants of health, including housing availability, housing safety, transportation, and access to ways to stay active. The Stepping On course directed by PWC specifically addresses how to prevent falls at home in older adult populations. PWC addresses several other social determinants of health in their other educational courses and the work they do. Some of these social determinants of health that organizations like PWC and courses like Stepping On can help address include aging populations, lower socioeconomic status, limited access to technology, and limited access to transportation.

Aging populations face unique challenges when it comes to living healthy lifestyles. Older adults tend to have higher rates of medication complications and, on average, take longer to recover from illnesses and return to daily activities of living (Abdi et al., 2019). Aging populations tend to have more joint pain, muscle injuries, and chronic pain, which exacerbates lower rates of exercise and therefore increases struggles with strength and agility maintenance in older adults.

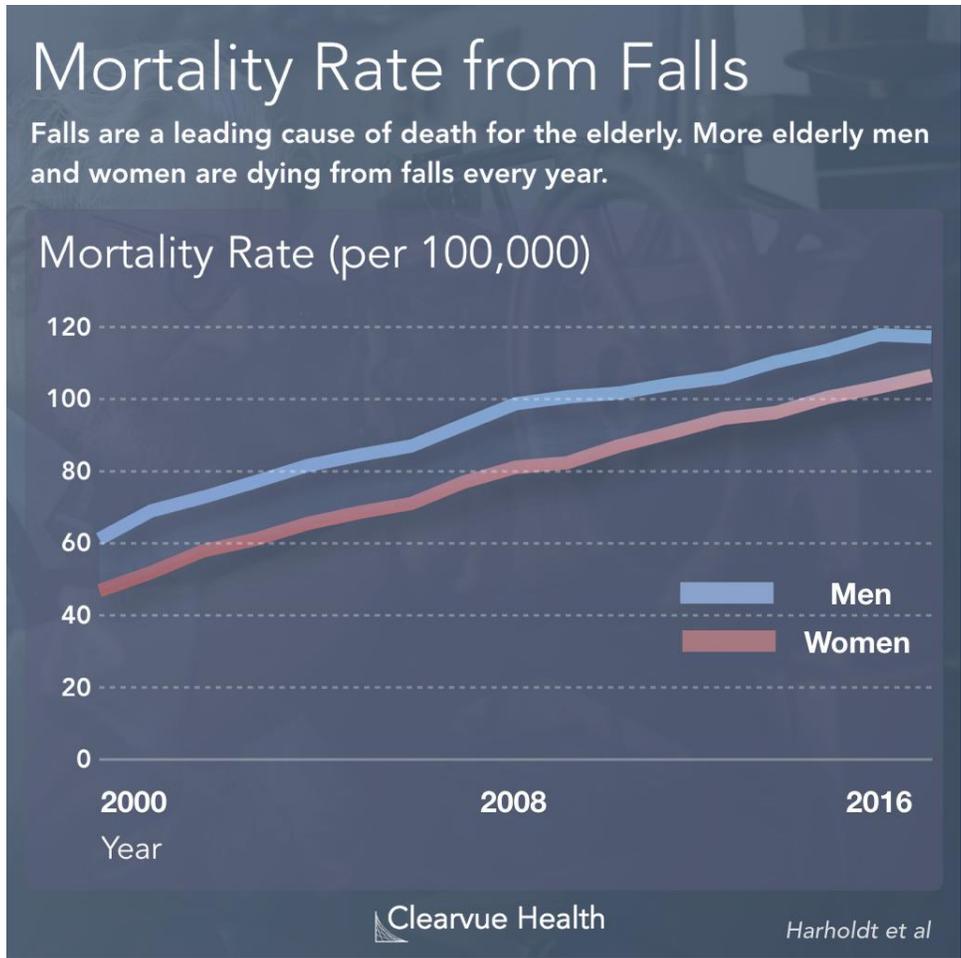


Figure 2: Increasing mortality rates for falls since 2000

Source: <https://www.clearvuehealth.com/b/fall-mortality-statistics/>

Another consideration of the population served is the socio-economic status. Individuals from lower socio-economic statuses face additional barriers to adequate safe housing and are more susceptible to injuries due to falls. PWC plays a key role in providing safe equipment, mobility exercises, and tips to prevent falls. Programs provided by PWC help low-income and elderly homeowners maintain their houses and ensure that their living spaces minimize the chances of accidental injuries. This goes beyond just home repairs by ensuring the spaces outside

and connecting to individuals' homes allow ease of access, addressing another social determinant of health being transportation access.

Another obstacle faced by individuals in seeking healthcare and preventative care is how easy internet resources are to navigate. The increasing prevalence of the internet in everyday life poses a unique challenge for populations who may not be able to navigate the complexities of internet-based healthcare delivery (Duplaga, 2021). As such, PWC is working to streamline their website and registration process. PWC aims to work with local physicians and other community organizations to increase awareness and access to vital services they provide, ensuring those who do not have easy access to the internet can still access the resources they need.

Another area where PWC contributes is by increasing access to transportation (Syed et al., 2013). This is done by providing reparations to stairs and adding structures such as ramps or handlebars which will help older adults get to their own transportation or transportation services offered by the city.

The U.S. has one of the highest costs of healthcare in the world. In 2021, U.S. healthcare spending was \$4.5 trillion, which averages about \$12,900 per person. However, the average cost of healthcare per person in other comparable countries is half this amount. Falls among older adults contribute to these expenditures, as falls affect 1 out of 3 older adults, costing the U.S. healthcare system 50 billion per year (Florence CS et al.). Preventative measures to reduce falls offer a valuable avenue to reduce healthcare expenditures within the U.S. and improve the health of the older adult population. Considerable literature examining fall prevention programs found that they are highly effective in reducing the frequency of falls and improving quality of life. In promoting fall prevention education, the financial burden placed on Medicare and Medicaid can

be eased, while also promoting good overall health and quality of life for people most at risk for falls.

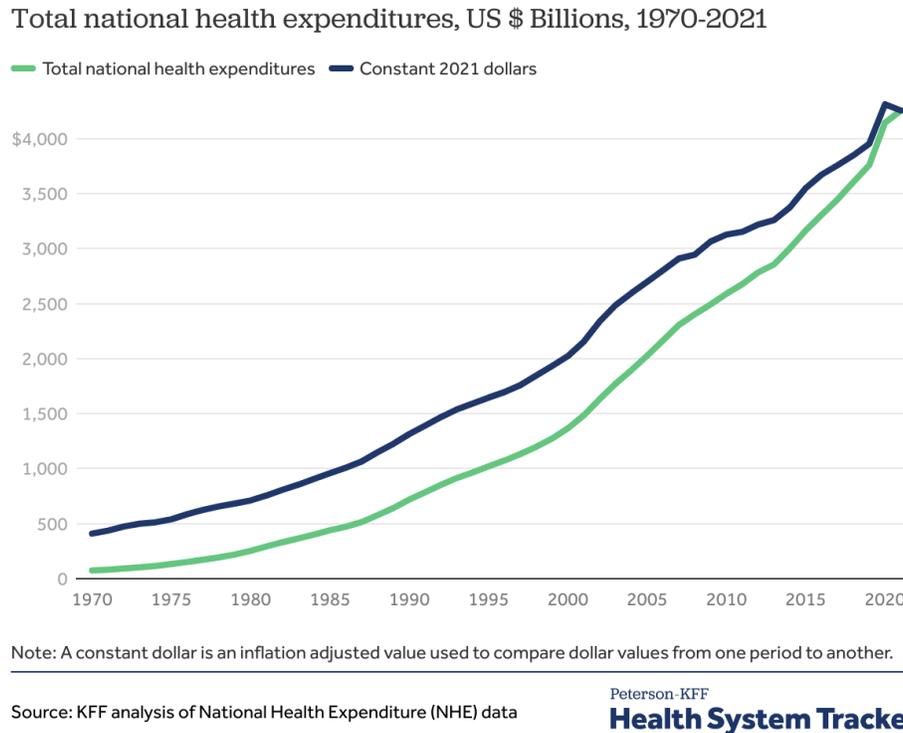


Figure 2: Data from Peterson-KFF highlighting the growth in health care expenditures since 1970

Source: <https://www.healthsystemtracker.org/chart-collection/u-s-spending-healthcare-changed-time/>

The services offered by Medicare and Medicaid are often not fully understood by the people they are meant to serve. Therefore, it is important to expand efforts to educate patients about what options exist for preventative medicine through Medicare and Medicaid. 60% of individuals who receive Medicare and fall do not receive any fall prevention information following the fall (Shumway-Cook et al. 2009). Through simple advertising efforts, there will be greater utilization of the services offered by these government programs.

Falls, even non-injurious ones, have a serious impact on the life and independence of older adults. In fact, “elderly patients hospitalized after a non-injurious fall were twice as likely to be institutionalized as those admitted for other medical conditions and had higher intermediate and long-term care services utilization during follow-up” (Seematter-Bagnoud 2006). These stats are alarming, but the language surrounding how we talk about falls matters. “Messages that convey independence and optimal health more effectively and are accepted” which may lead to higher compliance with fall prevention measures (Hughes et al. 2007).

Advocating for affordable housing is already a hot topic in social determinants of health, and we would like to extend this advocacy to affordable housing that is also universally accessible. The idea of universal design was first proposed by architect Ronald Mace to make accessibility an essential part of architecture so that modifications for equitable use are not needed. While the idea was proposed for people with disabilities, older adults, who often develop disabilities later in life, would benefit from universal design in housing as well. Fewer than 200,000 housing units in the U.S. are universally accessible, and few are affordable (Universal Design for Seniors and People with Disabilities, 2021). Pushing for governmental support for accessible and affordable housing would improve older adults’ ability to age in place and reduce their fall risks, lessening the government's burden of preventable healthcare costs.

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