



DCDHS Planning & Evaluation Unit

2022-2024 Aging Plan Community Feedback

Who did we talk to?

Dane County residents were invited to participate in a survey (available on paper and online), focus groups, and 1:1 interviews. Community partners were asked to spread the word to older adults in the community on behalf of AAA in their planning efforts for 2022-2024. AAA engaged Dane County Department of Human Services Planning & Evaluation staff to moderate focus groups and 1:1 interviews, with the exception of the NewBridge groups that were moderated by NewBridge staff. In all, 9 sessions were held and 64 community members participated. An additional 333 people completed a usable survey, resulting in hearing from **397 voices in Dane County**.

Group Name	Date	Participants	Data Collection Mode
Rainbow Project Grandparent Support Group	6/12/2021	5	Online focus group
Goodman Community Center Senior Coffee Hour	6/18/2021	8	In-person focus group
Goodman Community Center Senior Coffee Hour	6/25/2021	7	In-person focus group
NewBridge Madison Latinx	7/1/2021	12	Focus group
NewBridge Madison Black	7/8/2021	8	Focus group
LGBTQIA+	7/14/2021	1	Online in-depth interview
Waunakee Senior Center	7/15/2021	3	In-person focus group
Westshire Village Senior Living Community	7/19/2021	7	In-person focus group
Foster Grandparents	7/21/2021	13	In-person focus group
Survey	5/24/2021 – 8/2/2021	333	Paper and online survey

What did we learn?

There are commonalities as well as differing needs based on geography, life stage, and identity.

Survey Summary – Overall

Top 5 issues, problems and challenges facing adults age 50+	Top 5 things that need to improve in Dane County	Top 5 services or resources needed from caregiver/helper perspective	Top 3 resources or services needed for grandparents and relative caregivers
1. Lack of enough safe, affordable housing (56%)	1. In-home support for daily living, both personal care and chores (58%)	1. Transportation to appointments (52%)	1. Day camps or day care for the grandchild(ren) (24%)
2. Transportation after they can no longer drive (53%)	2. Alternative transportation services (47%)	2. Respite care for a vacation or regular time away (47%)	2. Participation fees for the grandchild(ren) to do sports, arts, music, and other activities (23%)
3. Changes to the body or physical capabilities (46%)	3. Safe and affordable housing options (45%)	3. Assistance with personal care (45%)	3. Assistance with technology (21%)
4. Lack of professional workforce for in-home care (43%)	4. Free legal services to complete wills and PoA documents for health & finances (38%)	4. Help with housekeeping chores and cleaning (39%)	
5. Social isolation/loneliness (39%)	5. Social activities to help with social isolation and loneliness (35%)	5. TIE (35%) <ul style="list-style-type: none"> • Adult Day Care • Home modification support to assist aging in place 	

Survey Summary – Target Populations

Arrows (↑↓) mean that the percent of the target population selecting a choice is significantly higher (↑) or lower (↓) than people who do not identify as part of that group. For example, significantly more LGBTQIA+ chose “lack of planning for potential medical or other health situations” as a problem for people age 50+ in Dane County compared to the proportion of people who do not identify as LGBTQIA+.

- **LGBTQIA+**
 - Problem: Lack of planning for potential medical or other health crisis situations ↑
 - Caregivers: Adult Day Care (for them) ↓
- **Person of Color (non-white also referred to as BIPOC or POC)**
 - Problem: Lack of affordable health care and prescription drugs ↑
 - Need: Delivery/Meal options for healthy foods ↑
 - Need: Culturally-specific services and activities ↑
 - Problem: Transportation after they can no longer drive ↓
 - Caregivers: Assistive devices like lift chairs, stair lifts, alarms, or technology ↓
 - Grand parenting: Assistance with technology ↓
- **Having a disability**
 - Caregivers: Assistive devices like lift chairs, stair lifts, alarms, or technology ↑
 - Problem: Meaningful opportunities for staying engaged in the community ↓
 - Need: Dementia supports and services ↓
 - Need: Ways to keep fit and healthy through physical activity ↓
 - Grand parenting: Tutoring for academic classes (for them) ↓
- **Living in poverty**
 - Problem: Lack of affordable dental care ↑
 - Need: Preventative health services like blood pressure checks and nail clipping ↑
 - Need: Delivery/Meal options for healthy foods ↑
 - Caregivers: Self-care such as massage, yoga class, or gym membership ↑
 - Problem: Lack of affordable health care and prescription drugs ↓
- **Living alone**
 - Problem: Changes to the body or physical capabilities ↑
 - Need: Preventative health services like blood pressure checks and nail clipping ↑
 - Need: Delivery/Meal options for healthy foods ↑
 - Need: Free legal services to complete wills and PoA for health and finances ↑
 - Problem: Lack of professional workforce for in-home care ↓
 - Need: Affordable home modifications for aging in place ↓
 - Need: In-home support for daily living, both personal care and chores ↓
 - Need: Dementia support and services ↓
 - Need: Financial and emotional support for family caregivers ↓
 - Grand parenting: Home modification to create private space for grandchild(ren) (for us) ↓
- **More comfortable speaking a language other than English**
 - Need: Culturally-specific services and activities ↑
 - Caregivers: Respite care for a vacation or regular time away ↑
 - Problem: Transportation after they can no longer drive ↓
 - Need: Safe and affordable housing options ↓
 - Need: Alternative transportation services ↓
 - Grand parenting: Assistance with technology (for us) ↓

- **Rural residents**

- Caregivers: Assistance with personal care ↑
- Need: Ways to keep fit and healthy through physical activity ↓
- Caregivers: Support groups and/or activities for caregivers to meet and share ↓

Agreement – Housing is a top issue in Dane County

- Property taxes are pushing people out of their homes
- Apartment rent has gone up and forced some into low-income housing (if they can get a spot as there are long waitlists)
 - Or apartments are getting turned into condos, shrinking the rental market
- There is limited safe, affordable, senior housing – and it should be designed for older adults
 - 56% (1st out of 15) of survey respondents named “lack of enough safe, affordable housing” as a top issue, problem, or challenge facing adults 50+ living in Dane County
 - 45% (3rd out of 16) named “safe and affordable housing options” as a top thing that needs to improve to help Dane County adults as they age
 - Notably, those who speak English were more likely to name this as needing improvement than those who are more comfortable speaking another language (48% versus 13%, respectively)
 - For communities to be designed for seniors, consider
 - Building more single-story homes in new developments
 - Creating access to additional services in the home as one ages and needs them
 - Independent-living communities where older adults can lean on each other for support
- Staying in Madison and not rural areas is important to them because Madison has the service providers (e.g., doctors)

Agreement – Reliable transportation is needed for medical and other trips

- Transportation should not fall through, it should get you to your appointment on time, and it should return you home (MTM has a bad reputation for “stranding” riders)
- Low, predictable fares are important in planning to get to medical appointments
- They realize it is likely they will lose the ability to drive in the future and need ways to get to appointments as well as getting shopping done
 - “Transportation after they can no longer drive” is the second most often selected problem facing adults age 50+ living in Dane County (53%)
 - Notably, this is said more often by majority identities (58% of Non-POC respondents selected this compared to just 14% of POC; 56% of English speakers selected this compared to just 13% of those more comfortable speaking another language)
 - Transportation is also the second most often selected needed improvement (47% select needing to improve “alternative transportation services”)
 - Similar to above, those who speak English (50%) are more likely to select this than those more comfortable speaking another language (13%)
 - Transportation is the most mentioned need of caregivers (52% “transportation to appointments” for their care partner)
- Bus service doesn’t always meet their needs: it can be hard for them to get on and off of transit vehicles; passes are expensive (\$57 a month); Badger Bus service does not extend to more rural areas (for example, it does not go to McFarland where new senior housing is being built)
- Bike paths need to be cleared in winter for those who rely on a bike instead of a car

- Transportation from senior focal points/centers to enrichment activities like going to a park or theatre would be appreciated as well as transportation to church services

Agreement – Help around the home and with personal care would be nice

- In-home help is desired
 - As they age it is harder to clean the floors and under furniture
 - They would like more help with cooking, cleaning, home repairs and maintenance, hanging curtains and rods, flipping mattresses, walking dogs, yard care, changing light bulbs, and smoke detector battery replacement
 - Anticipate in the future they may need help to get in and out of bed/change their clothes/bathe
 - Companionship and caregiving has overlap. They talked about caregivers who can stay in the home with them as well as in-home health services – blood pressure checks, INR warfarin blood test, nail clipping, salon/hair needs. One comment mentioned wanting more LGBTQ health care workers who can go into homes because the LGBTQ community doesn't want to be discriminated against.
 - The fourth highest problem for people age 50+ in Dane County is “lack of professional workforce for in-home care” (43%) and this is the highest need (58%, “in-home support for daily living, both personal care and chores”)
 - Help around the home is the third most mentioned need of caregivers (45% need “assistance with personal care” for those they are helping), followed closely by “help with housekeeping chores and cleaning” (39%)
- CNA's are hard to come by, they don't get paid enough so there aren't many of them
- NewBridge had volunteers to help clean apartments 1-2 times per week during the COVID-19 pandemic and it was well-liked
- Partnerships with Briarpatch for snow removal is helpful when the children show up

Agreement – Access to (healthy) food is essential to aging well

- Food was mentioned in both open-ended survey comments and the focus groups, but was infrequently chosen as a closed-ended survey response
 - Only one-fourth (23%, 13th out of 16 options) chose “delivery/meal options for healthy foods” as one of their top five things that needs improved in Dane County
 - However, this is especially important to marginalized populations: POC (43% chose this response compared to just 20% of non-POC), those living in poverty (36% versus 18% not living in poverty), and those living alone (28% compared to 17% not in poverty)
 - 28% of caregivers/helpers want “meals delivered or prepared in the home” for their care partner (8th of 17)
- Food deserts exist throughout Dane County – lacking of affordable, nearby grocery stores (e.g., needing a car to get the grocery store)
 - Westshire Village currently has to rely on the Kwik Trip gas station as their closest grocery store
 - The East side of Madison is resource poor compared to the West side
 - Older adults need help getting groceries, especially as they experience physical impairments
 - They also mention wanting transportation to reach congregate meal sites
- Goodman Center food pantry receives praise for its selection, organic foods, fresh produce and the person's ability to choose what they want
 - There was also positive talk about Meals on Wheels being helpful for access to food and socialization – although some want more appealing and fresh food in these deliveries

- Food delivery has become more important through the pandemic
 - Continuing delivery and allowing for choice would be ideal
 - A way to order without having to go online is even better
 - Making this available to people on Food Share is desirable

Agreement – Need resources for older adults who are on their own, don't have family to lean on

- There was no direct closed-ended measure related to this finding, but it came up in both the focus groups and other comments left on the survey
- Someone to check-in – socialization and make sure you haven't "fallen and can't get up" is wanted
- Some older adults have not had children, others' children moved away. There is no one left in town to stop by and check in on them. Weekends and holidays are especially threatening because of the break in services. Phone trees may work but they don't have them set up.
 - Is a big issue for the LGBTQIA+ person whose family doesn't approve of being gay
 - A survey respondent exemplifies the limited close connections one may have as they age, "I live alone, one close friend, same age (85+); have only 2 meaningful relatives, one my age, me, his daughter."
 - They would like a personal advocate to look out for them in the case there is no family member available
- This age group is facing their friends dying and not knowing how to make new friends making isolation a top problem (5th out of 15 on the survey, 39%) and social activities a top need (5th out of 16 on the survey, 35%) – these are universal problems and needs across identities

Agreement – Fortunate to live in Madison/Dane County, and love the organization that put together their focus group

- Madison has the resources and is a vibrant community with tons to do (if you can afford it)
- Senior focal points/centers are an important gathering place – they provide socialization and sense of community, a way to make new friends, guided exercise, enrichment classes, help with technology, access to quality food (especially the Goodman pantry) and congregate meals
 - One focus group pointed out senior focal points/centers can do better at matching the needs of distinct subsets of older adults: newly retired and transitioning to the lifestyle, those that are aging but still sharp in mind and able bodied, and lastly the severe medical group

Agreement – There are so many services but they are hard to keep track of

- There is so much you can't keep up with what is available and how to access them/who is eligible for the services
- ADRC and case managers have been helpful in providing guidance – but the ADRC has a reputation as being for the **major** needs
- Marketing of services is appropriate – older adults will spread information by word-of-mouth once they've had a good (or bad) experience. Ways to reach older adults: print, newspapers, newsletters, inserts into publications, on-site visits/office hours, NOT ONLINE.
 - Outreach to the families of non-English speakers is appropriate

Noticeable differences

- Respondents in groups held on the East/North side of Madison were more likely to have financial concerns than those in nearby communities
 - The Black NewBridge and Goodman focus groups talked about this at length
 - Specific examples of financial concerns – rising property taxes, community events always costing money instead of being free like in the past, pricing of services (hair care, grooming, dental, exercise classes, etc.) not matching their low incomes, and lack of financial support for those caring for ill family members
 - The Black focus group also wanted more help with paying bills and money management
- Those with less financial worries were more interested in “enrichment” opportunities
 - Cross-generational interaction, technology classes, fall prevention, education on Power of Attorney and guardianship at end of life, classes to learn to play card games hosted by senior focal points/centers
- Grandparents raising grandchildren are entirely different: they are concerned about health insurance for the child(ren), the generational gaps are challenging to navigate and many places (like schools) lack inclusive language for their type of family, respite care is needed but they feel guilty using it (shorter respite services or connection to babysitters would be best)

Those of minority identities feel a lack of respect and culturally- and identity-specific services

- The LGBTQIA+ 1:1 interview participant was most concerned with discrimination, stigma, and lack of acceptance around their sexual orientation – noted this causes mental health issues where there aren’t treatment providers who understand
- The Black focus group also mentioned struggles with mental health – they spoke of isolation and loneliness resulting in cognitive decline and mental health issues due to a lack of in-person contact during COVID-19 lockdowns
- Additionally, the Black focus group said they do not feel respected, listened to, and cared about because they are older and Black
- The language barrier is the biggest obstacle to the Latinx focus group
 - They spoke of the lack of outreach to the Spanish-speaking community and how that leaves families unsure of what resources are available. They also mention wanting education initiatives for Spanish-speaking families on how to care for grandparents and older adults in their families.
 - Services in Spanish are hard to find, there can be lengthy waitlists, it is hard to get a second opinion, and there seems to be limited oversight of Spanish-speaking staff. Medical facilities, mental health providers, case managers, respite caregivers, shopping centers, and banks are examples they shared where they struggle to find Spanish-speaking staff. The lack of Spanish-speaking staff often results in Latinx older adults leaving before getting the service they need.
 - There is also a lack of community social events in Spanish or bilingual. They don’t feel there is a space in the community designed for Latinx older adults to congregate.
- Survey respondents identifying as POC and those more comfortable speaking a language other than English are more likely than their counterparts to select “culturally-specific services and activities” as an important need
 - Both of these groups are underrepresented in the survey POC (n=14), non-English speakers (n=8) and even with these small n-sizes the differences had enough power to register as statistically significant