

Building Healthy Communities: *Community Health Worker Impact on Older Adults in Texas*



Impact Evaluation Study by MHP Salud
August 2024

INTRODUCTION

Overview

This report details the impact of Community Health Worker (CHW) programming, including public benefits application assistance, for older adults ages 50 and over served by the national nonprofit organization MHP Salud in 2023. MHP Salud’s programming serving older adults is primarily focused on Hispanic/Latino individuals in the Rio Grande Valley (RGV) in Texas, though programming also reaches into other south Texas communities to serve this target population. Through quantitative and qualitative methods, this evaluation demonstrates the positive impacts of culturally relevant CHW programming on older adults’

financial stability and social determinants of health, details reasons for attrition and retention in CHW-led older adult programming, and suggests efficient, effective forms of CHW outreach among older adults to improve their access to public benefits. The goals of this impact evaluation are to contribute to the growing body of work on community-based health interventions, exemplify the integral role of the CHW profession, and ultimately improve financial stability and health outcomes for underserved populations such as the sample in this study.

MHP Salud and the Community Health Worker Profession

MHP Salud is a national nonprofit organization with more than 40 years of experience developing, implementing, and evaluating community-based, culturally tailored CHW programs and promoting the CHW profession through training and consultation services. Through our mission, ***we serve communities by embracing the strengths and experiences of individuals and families, engaging them to achieve health and well-being.***

CHWs are trusted members of the communities they serve and empower their peers through education and connections to health and social resources. CHWs provide unique insight into both the challenges and the resources that exist within their communities and promote cultural and linguistic responsiveness of health interventions in historically underserved communities.

MHP Salud’s community programs are led by CHWs and focus on a variety of health topics, including, but not limited to, aging services, application assistance for public safety net programs, insurance navigation, parenting education, and exercise and nutrition. This impact evaluation includes anecdotes from some of our CHWs about the specific programs they lead.



Impact Evaluation and Theory of Change

An impact evaluation demonstrates the “positive and negative, primary and secondary long-term effects produced by a development intervention, directly or

indirectly, intended or unintended.”¹ It also provides guidance for the necessary elements of an intervention for a specific group in a specific setting.²

1 (Development Co-Operation Directorate - OECD, n.d.)

2 (Peersman, n.d.)



Social support theory is the theoretical framework guiding CHW-led interventions; this theory purports that social support contributes to health and well-being.³ CHWs primarily provide two types of social support: informational and instrumental. CHWs provide informational support through outreach, community engagement, and other client activities through which CHWs educate older adults about public benefits and living healthy, active lifestyles. Additionally, older adults interested in assistance applying for public benefits and/or enrolling in

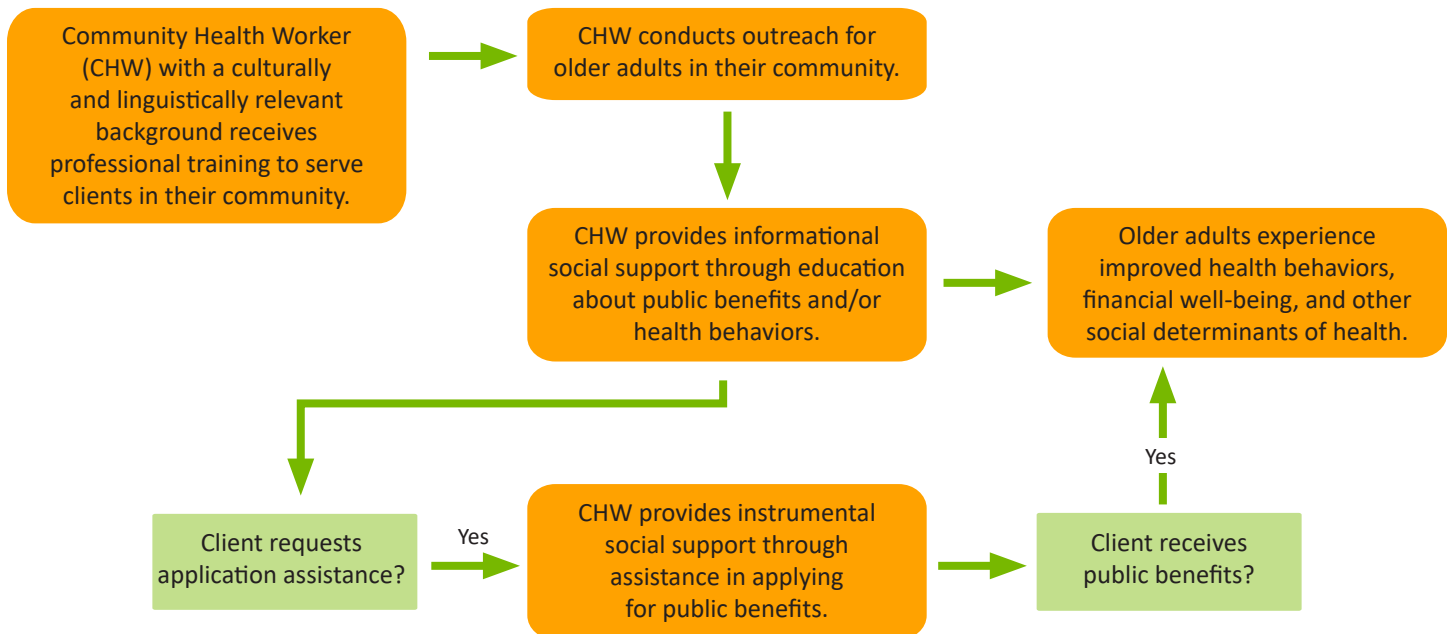
our programs that promote healthy habits receive instrumental social support.

Secondary research backs the claim that cultural and experiential knowledge can enhance delivery of social services to older adults.⁴ The training CHWs receive in addition to their personal cultural and linguistic backgrounds uniquely poises CHWs at MHP Salud to provide the informational and instrumental support necessary to improve the financial stability and health outcomes for older Hispanic/Latino adults in Texas through access to public benefits and services.

3 (Leahy-Warren, 2014)

4 (Waldrop & Gress, 2003)

MHP Salud Theoretical Model





EVALUATION

Methodology

This evaluation is a combination of qualitative and quantitative research, drawing from conversations with MHP Salud CHWs and staff as well as internal data on CHW work with older adult populations and external data from existing health policy research.

Quantitative methods included multivariate analysis using the data visualization software Tableau to

ascertain process and impact outcomes of our CHW-led programs that include adults ages 50 and over. This analysis included any older adult who completed intake or exit from any of our CHW-led programs or who received CHW-led application assistance at any point in 2023.

Limitations

This impact evaluation incorporates the perspectives of six MHP Salud staff members, including four who are direct-service CHWs, all of whom work directly with our CHW-led programs for older adults, as well as data from one calendar year of our programmatic activities. A longitudinal study that also could take into account clients' perspectives, additional MHP Salud CHW perspectives, and more than one year of data could provide a more holistic view of the impacts of CHW-led programming on the well-being of older adults.

In addition to application assistance, our organization provides a variety of CHW-led programming for older adults that encompass the social, financial, and educational needs of the primarily Hispanic/Latino older adults we serve in Texas. It's important to note that the following findings are specific to our work in 2023 tailored to older Hispanic/Latino adults in Texas; results may differ based on the specific community-based health interventions provided by another organization and/or the demographics of the population they serve.

For each of our individual community programs, we measure direct outcomes that can be attributed to a

particular program. Because the older adults in this study participate in various CHW-led programs and are not necessarily representative of the participants in any particular program, this impact evaluation demonstrates the correlation, and not necessarily direct causation, between CHW-led programs and improved financial outcomes and social determinants of health for older adults. These outcomes may be direct or secondary results of CHW-led interventions, depending on the purpose of the program(s) in which an older adult participated. For instance, if an older adult participated in a CHW-led falls prevention education program (Bingocize) without receiving application assistance from a CHW, they may still report improved food access due to the individual's increased social capital or a CHW referring the individual to local community resources, such as a food pantry.

Another thing to note is that the financial impact calculation includes the most conservative estimates possible for the public benefits received by older adult clients in 2023. A detailed description of this analysis and the resources used can be found in the Appendix.



DATA FINDINGS

Demographic Snapshot

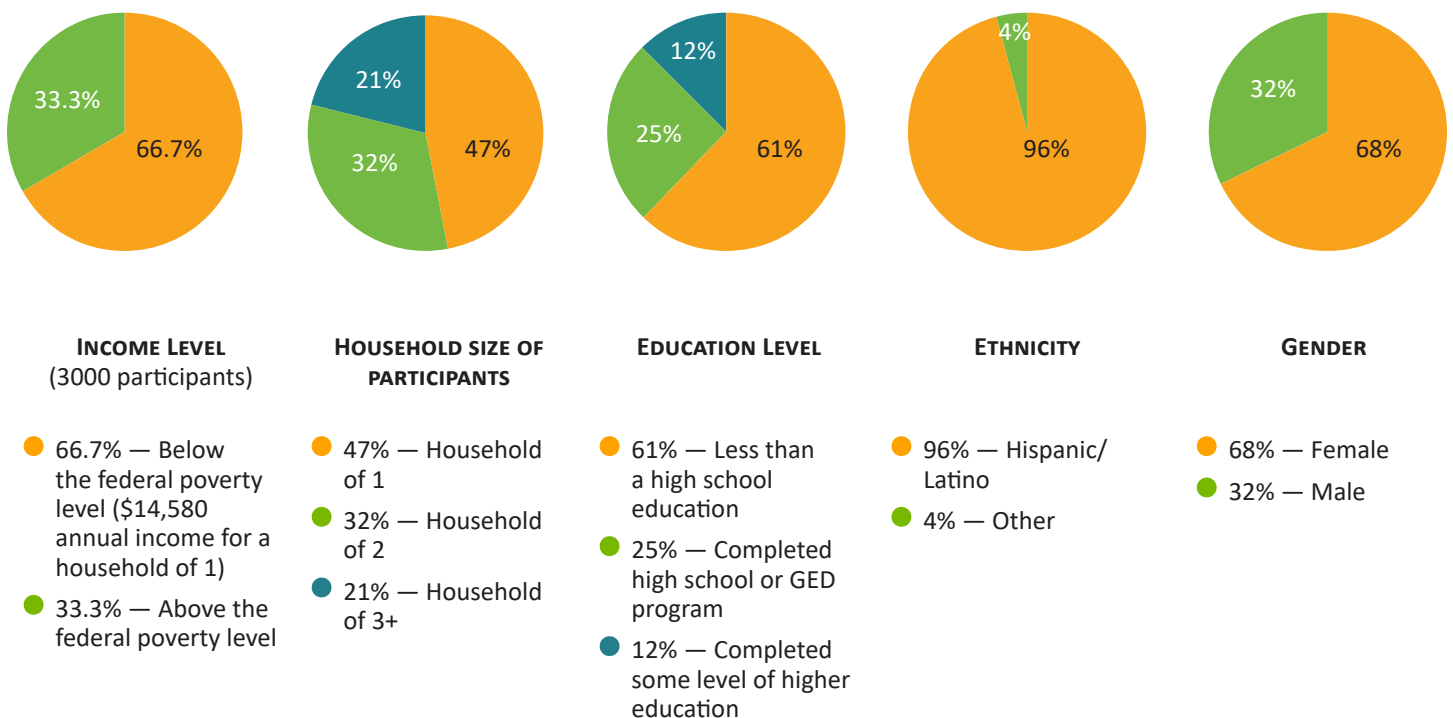
MHP Salud served about 3,000 adults ages 50 and over in our CHW-led programs in 2023. The largest proportion of these older adults participated in our Navigator program, which provides culturally relevant public benefits application assistance and resource referrals to clients. The adults included in this full impact evaluation completed either intake or exit for our programs in 2023, and/or received application assistance in 2023.

Using a conservative estimate, 95% of the 3,000 older adults in this study are considered “low income” based on the Poverty Guidelines Computations released by the US Department of Health and Human Services, which defines “low-income” as adults over 50 living at or below 250% of the federal

poverty level.⁵ Moreover, of these 3,000 participants, approximately 2,000 were considered to be living below the federal poverty level in 2023 based on their household size and income. The majority of older adults we served were between 50 and 69 years of age.

Most of the participants in this study (68%) were female, and the largest proportion of participants live alone, with 47% reporting a household size of 1, 32% reporting a household size of 2, and 21% reporting a household size of 3 or more. Most participants did not complete high school (61%), while 25% did complete high school or a GED program, and 12% completed some level of higher education. The majority (96%) of older adults served identify as Hispanic or Latino.

5 (2023 Poverty Guidelines Computations, n.d.)



Health-Related Social Needs

MHP Salud collects data on social determinants of health for all clients at intake and exit. Our CHWs also ask at intake and exit whether clients would like assistance with any of these areas, such as education and housing; if clients request referrals for assistance with these health-related needs, CHWs provide application assistance or referral services to other MHP Salud programs or community partners. Regardless of whether our CHWs provide direct assistance with these needs, participants in CHW-led programming report improvement in these areas from intake to exit, as illustrated below.⁶

The primary needs shared by older adults we served in 2023 included translation services, food, and assistance to pay utility bills. Our clients' improved ability to meet their health-related needs at program exit may be due to CHW application assistance, connections to additional services or resources, or financial assistance in other areas that allows clients to put money toward other necessities, such as utilities, prescriptions, and medical care.⁷

Literacy and translation: At intake, 35% of participants said they sometimes needed help reading or translating important papers. By exit, 14% of those needing help at intake no longer needed help reading or translating important papers.

This question is broad and may refer to literacy and translation needs both within and outside of public benefits application assistance. Older adults are more likely than other age groups to struggle with digital literacy, which we address later in this evaluation, and the Hispanic/Latino population that we serve may need assistance with reading or writing. Our CHWs help older adults navigate public benefits applications.

Food access: At intake, 29% of older adults indicated they struggled to get the food they needed. Of those who struggled to get the food

they needed at intake, 26% of them no longer struggled with food needs at exit.

One public benefit that has a significant impact on clients' lives is the Supplemental Nutrition Assistance Program (SNAP), which provides funding to supplement individuals' food budgets; access to food also impacts other social determinants of health as well as clients' general well-being. The highest proportion of the older adults who received public benefits through CHW application assistance from MHP Salud in 2023 received them for SNAP.

Food insufficiency in older adults leads to disease exacerbation, depression, individual and caregiver strain, increased hospitalization, and earlier mortality.⁸ SNAP enrollment improves participants' access to nutritious foods, contributes to overall budgets, eases mental distress resulting from poverty, and reduces labor spent accessing food.⁹ SNAP recipients have increased caloric intake and higher dietary quality and are able to redirect limited funds toward essential medications and other health-related necessities.¹⁰ Additionally, older adults report any funds they receive from public benefits besides SNAP also contribute to their food security, as do the food resources to which MHP Salud CHWs refer clients, such as food pantries, churches, and *comedores*, where older adults can receive breakfast and lunch as well as participate in social activities like Bingo.

Utilities: At intake, 21% of older adults had difficulty paying their utility bills. Of those with difficulty at intake, 21% of those individuals no longer had difficulty paying their utility bills at exit.

Education: At intake, 19% of respondents indicated more education could be helpful to them. By exit, 16% who answered yes at intake no longer thought more education would be helpful to them.

⁶ The reporting to follow is in order of most reported need at intake to least and excludes participants for whom we are missing data at exit. We are missing data for 14% of participants for any of the following reasons: participants refused further participation, participants could not be contacted and/or located, there was a data collection error, or the participants had not yet been exited from their CHW-led program by the end of 2023 to report on this data. Most missing data is due to being unable to contact or locate participants, and a more in-depth analysis of reasons for older adult attrition can be found in the section "Retention and Attrition for Older Adults."

⁷ (Pooler & Srinivasan, 2019)

⁸ (Fuller-Thomson & Redmond, 2008)

⁹ (Savin et al., 2021)

¹⁰ (Samuel et al., 2018)

Transportation: 10% of older adults indicated they had trouble with transportation at intake. At exit, 33% of those who had trouble with transportation no longer had trouble with transportation.

Employment: Only 4% of respondents needed help finding a job, a better job, or a steady source of

income at intake. Of those 4%, 20% no longer needed employment assistance at exit.

Housing: Only 4% of older adults said they needed help with housing at intake. Of those 4%, 39% no longer had housing needs at exit.

Health Insurance

At intake, 26% of older adults in CHW-led programming in 2023 had no health insurance or did not know if they had health insurance. Of those who did not have or did not know whether they had health insurance at intake, 57% of these older adults had health insurance by program exit, regardless of whether application assistance was the purpose of the program in which the older adult participated. For individuals who participated in the Navigator program, which focuses on health insurance application assistance, 67% of the 500 older adults who did not have health insurance at intake had it by program exit. Of the nearly 2,000 older adults from the Navigator program itself, including those who had health insurance at intake and may have been renewing applications, 88% of all older adults who

participated in the Navigator program had health insurance by program exit. MHP Salud CHWs helped older adults' households secure an estimated almost \$8 million worth of health insurance benefits through Medicaid and Medicare in 2023.

Another public benefit that CHWs report has an immense impact on older adults is the Medicare Savings Program (MSP), which provides a subsidy to help offset older adults' healthcare costs, lifting even more of the economic burden of healthcare for the older adults in the Texas regions we serve. MSP can help lower Medicare drug plan and medical costs, such as premiums, deductibles, and copayments. MHP Salud CHWs assisted older adults in securing over \$1 million in benefits through MSP in 2023.

Outreach and Engagement with Older Adults

In 2023, MHP Salud's 22 Navigator CHWs completed 3,269 outreach activities in Texas. In order of total number of people reached from highest to lowest, our CHW-led outreach activities included: health/resource fairs, community-based events, door-to-door outreach, scheduled programmatic visits, flyer drop-offs, presentations, phone calls, and text messages. Though outreach activities are completed for all age groups and not specifically targeted toward older adults, of the 3,000 older adults who received CHW-led services in 2023, the majority, or 59%, heard of MHP Salud services from CHW outreach, another 18% from a friend or family, and 14% from another organization, indicating the importance of building trust through culturally relevant CHW outreach and organizational partnerships. MHP Salud's CHWs are members of the communities they serve, giving them

greater insight into where and how to engage with individuals who could use public services.

Research indicates the need for tailored outreach strategies for specific age cohorts and ethnic or racial groups to maximize and destigmatize program participation.¹¹ Conversations with MHP Salud's CHWs demonstrate their wealth of knowledge in successfully engaging with the older adults we serve.

MHP Salud's CHWs emphasize the importance of developing trusting relationships by being empathetic and reliable with older adult clients. It is vital for older adults to feel welcomed, appreciated, valued, and involved in a reciprocal relationship. It is also important to avoid making assumptions. For instance, though some older adults may be hard of hearing, others are not; therefore, CHWs do not need to raise their voice with every older adult with whom they

¹¹ (Fuller-Thomson & Redmond, 2008)

interact. One MHP Salud CHW, Monica, uses what she calls the “small-step approach.” With this approach, she talks clients through the application process before engaging in it so they know what to expect, and she builds trust so they feel comfortable providing her with personal information. She does



not push until they are ready to share. This creates trust and understanding between the CHW and client. Another way CHWs establish this trust is through their preparation; they arrive to every meeting or appointment with any documents needed for application assistance as well as information provided from previous sessions with clients so those they serve see the CHWs are knowledgeable and reliable in each interaction.

It’s also important for CHWs to understand and adapt to the needs of the older adult populations they serve, which often includes scheduling longer appointment times. This allows CHWs to take their time engaging with older adults, developing that trust and, if appropriate, also providing digital literacy education during the process of application assistance. One MHP Salud Program Director emphasizes that teaching older adults digital literacy skills is essential to help them access public benefits because these services are often accessed online. Understanding this challenge, CHWs make a point to schedule in-person appointments and home visits, especially for older adults who may struggle with digital literacy, technology access, and/or transportation.

CHWs also provide additional resources and activities to boost engagement among older adults. To engage all older adults in CHW programming, it is helpful to offer clients a range of services, including assistance learning about and applying for health insurance, but also referrals to resources like churches and food pantries to address their needs. CHWs who lead diverse activities in the community, such as Bingo or book clubs, create

opportunities to establish trusting relationships with older adults and provide them with resources additional to the activity, including social interaction.

MHP Salud CHWs engage with older adult clients in public spaces where older adults tend to congregate, quite

literally meeting clients where they are. In Eagle Pass, TX, for example, CHWs often go to a restaurant or *comedor* (nutrition center) where potential clients may get their morning coffee or lunch. CHWs ask the employees or owner of the restaurant if they can offer services to clients in the restaurant. Sometimes CHWs do a presentation or “host” a table in the restaurant; more often, however, they introduce themselves to clients to share the services MHP Salud CHWs offer while emphasizing that the services are free. They also impart that CHWs are available in community centers or will come directly to the clients for an appointment, which older adult clients tend to appreciate due to transportation or technology needs, as outlined above.

Other locations where MHP Salud CHWs successfully engage with older adult clients include adult daycares, community centers, libraries, and children’s events where grandparents often accompany their grandchildren. Libraries have regular programming for older adults such as English as a Second Language (ESL) classes and arts and crafts, and the daycares and community centers similarly provide activities and transport for older adults. Community centers are popular locations to connect with older adults in need of assistance, as other programs, like Meals on Wheels and community activities, are also housed there. In some community centers and comedores, MHP Salud has an assigned space or office to help make our services a more permanent fixture in locations with high need. These partner organizations also permit us to do presentations that allow older adults to get

a general overview of services offered by MHP Salud. Partnering with other organizations in the community helps MHP Salud CHWs provide more accessible services to older adult community members, both by sharing space and by working together to organize events such as health fairs.

With tailored outreach strategies and by placing themselves in locations where older adults tend to congregate, CHWs at MHP Salud have little trouble enlisting older adults in Texas who spend time in public places; CHWs do, however, face barriers to engagement with older adults who misunderstand or mistrust services provided by CHWs. Thus, building a strong, trusting relationship is important for CHWs to successfully engage with older adults.

Some older adults with whom our CHWs work do not feel comfortable sharing personal information needed for application assistance with a CHW due to negative experiences with insurance brokers or identity theft; additionally, they may have

general misunderstandings about the outcomes of receiving public benefits from conversations with misinformed members of their communities. For instance, CHW Monica explains some older adults have received misinformation about the Medical Expense Reimbursement Plan (MERP). Other adults fear receiving public benefits may impact their immigration status. As MHP Salud works in border communities with individuals who have various immigration statuses, educating and reassuring individuals that application assistance will be useful rather than harmful is a significant part of effective outreach. Some clients may fear being deported or denied citizenship as a result of receiving public benefits when, in actuality, applying for or receiving most public benefits in 2024 does not harm one's citizenship eligibility, nor make someone a public charge.^{12 13} MHP Salud CHWs actively work to help clients understand that applying for benefits will not impact their immigration status.

¹² (Public Charge, n.d.)

¹³ (What You Need to Know about the Updated Public Charge Rule | Office of Community Empowerment and Opportunity, 2023)

Retention and Attrition for Older Adults

For some participants, we are missing exit data, indicating that these participants did not complete their CHW-led program or were still enrolled in CHW-led programming through the beginning of 2024; as a result, these participants were, as of the date of this study, unable to provide our programs with data on their social determinants of health and/or public benefits application results upon completion of CHW-led programming. Participants missing exit data were representative of the group as a whole across all demographic characteristics and social determinants of health.

When interviewing MHP Salud CHWs as to why particular older adults tend to engage more with CHW programs versus those who are lost to follow-up, CHWs share that older adults who are most engaged in CHW programming are those who most enjoy the socialization aspect of participating in programming and/or engaging with the CHWs. They seek out activities and conversation. Older adults already engaged in the community and/or who are referred

by other organizations hear about MHP Salud CHWs by word of mouth and seek them out as trusted resources. Additionally, some older adults return to the CHWs for renewal assistance out of urgency; often, they need to access health specialists to receive essential medications.

Older adults who do not continue to be involved in CHW programs, particularly for application assistance, are often those who do not engage in the renewal process for public benefits. MHP Salud CHWs complete an exit form to close clients' cases once they either have been approved or denied public benefits, but they expect clients to be able to renew their benefits the following year or to reach out to the CHWs if they need assistance. Some older adults will wait for the CHWs to reach out to them rather than seeking assistance or will not open or understand the letters reminding them to renew their public benefits. Sometimes older adults do not have transportation to seek out CHWs, and sometimes they feel they would be a burden by asking for support without the CHW reaching out to



them first. Additionally, in some cases, older adults will stop going to public areas for a while out of fear after contracting COVID-19 or another virus, and therefore will not seek out or see CHWs in public places.

Some older adults also will not reply to follow-up calls because they are not at home or because they have been taught (often by the CHWs) never to give their

personal information over the phone due to the risk of fraud and identity theft. They also may not respond to follow-ups because they have received the services they needed, they have decided to work with another organization, or due to outside factors, such as the individual moving to another location or changing phone numbers.

Financial and Emotional Outcomes of CHW-Led Programming

Older adults who received any application assistance for their household from MHP Salud CHWs had an approval rate of 61% in 2023. Our data on the reasons for adults not having benefits approved is inconclusive. The adults who successfully received public benefits are representative of the sample in terms of race, average age, household income, and educational attainment, but within our sample, male clients were slightly more likely to have approved applications than female clients.

MHP Salud CHWs helped households of older adults secure a conservative estimate of over \$10 million in benefits in 2023. The table in the Appendix shows the number of adults and children in older adults' households who received each type of public benefit in 2023, plus the estimated financial translation for each of those benefits. The analysis that follows discusses the financial and

emotional impacts of public benefits on the older adults who received benefits thanks to CHW-led interventions.

Note that not all older adults in our 2023 CHW-led programming received application assistance services specifically; 1,379, or 46% of the older adults in our sample, received CHW application assistance. The numbers represented in the Appendix also include applications for other adults and children in these older adults' households. Outside of public benefits application assistance, older adults receive other programming from MHP Salud CHWs, including social programming, which contributes to their well-being and quality of life.

MHP SALUD CHWS HELPED HOUSEHOLDS OF OLDER ADULTS SECURE A CONSERVATIVE ESTIMATE OF OVER \$10 MILLION IN BENEFITS IN 2023.

Our CHWs agree that the main impacts older adults report from receiving public benefits with CHW assistance are increased economic security, increased food security, and increased social and emotional well-being. The direct financial benefits from CHW-led application assistance are clear, with **older adults served in 2023 averaging a conservative estimate of about \$4,300 worth of public benefits as a result of CHW-led application assistance.** CHWs also report positive feedback

regarding social-emotional well-being from older adults who participate in CHW-led social programming such as our Bingocize programs, which educate older adults on topics such as falls prevention and nutrition.

Another example of public benefits for which CHWs provide application assistance that has an immediate and incredibly positive effect on the well-being of the older adults in Texas is

the palomitas service, in-home caretakers who help older adults cook and clean, provided through Texas Health and Human Services.¹⁴ This program helps older adults feel more secure and far less stressed and also provides a respite for family members who serve as caretakers for their older adult relatives. CHW Monica shares that when older adults renew their public benefits with her, they report how essential a *palomita* is to their quality of life and their emotional wellness. Secondary sources reemphasize the reduction in stress for caregivers of older adults who receive this service.¹⁵

¹⁴ (4600, Primary Home Care and Community Attendant Services | Texas Health and Human Services, n.d.)

¹⁵ (Teasdale-Dubé & Viau-Quesnel, 2024)

CONCLUSIONS AND RECOMMENDATIONS

MHP Salud CHWs help older adults in Texas access in-home caretakers, social events, exercise and nutrition programs, health insurance, and other public resources to which the older adults otherwise may not have access, often due to systemic barriers such as digital literacy, poverty, and transportation challenges, in conjunction with the older age groups' increased risk for disability and cognitive decline. Older adults in particular are less likely to receive public benefits for which they are eligible than other age groups due to the complexity and administrative burdens of accessing and maintaining eligibility for public benefit programs.¹⁶ MHP Salud CHWs are able to address older adults' needs by engaging in culturally and linguistically relevant informational and instrumental social support; in other words, CHWs are well-equipped by their educational and cultural backgrounds to guide older Hispanic/Latino adults to access public benefits and other services.

A key to avoiding older adult attrition in CHW programs seems to be ongoing communication and rapport between CHWs and the individuals they serve. Older adults who consistently engage with and trust their CHWs are more likely to access public benefits because older adults are often fearful of identity theft and misinformation from entities and individuals who prey on older adults. The more CHWs can encourage older adults to engage in social programming and communication with CHWs, the more likely they will be able to access public services; in other words, the more informational social support CHWs can provide, the more effective their instrumental social support, including application assistance, will be. Partnership with other community organizations is also essential to increase regular communication with community members who could benefit from CHW-led services.

To sustain the positive benefits gleaned from CHW-led social services, CHWs must consistently engage older adults and address the barriers older adults face

with follow-up care, particularly the administrative burdens of the renewal process for public benefits.

This impact evaluation contributes to the research base on the impacts of CHW-led programming on the finances and health of older adults and demonstrates the relevance of social support theory in outlining the positive outcomes and importance of CHW-led services on older adults' financial stability and social-emotional well-being.

In addition to contributing to public knowledge on CHW best practices, this impact evaluation has allowed MHP Salud to engage in ongoing improvement to our data and evaluation infrastructure, as well as to our programs serving older adults, while also recognizing the enormous positive impact our CHWs have had on older adults' finances and well-being. Based on the results of this impact evaluation, MHP Salud plans to improve our Navigator services by having CHWs reach out to the previous year's consumers when it is time to renew for Open Enrollment. For those whose renewals fall outside of this period, we plan to provide consumers in all our application assistance programs with customizable calendar magnets to which CHWs can attach a business card. In this way, we hope older adults and all clients will know when and how to reach out to their CHWs to renew their public benefits.



16 (Herd, 2015)



APPENDIX

Financial Benefits Received through CHW-Led Services

Benefit	Number of Individuals that Received Benefits	Number of Households that Received Benefits	Est. Benefit Amt (\$) TOTAL (2023) Recorded in MHP Salud Data Systems	Est. Benefit /Month Online	Individual or Household?	Calculated Total Benefit Amt (\$)/Month	Source
Adult CHIP (Perinatal) Approved	7	6		\$200	IND	\$1,400	(1)
Child CHIP Approved	14	9		\$200	IND	\$2,800	(1)
Adult Healthy Texas Women Approved	1	1				\$33	(2)
Adult Indigent Care Approved	7	6		\$78	IND	\$547	(3)
Adult Medicaid Approved	331	451	N/A	\$1,455	IND	\$481,605	(4)
Child Medicaid Approved	314						(5)
Adult Medicare Approved	40	35		\$370	IND	\$116,180	(6)
Adult MSP Approved	500	417		\$1,310	IND	\$52,400	(7)
Adult SNAP Approved	615	524	N/A	\$174		\$87,000	
Child SNAP Approved	310						
Adult Social Security Approved	13	12		\$641	HHD	\$7,692	
Adult TANF Approved	1	1	\$1,000			\$83	
Adult Texas Rent Relief Approved	13	8	N/A	\$284	HHD	\$2,272	(8)
Adult Unemployment Approved	24	23	N/A	\$292	IND	\$7,008	(9)
Adult Utility Assistance Approved	99	86	\$4,524	\$57	HHD	\$4,902	(10)
Adult 'Other' Approved	108	93	\$4,101		IND	\$342	
Totals	2,398	1,667	<i>Estimated benefits secured for clients each month in 2023</i>			\$856,488	
			<i>Estimated benefits secured for clients for the year 2023</i>			\$10,277,856	
			<i>Older adults received application assistance in 2023</i>			1,371	
			<i>Estimated average benefits secured for each individual who received benefits using MHP Salud CHW application assistance in 2023</i>			\$4,286.01	(11)



SNAP Average Calculations				
Income	Hhd Size	Estimate	Percentage	Totals
\$9,999.00	1	\$208.00	70%	
	2	\$452.00	30%	\$135.60
				\$281.20
\$14,999	1	\$58.00	60%	\$34.80
	2	\$302.00	40%	\$120.80
				\$155.60
24,999	1	\$0.00	40%	\$0.00
	2	\$95.00	45%	\$42.75
	3	\$326.00	15%	\$48.90
				\$91.65
			AVG	\$176.15
Social Security				
	Age	Salary	Amount*	Average
	62	\$9,999.00	\$525.00	
		\$14,999.00	\$757.00	\$641.00

* Minimum amts (assuming claiming early) at the max salaries recorded for those who received SS

SOURCES

- (1) <https://www.texastribune.org/2017/12/01/hey-texplainer-how-much-money-does-texas-spend-child-through-chip/#:~:text=The%20state%27s%20budget%20for%20fiscal,roughly%20400%2C000%20CHIP%2Deligible%20Texans>
- (2) TX Women’s Health Programs Report, p54: <https://www.hhs.texas.gov/sites/default/files/documents/texas-womens-health-programs-report-fy2022.pdf>
- (3) Hidalgo County Department of Health and Human Services (\$78/month avg for adults over 50 in Hidalgo County in 2023)
- (4) [Medicaid.gov](https://www.mhpsalud.org) (\$78/month avg for adults over 50 in Hidalgo County)
- (5) [Medicaid.gov](https://www.mhpsalud.org)
- (6) <https://usafacts.org/data/topics/people-society/social-security-and-medicare/medicare/medicare-average-cost-beneficiary/>
- (7) AARP Foundation
- (8) <https://www.tdhca.texas.gov/sites/default/files/pdf/covid19/tedp/240131-TRRPHighlights.pdf>
- (9) <https://www.twc.texas.gov/programs/unemployment-benefits/eligibility-benefit-amounts#:~:text=Weekly%20Benefit%20Amount,-Your%20weekly%20benefit&text=Your%20WBA%20will%20be%20between,depending%20on%20your%20past%20wages>
- (10) <https://cacost.org/programs/ceap-utility-assistance/>; <https://149521661.v2.pressablecdn.com/wp-content/uploads/2024/01/2021-2022-Annual-Report-7.pdf>; Comprehensive Energy Assistance Program; based on 21-22 annual report ; \$72 LIHEAP (heating) from AARP
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