



Oregon's Kitchen Table – Community Engagement to Inform the Building of a Comprehensive Plan for Aging in Oregon

EXECUTIVE SUMMARY

Oregon's population of people 65 years or older is likely to increase from about 18 percent of people to nearly 22 percent by 2040. In addition, there is growing diversity among the future aging populations. During the fall and winter of 2021–2022, nonprofit AGE+ worked with Oregon's Kitchen Table (OKT), to conduct a public engagement process to hear from people throughout Oregon about their thoughts and hopes for aging well. AGE+ recognized that there was a lot of disparate information representing the concerns of older people. In initiating a statewide community engagement process, AGE+ sought to ensure that existing information was accurate, complete, and represented the broad range of older adults in Oregon. They sought a process to reach every geographic area of the state (all counties) and ensure that responses reflected communities that are not often heard from, including communities that have traditionally been excluded from public decision-making and those who care for and about older adults.

The following executive summary provides an overview of the engagement process as well as high level findings. The attached report contains seven sections: themes regarding the assets that people saw already in their lives and communities that support people in aging well, priority areas and concerns, hopes that people have for creating a statewide plan for aging in Oregon, a brief conclusion, summaries from four regional Zoom community conversations, and annotated survey results.

ABOUT OREGON'S KITCHEN TABLE

Oregon's Kitchen Table is a program of the National Policy Consensus Center in the College of Urban and Public Affairs at Portland State University, and was created by a group of non-partisan, nonprofit community organizations dedicated to helping Oregonians have a voice in public decision-making. Oregon's Kitchen Table creates public consultations to allow Oregonians to weigh in on policy questions posed by elected officials and public managers. OKT has been used at the state, local, and regional levels to gather feedback from a wide variety of Oregonians using both our online surveying tool to solicit input from thousands of participants and in-person community gatherings of various sizes and formats.

We are committed to engaging community members from all walks of life—particularly communities that typically have not been represented or engaged in public processes—to achieve deep engagement. Using culturally specific and targeted outreach, Oregon's Kitchen Table has a particular focus on hearing from Oregonians who have been left out of traditional engagement processes. We work with organizers, translators, and interpreters so materials and online and in-person consultations are available for Oregonians who speak a wide variety of languages and learn in a variety of ways. We recognize that people bring all different levels of knowledge and familiarity regarding issues and policies. We use approaches to ensure those who may not have as in-depth knowledge can still respond and share what they believe and have experienced.

This process to inform the building of a comprehensive plan for aging in Oregon was intended to be an inclusive community engagement effort, providing an opportunity for any resident of Oregon who wanted to share their ideas, beliefs, and values with decision-makers. It was not intended to be a scientific or research study.

ABOUT AGE+

AGE+ is a community based organization (CBO) representing Oregon's rapidly growing older adult population. Older adults are a capable workforce and a population whose health care needs have outpaced provider's capacity to serve the unique aspects of the aging process. AGE+ is a recognized leader and trusted collaborator that serves communities across Oregon in rural and urban areas. AGE+ brings technical expertise in the field of aging, provides capacity building services to organizations and communities to better serve older adults, undertakes advocacy and policy development, develops training, and creates innovative program initiatives that improve the lives of older adults and their families and other support networks.

ENGAGEMENT GOALS

The goals of this project were multi-fold: 1) to hear from residents from specific rural communities across the state and communities in those regions that have historically been underserved; 2) to hear from as many people as possible from communities across Oregon; 3) to understand people’s perspectives on aging; 4) to discover key community assets and supports that people felt were critical in supporting people as they age; and 5) to identify priorities that people would have in creating a statewide plan for aging in Oregon.

Because this engagement is intended for the general public, it assumes that respondents bring all different levels of knowledge and familiarity regarding aging and aging policy to it. It is the goal of OKT and AGE+ to ensure that those who may not have as in-depth knowledge can still respond and share what they believe and have experienced.

ENGAGEMENT ACTIVITIES

Because of public health restrictions and the renewed cautions and concerns around face-to-face gatherings due to COVID, the opportunities to do outreach and engagement were limited. Engagement activities took place either virtually through an online survey, Zoom discussions, phone interviews, or through paper surveys distributed by community organizers and partners.

OKT facilitated four Zoom community conversations in October and November 2021 in Tillamook County, Wasco County, Jefferson County, and Jackson County. AGE+ worked with locally-based host committees who conducted outreach to invite people in each of their regions to join the Zoom conversation.

Over the course of the engagement period, OKT and AGE+ pursued a variety of outreach and engagement approaches with communities who have historically not been included in public decision-making processes. OKT and AGE+ focused on paper surveys, working with community organizers, and individual interviews with members of the Spanish speaking populations and Tribal members and Indigenous community members. AGE+ also conducted specific outreach with groups around the state.

PARTICIPATION

Approximately 1,500 people participated in the various engagement opportunities from October 2021 to January 2022. A total of 1,387 participants responded to the survey—either

online or on paper. Approximately 100 people participated in the Zoom community conversations and another five people participated through some other format, including individual interviews.

All 36 of Oregon’s counties were represented—to varying degrees—across the different forms of engagement. Fully 56 percent of responses to the survey came from people who described where they lived as either a rural area or a small town or city, while many of the participants in the community conversations came from small towns or cities or rural areas. While 13 percent said they were currently receiving care related to aging, nearly 60 percent of people said they either were currently or had been a caregiver for an older person. Of the people who responded to the online and paper surveys, 56 percent were between the ages of 55 and 74; 28 percent were under the age of 54.

A few people in different community conversations shared that they observed that mostly women were participating in the conversation. Of people who responded to the online survey, 69 percent identified as female. Some participants voiced a curiosity about why this was the case. Others shared that in their experience there has historically been a power differential, with women planning and thinking about community needs and then having to ask people in power, usually men, to fund these needs. Another person noted that there are lots of older men who are having problems, but they may hesitate to reach out and ask for help.

FINDINGS: COMMONLY HELD VALUES AND BELIEFS

Across all forms of engagement, the following commonly held values and beliefs emerged:

- “Aging well,” as defined by participants, includes: good health, the ability to be active, meaningful connections to family friends and neighbors, independence, access to services, and a sense of security.
- Physical health, financial stability, and access to needed services like healthcare, food, or transportation were identified as top priority needs for participants or participants’ family members to age well.
- Housing—particularly housing that is affordable and meets people’s needs as they age— was a priority area for many people and in many of the different regions where we held discussions.

- While most people who responded felt like they or a loved one were prepared to age well, people were generally not as confident in how prepared their community was to support people to age well.
- Respondents said that circles or networks of family, friends, and neighbors played a large role in creating important social connections, accessing information, and caregiving.
- Many people who participated in Spanish shared that language access was a major challenge to accessing services and social activities. Often the information, services, or activities they seek are only offered in English, which contributes to feelings of isolation, loneliness, or exclusion.
- People also recognized that older adults are assets in the community, particularly in the following ways:
 - Older adults are the volunteer base for many community organizations and activities.
 - Older adults often play an important role in serving as mentors and teachers and in providing care and companionship for younger family and community members.

POTENTIAL COMPONENTS FOR A STATEWIDE PLAN FOR AGING

Priority areas that rose to the top for groups to consider when building a Comprehensive Plan for Aging in Oregon:

- Physical well-being
- Mobility that ensures continued quality of life such as access to nature
- Opportunities for multigenerational engagement
- Affordable, accessible housing
- Access to services that may include healthcare, food, and transportation, especially in rural areas
- Financial stability and security
- Finding aging resources and help with navigation
- Multilingual access to information, services, and activities
Culturally appropriate care and information dissemination
- Caregiver and caregiver workforce needs

SECTION 1: HOW OREGONIANS THINK ABOUT AGING FOR THEMSELVES, THOSE THEY CARE FOR, AND THEIR COMMUNITIES

OVERALL

Of people who responded to the survey, 91 percent said that they think about their own or a loved one's needs for aging either "a lot" or "some." Fully 68 percent said that they think about aging issues "a lot" or "some" when they consider whom to vote for.

Generally, people have more confidence when it comes to how prepared they feel they themselves or loved ones are to age well (18 percent said "very prepared" and 56 percent said "somewhat prepared"). By comparison, when asked how well prepared they feel their community is to support people as they age, 6 percent selected "very prepared" and 29 percent selected "somewhat prepared."

While there were differences in what people most look forward to as they age or enjoy now as an older person, many people selected some variation of "have more time" to focus on some activity. And while there were many differences in the top concerns people have regarding aging, having enough money (14%) followed by being able to move around easily (13%) and having healthcare (13%) were the top three. We heard in comments submitted during the survey and in community conversations that, even when communities offer some types of services, the ability to afford or physically access them are key to how beneficial they are for individuals and groups in that community.

In one community conversation, a group of participants discussed how any number of things (the pandemic, a health crisis, a financial crash, caring for adult children, or disparities due to race, sexual orientation or gender identity and institutionalized biases) could lead to being an older adult without the financial resources needed to maintain well-being. They also noted the importance of training for nursing home and home health workers that includes working with older LGBTQ+ community members, people of color and others who may have faced a lifetime of discrimination and who don't feel comfortable asking for assistance.

AGING WELL

In the survey and in community conversations, people were asked what "aging well" meant to them or what a community where everyone "ages well" looks like for them. Some people said they aren't sure about such phrases or terms, and others feel like it was an unachievable aspiration or, as

one person said, “blue sky thinking.” Others said they think terms like “aging well” or “aging successfully” or “aging with a sense of well-being” refer to those who already have financial security or who already enjoy good health. One person said, “I think people in these categories do not have health issues.” However, several common themes emerged from responses and discussions about what aging well looks like for individuals or communities.

Good health

Many people referred to having good health in different forms, including being healthy physically, mentally, emotionally, and spiritually. Several people mentioned a state of mind or feeling, such as a sense of happiness, peace, calm, dignity, or self-respect.

Ability to be active

Others emphasized the importance of being able to stay active in a variety of ways. For some people, this means physical activity, such as being able to enjoy recreation, particularly out in nature. For others, this means taking part in cultural, intellectual, or arts activities.

Connections

Many people also said that “aging well” for them means connections to family, friends, loved ones, and others in their community. One discussion group phrased this as “opportunities for people to connect, gather, converse, listen to, and support each other.” In community conversations, several people noted that intergenerational connections are key to a community where everyone ages well. One discussion group shared, “People of all ages are thriving and can see each other thriving at different stages of life. This brings personal happiness and a sense of community well-being.”

We heard people express concerns about isolation for themselves, their family members, and their friends who might not be connected to others. This was especially true in regards to the impacts of COVID on older people and on the organizations and entities that historically have provided services to older people in rural areas.

Independence

Another theme that emerged from the different forms of engagement was the ability to continue to live independently. For some people, this means living in their home or, as one person described, “Able to live in their own residence, with or without caregiver support.” Others talked about being able to continue to be active, take part in community events and activities, and do daily

tasks. Some people phrased this as not wanting to be too much of a burden or dependent on loved ones or others who provide care for them.

Access to services

Many people said that “aging well” or a “community where everyone ages well” means having access to services, particularly transportation, health care and health providers, food, and nature. We heard in several community conversations and interviews with people in rural areas that access to these services is critical for them to feel like they and their community are able to age well. While people shared how much they love living in their rural community, some people worried that an inability to access necessary services in more rural communities would mean they will have to move elsewhere as they age.

A sense of safety and security

We heard people talk about safety and security in different forms. Some people referred to being financially secure in order to make sure their needs are met or they can access the services and care they need. “Be financially stable” was one of the three top choices respondents to the survey selected as something they felt they or loved ones needed to age well. Other people talked about physical safety, particularly regarding being able to safely get around one’s home or in one’s community as a pedestrian or as someone who doesn’t drive. And others talked about the importance of being able to trust and feel safe with caregivers or other support people who come into people’s homes.

The following is a selection of comments we heard through online and paper surveys, community conversations, and interviews. The full set of comments was provided in a separate file to AGE+. Comments submitted through surveys are not altered or edited by Oregon’s Kitchen Table. They are presented as written by participants. For comments submitted in languages other than English, we have provided a rough translation.

What does it mean to age well / have a community where everyone ages well?

“I think some people have the opportunities to age better than others by means of in home care, income, health, safety, housing, etc. Some people have more access to these opportunities while other’s do not have the same privilege’s. Some individuals have natural supports that improve one’s physical and mental health.”

“Pienso en cuidarme y en no estar enferma para que mas hijos no se preocupen y no tengan que cuidarme. (I think about taking care of myself and not being sick so that my children don’t worry and don’t have to take care of me.)”

What does it mean to age well / have a community where everyone ages well?

“Aging in a multigenerational community where elders and children live closely together.”

“As I age I think these phrases mean maintaining independence, having financial stability, being active and valued in my community and having health.”

“Being able to get out and go to community events, meetings, and concerts even as I lose my ability to drive or walk very far.”

“En tener acceso a comida, un lugar digno donde vivir, acceso a cuidado médico y transporte y una situación económica desahogada (having access to food, a decent place to live, access to medical care and transportation and a comfortable economic situation).”

“Everyday living without outside help. Ability to cook, go outside, go to medical services, shopping, socialize with minimum outside help. Get assistance, when needed, with a minimum of effort. Available assistance to make home ‘age friendly’.”

“Being in good enough physical and mental condition to contribute to society via volunteering.”

“Having all my basic needs met and feeling safe and secure.”

Ability to contribute

In community discussions as well as responses to the survey, people talked about how important it was for them to be contributing to their families, friends, and communities. Some said “aging well” means being able to volunteer or give back to their community. One Tribal member shared that “Cultural and heritage department work on native curriculum for schools was a good project for me” to be engaged with their community.

Feeling respected and valued

People also said that how they are viewed or valued by others in their community is important to them. Several people used the phrase “be respected.” Others said being included by others in their community is a part of aging well for them. One discussion group shared that “a sense of being valued and having a voice in the community” is a component of a community that supports people as they age.

Throughout the engagement effort, people often mentioned that “aging well” is based on one’s particular needs and abilities. One person said, “Living on my own terms,” while someone else said, “Living one’s life as one wants to, as well as one can.” When it came to what that looks like for a community as a whole supporting people to age well, one group said such as a community is one “that allows people to make decisions about where they want to be and the kinds of supports they need in order for that to happen.”

SECTION 2: COMMUNITY ASSETS AND STRENGTHS

Across different forms of engagement and with different regions, some common community assets emerged that support people as they age, including the key roles that older people play in supporting and strengthening their communities. In community conversations and in responses to the survey, many people shared specific assets—from individuals to organizations—that they know personally or know of in their community.

The collections of these specific assets from each of the four community conversations are included in appendix A. In fact, participants in those conversations named the collection itself as a valuable outcome of their conversation and noted that they felt inspired by seeing what their community was already doing, while recognizing the need for many more resources (see Section 3). One participant observed that hearing the different resources and assets already available made them think of the story of *Stone Soup*: at first you might think there’s not much going on here, but then everyone adds a little bit and it’s encouraging to see the ingredients. They noted, “But you still have to put it all together and make the soup.”

We also often heard a desire for an accessible, comprehensive list of resources by community. For some communities, such a list either existed or was currently in development. People shared the importance of making sure the list was accessible in multiple formats as well as in multiple languages.

VOLUNTEERS

People frequently noted that older people in their communities are the volunteer base for many community organizations and activities. Several people shared stories or examples of individuals they know volunteering, particularly at community or senior centers. One person said, “Most of the nonprofits in our community rely on volunteers. Seniors represent the majority of all

volunteers in my town. We really saw the impact at the start of the pandemic when all seniors were asked to stay home. Things ground to a halt!”

Volunteers:

“People over 60 are the primary volunteer drivers (because most have the time due to retirement) offering a free scheduled medical transportation service organized in our community.”

“Our church could not survive without the many volunteer hours that retired older people give to support it in dozens of ways.”

“My community is blessed with a diversity of expertise and experience among its residents which is generously shared by many through their volunteerism. Because of a lack of other resources in the community to serve some of the needs of the aging population, maybe our volunteer resources could be more effectively and efficiently coordinated and distributed.”

“por ejemplo donde yo voy ala clínica las enfermeras y doctores son personas de la tercera edad y voluntarias así que todas aportan ala comunidad sin algún sueldo alguno.” (For example, where I go to the clinic, the nurses and doctors are elderly people and volunteers, so they all contribute to the community without any salary.)

“There are some amazing women that run ‘Helping Hands’ which recycles clothes and other items for people that can’t afford it. We also have some great people working at our Senior Center who work with folks with dementia, do phone calls to isolated people, and have a ‘fix-it brigade’ where people help fix things in homes. I think we have an impressive Food Share program run with the help of elders.”

“The average age in our community (Manzanita, OR) is almost 65 years old. Many services here are run by retired people, government, food banks, nonprofits. So our community is made possible by the efforts of older people.”

Many people also said that they saw volunteering as a critical way to connect older people to others and to the community. One person wrote, “Our Adult Center has a theater group that entertains, brings up important conversations, and raises money for Meals on Wheels. They build community, keep each other engaged and stimulated, and take care of each other. My mother is in this group and it is very important to her well-being.”

While many people shared that volunteering is a key way that older people contribute to their communities, people also worry that many services and organizations within the community that help older people rely too much on those volunteers. One person said, “My community is vibrant due to a committed group of older volunteers. However, burnout is an issue and covid has made this a greater challenge.” In one community conversation, a participant pointed out that there is a lifespan of volunteerism which means people cannot volunteer forever. They said they had noticed, “A lot of the people we assist now used to volunteer and are no longer able to.”

COMMUNITY INSTITUTIONS

Individual communities talked about particular organizations, institutions, or individuals that they rely on for particular services or programs (see appendix A. Meeting Summaries from Community Conversations). Many people in the community conversations and survey responses shared that community centers, senior centers, medical institutions and libraries all play critical roles in helping people in their community as they aged. In the survey and community conversations, many people thought that a hospital, clinic, or health related program is a crucial institution to help people as they age. Of people who responded to the survey, 20 percent selected this option. In community conversations, people shared that they feel lucky to have the health program or institution that was in their community, even if they have to travel farther for more specialized care. Some people shared that they recognize the challenges that other rural communities that don’t have such a program or facility face.

“Our Hoffman Center for the Arts helps to bring arts, education and culture to our three-village area. The program is volunteer run, and most of those volunteers are 55 and older, most in their 60s. They have created outlets for community centers to explore their creativity and to connect to like-minded community, with the art workshops, clay studio and workshops, writing program and workshops, garden and workshops.”

Several Spanish speaking community members mentioned that they wish there were community centers or senior centers specifically serving their community and providing services or activities in their language. One person noted that having dedicated staff who could offer programs that are of interest to older people and offered in Spanish at existing community centers would be a benefit for the community.

We also heard that food banks and Meals on Wheels are important assets, particularly for people who might not have friends, family, or neighbors nearby to help with access to food. COVID further highlighted for people the importance of these programs in their communities. Some people also shared that food delivery services have increased during the pandemic in some places, improving food access for older people who have difficulty navigating stores.

KNOWLEDGE, HISTORY, AND CULTURE

In interviews and survey responses, many people shared that older people play critical roles in their community by serving as mentors or teachers in some form. This was a repeated theme from participants who identify as Tribal members or Native or Indigenous people and from people who identify as Latino/a/x or Spanish speaking. One Tribal member said that older people “anchor families” as “keepers of memory and passing down knowledge.” Another Tribal member shared that “On my rez, they help younger generations to understand why & how things are supposed to be done.”

Stories about how older people are contributing in their communities through passing on knowledge, history, and culture:

“Older people can pass on their knowledge that they know and craftsmanship for younger people.”

“On my rez, they help younger generations to understand why & how things are supposed to be done (re: about our longhouse ways, medicine society, NAC, Shaker, feather church, religion, etc.). Also telling legends, stories of them growing up as well as just being there for everyone to love.”

“Without the presence of older people, ‘younger’ folks don’t understand the circle of life—what the future holds for them. All ages need to be seen. We ARE all connected.”

“The older people in my life/community serve as a source of calming wisdom, since they’ve made it through trying times and they help me know that it will be okay in the end. They help keep a connection to the past (history, family, traditions). They show me what I can look forward to in my old age, and certain ones of them give me a template of living toward which to strive.”

CARE AND COMPANIONSHIP

Other people pointed to the critical role that grandparents play in caring for children and that older people play in caring for other older people, whether they are relatives or not. One person wrote, “Muchas veces cuidan de otros” (“They take care of others”) in response to how older people are contributing in their community. Another shared a more specific example: “Mi abuela aporta en la familia en el cuidado de sus nietos después de clases. Ayuda en el trabajo no remunerado del hogar. Brinda sus conocimientos al grupo familiar y la iglesia.” (“My grandmother contributes to the family by taking care of her grandchildren after school. Help with unpaid housework. She offers her knowledge to the family group and the church.”)

“I have an elderly friend who was running into money troubles; she wound up being a paid caregiver for other homebound elderly people. Her tasks are simple and she gets to be paid and be a companion to those who are in her age group. She gets a sense of pride in doing this and she helps others AND she gets paid by the agency who hired her to do this.”

SECTION 3: RESOURCES NEEDED TO SUPPORT OREGONIANS IN AGING

INFORMATION

While there was a wide variety of responses about how easy people think it is to access information and then navigate that information, participants’ responses about why they find it easy or difficult to access and navigate information revealed a number of key resources as well as barriers. Of people who responded to the survey, 60 percent said that they think it was either “somewhat easy” or “neither difficult nor easy” to get the information they need. Many people who identify as Spanish speaking said that a lack of information in Spanish is a main barrier to finding and accessing the information they need. In community conversations, participants shared many resources for information (from organizations to individuals to websites or region-specific resource guides), but they also shared challenges that they themselves or others they know have had in trying to find and access information.

Relying on close circles for information

Many people said they rely on their own skills or their close circle's skills (friends, family, neighbors, or primary care providers) to get the information they need or to find out where to get it. Several people shared that their grandchildren play a critical role in helping them find and navigate information on the internet. Others shared that being part of a group of people who are going through similar life stages and experiences is important to them as it gives them a resource for information on aging issues. A few people shared stories of how they act as a support and resource for friends and family in helping them to access information on the internet.

“Consultar con amigos, comunidad, vecinos e instituciones de la comunidad hispanohablantes para conocer los recursos que existen. (Consult with friends, community, neighbors and institutions of the Spanish-speaking community to know the resources that exist.)”

Language barriers

People talked about a few different language barriers when sharing what made accessing information difficult. Many Spanish speaking participants pointed to a lack of information or resources in Spanish. Some people also said that when they do find information, it is confusing and hard for them to navigate. Even if they could find and access a source of information, they felt like the information wasn't conveyed in a way that is easy to understand and use.

“El idioma es muy dificil para my y mi esposa. Ya que no hablamos ingles y no sabernos como dener mas informacion. (The language is very difficult for me and my wife. Since we don't speak English and we don't know how to get more information.)”

Internet and computer literacy

People also shared that their own computer or internet skills are key to their being able to find information. Other people said that a lack of access to the internet or limited skill with computers and the internet make it challenging to find information. Several people said the challenge was due to living in a rural area without good, reliable internet access. Some people expressed a strong desire for information to be presented in multiple formats (printed and digital) and in easy-to-read formats (larger text online, for example). We also heard that the amount of information online can be overwhelming and confusing, and people shared that they are wary of internet scams as they try to access information.

“Getting information is fairly easy. Getting factually accurate information is difficult. Seems to me there’s too much conflicting information, even in the health care system. Covid information has been a huge eye opener as to how much conflicting information is out there!”

“I don't believe it is hard to get the information, based on my knowledge, it is health illiteracy that is the issue. Most of our elders are unable to understand the information they are receiving from agencies that can assist with their health needs. The amount of information is overwhelming and the language in those documents or brochures need to change in order to facilitate better understanding. That way more people will feel comfortable getting assistance.”

I am 68 and work full time in behavioral health thru the Older Adult Behavioral Health Initiative. I hear from older adults every day. They can’t navigate the systems. The systems, websites, access paperwork and so forth are built for a ‘one size fits all’ format. We need age friendly websites, technology (such as grandpads), simplified processes that isn’t overwhelming.

Human-to-human contact

In addition to internet access barriers mentioned above, some people expressed a desire to be able to talk to someone knowledgeable on the phone or in person in order to get the information they seek. One person said that they found it easy as long as they “found the right person and could ask the right questions.” People shared stories of being sent from one entity to another, sometimes without ever interacting directly with a person, as they sought information.

Ability to navigate multiple and complex systems

Some people pointed to their own abilities to navigate multiple and complex systems as an asset in finding information, both for themselves as well as for those in their circle. Several people said they had gained that ability through their jobs. Other people expressed frustration at trying to navigate a variety of systems for themselves or for those they are caring for.

CARE AND CAREGIVERS

One consistent theme we heard throughout the different forms of engagement was a desire for a variety of qualified professional caregivers, including healthcare workers, homecare workers, eldercare managers, and caregiver teams that would encompass different types of caregiving. Of

survey respondents, 24 percent said that they think that family and other non-professional caregivers need care support in the home and another 24 percent said these people need “help getting access to services.” Both of these needs were echoed in what people discussed in community conversations as well as in stories participants shared through the survey.

We heard in community discussions and in some of the responses to the survey that people see a need for “navigators” or people in the community who support people to help them recognize and navigate needs, and then help them access supports or resources. Other people referred to “eldercare managers” or someone who is like “a paid family friend.” One person described this role as “someone who is in your life, checks in with you regularly, and knows your needs or contacts before you get into the case management stage of life and can help you get to that next level of care because you’ve had a long-going relationship.” In one community discussion, people shared that they see an opportunity for a certificate program for one or more of these roles through a community college or university. Some people said they are concerned that the few people they know of who are in these kinds of roles are themselves aging.

In addition to particular types of caregivers that people would like to see, we also heard that people are concerned about high turnover in caregiving professions. People shared that having consistent caregivers whom they feel like they can trust, particularly in homecare, is important to them. Several people said that it is especially important to have caregivers who reflect or understand their own identity in order to feel comfortable in seeking out care or help. Other people said they want to make sure their communities have caregivers who are trained in supporting elders who have dealt with discrimination in various systems due to race, ethnicity, immigration or legal status, sexual orientation, or gender identity.

Need for many types of caregivers:

“Adequate staffing to respond to the need. Trained work force. The resources to age well are not meeting communities where they are. It’s an expectation that people/families do the research and find the services usually to be told there are not enough. There should be mobile resource vans visiting communities.”

“A health systems navigator or someone who you trust who can come alongside you and provide guidance about all the different systems of care and services. Simplify the process of understanding what’s available and properly accessing care. Transitions in life can be overwhelming and confusing if you don’t know what you don’t know.”

Need for many types of caregivers:

“Every new step of care for my aging (and then dying) father required a momentous amount of advocacy and learning. I need a ‘case manager’ to help me navigate systems and types of care. That case manager was imaginary an imaginary position, and caregiving became my full-time job on top of my already full-time jobs and raising a child. Not until hospice in the last two weeks of my dad’s life did we have comprehensive support and case management and coordination of services and housing referral for him. We’d desperately needed this for three-plus years.”

“I am surprised in all of these questions that it hasn’t really been mentioned that we have now, and will have an increasing, gap of available caregivers and health care providers. The Baby Boomer generation is retiring rapidly. This didn’t just happen, yet our state and country are sadly unprepared for this problem. Oregon, particularly the rural areas is extremely medically underserved. It’s nearly impossible to find a doctor, and that’s only getting worse. And, despite all efforts to stay healthy, aging is inevitable and the majority of older seniors are going to need some type of help to stay independent or even to manage. Where will these caregivers come from????!! Families are already returning to being the core resource, yet financially and emotionally they are not prepared. The increasing rate of dementia is incredible, and there’s been discussion presentations for years, but never a solid plan. We need many more dementia trained professionals and facilities.”

“I am the primary Caregiver for my 83 y/o mother. She has Alzheimer’s and lives with me. I live in a rural community and there are few facilities where she can move to that would be able to care of her. Her Alzheimer’s is progressing rapidly and I will need to move her into a facility as I don’t have the ability to care for her 24/7 as I work full-time. There are few affordable resources for in-home care to help. Its frustrating, she is alone all day and needs social interaction/stimulation and I can’t get that for her. I also see many patients spouses that I work with that are in similar situations.”

As people in rural communities who have a hospital, health clinic, or other health program shared how critical that resource was in their family, many people also noted how challenging it is to access specialized providers even with the presence of a hospital or other health institution. People in rural communities without a healthcare facility shared that a lack of transportation compounds their abilities to access care as well, particularly once they are no longer able to drive themselves.

OTHER NEEDED RESOURCES

Throughout the different community engagement activities, people expressed their desire that they, their loved ones, and their communities have enough housing that people can afford as they age, housing that supports people as they move through different phases of life and mobility. People saw access to housing as important to a workforce that can provide care to people as they age, to intergenerational connections, and to supporting older adults to continue living independently. One community discussion group noted that their community has made progress in creating more housing options for different incomes in their area as an asset, but they thought the need continues beyond what their community has been able to do so far.

We also heard a number of people talk about the availability of assistance with regular chores or tasks, such as shopping for food or medicine, performing minor home repairs, or maintaining landscaping. While there were examples where communities have put some resources in place or are working on developing those types of resources, people expressed concerns around the following:

- Trust in the assistance or in whomever is providing the assistance
- Having an ability to pay for such assistance, even if the fee is small
- Long-term sustainability of support, particularly if there is heavy reliance on volunteers

And, finally, while transportation itself didn't often rise to people's top three priorities, it was often cited in connection with other needed resources or other concerns. Some people pointed to expansion of transportation options, particularly in rural areas, as critical to being able to access other services.

SECTION 4: Conclusion

Throughout this community engagement effort to hear from Oregonians what they thought would support themselves, their loved ones, and their communities as they age, people shared a range of concerns as well as hopes. In the midst of two waves of the COVID-19 pandemic (the tail end of Delta and the Omicron surges), approximately 1,500 Oregonians participated in some form of engagement on this topic, including from communities that have been particularly impacted by COVID. And while many people shared concerns about an increase in loneliness alongside a decrease in activities and social opportunities due to COVID, people also looked for opportunities to build on the new types of services or increase in services that emerged during COVID.

One thing that stands out among the many forms of engagement is an appreciation for community. Even as people shared concerns about how they might access needed services as they age in their communities, they also shared a strong desire to be able to continue living where they do and to be able to contribute in making it easier for others to be able to continue to age well in their communities. While people generally agreed that resources and access are greatly needed to support Oregonians as we age, we repeatedly heard people in different communities throughout Oregon share how lucky they feel to be in their community. Many people remarked that they have a new appreciation for the foundations their communities have already built upon to support older adults who wish to remain in their communities.

Appendix A. Annotated Survey Results

Note: Total percentages of responses may not add up to 100% due to rounding.

1. How much do you think about what you or a loved one will need as you age?

RESPONSE CATEGORY	N=1317
A lot	55%
Some	36%
A little	7%
No at all	1%
I'm not sure	<1%

2. When you hear phrases like “aging well,” “aging successfully” or “aging with a sense of well-being,” what do you think of?

Responses available from OKT upon request.

3. What do you or your loved ones need to age well? Please select your top three choices.

RESPONSE CATEGORY	N=3990
Have physical health	18%
Be part of a community	8%
Have someone to spend time with	7%
Be able to be outdoors in nature or where you live	8%
Have a safe and cozy home	13%
Feel independent	8%
Be stable financially	19%
Be able to get needed services like healthcare, food or transportation	18%

4. Think about yourself or the person in your life that is facing the most aging issues. How prepared do you think you are or a loved one is to age well?

RESPONSE CATEGORY	N=1329
Very Prepared	18%
Somewhat prepared	56%
Only a little prepared	18%
Not prepared at all	6%
I'm not sure	1%

5. How prepared do you think your community is for people to age well?

RESPONSE CATEGORY	N=1325
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Very Prepared	6%
Somewhat prepared	29%
Only a little prepared	43%
Not prepared at all	17%
I'm not sure	5%

6. What are some of the ways that older people contribute to your community? Please select all that apply.

RESPONSE CATEGORY	N=6055
Volunteer	19%
Teach	12%
Mentor	15%
Help care for others	16%
Work	11%
Serve in elected office	11%
Serve as a leader in the community	14%
Other (please describe)	1%

7. Do you have a story you'd like to share about a way older people contribute in your community?

Responses available from OKT upon request.

8. When it comes to aging, what are your top three concerns from the list below for yourself or a loved one? Please select your top three choices.

RESPONSE CATEGORY	N=3983
Be able to move around easily	13%
Be able to get healthcare	13%
Have enough money	14%
Have transportation	5%
Have friends and activities	11%
Have housing	10%
Be able to do daily tasks like bathing or taking medications	11%
Feel lonely	6%
Have memory loss	12%
End of life	5%

9. Which of these do you think are the most important to help you, your family, and community as we all age? Select all that apply.

RESPONSE CATEGORY	N=5498
Community center	13%
Library	12%
Senior center	13%
School, college, or university	7%
Food bank	9%
Groups for people who speak the same language or have the same culture as me	7%
Faith-based organizations like churches, synagogues or mosques	10%
Hospital, clinic or other health program	20%
Veterans' agency	5%
Other (please describe)	4%

10. What other resources do you think your community needs to support aging well? Please select your top three choices.

RESPONSE CATEGORY	N=3892
Health experts trained in care of older people	16%
Housing that is low-cost and meets our needs as we age	22%
It's easy to shop for food, medicines, and other needs	12%
Better transportation options	10%
Better access to information about support or service	10%
Home care or home visits	15%
Healthy food option	5%
More social, education, or recreation options	11%

11. What do families and caregivers need to support older people in aging well? Please select your top three choices.

RESPONSE CATEGORY	N=3849
Support groups	8%
A break from caregiving	19%
Information about what services there are	19%
Help getting access to services	24%
Care support in the home	24%

Information about issues such as Parkinson's, strokes, or Alzheimer's	5%
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12. Where do you go now to get information about the services you need? Please select all that apply.

RESPONSE CATEGORY	N=4197
Senior center	8%
Faith based organization, like a church, a synagogue or a mosque	5%
Veterans' agency	3%
211	3%
County or state agency	11%
Aging and Disabilities Resource Connection of Oregon (ADRC)	8%
Family members	11%
Friends	16%
Neighbors	7%
Internet or website like Google	21%
I don't know, or nowhere	4%
Other (please describe)	3%

13. How easy is it for you to get the information you need?

RESPONSE CATEGORY	N=1321
Very easy	14%
Somewhat easy	40%
Not easy or hard	20%
Somewhat hard	16%
Very hard	4%
I'm not sure	5%

14. Can you please share what makes it either easy or hard for you to get the information you need?

Responses available from OKT upon request.

15. How much do you think about aging issues as you decide who to vote for?

RESPONSE CATEGORY	N=1268
A lot	30%
Some	38%
A little	18%

Not at all	12%
I'm not sure	3%

16. What are the things you look forward to as you age? Or, what are the things you enjoy now as an older person? Please select all that apply.

RESPONSE CATEGORY	N=4963
Have more time to relax	15%
Be or become a support for younger people in my family	12%
Be or become a support for younger people in my community	9%
Have more time to spend with my closest friends and family	15%
Have more time to do the things I enjoy	20%
Be able to travel more	14%
Be able to volunteer	14%
Other (please describe)	2%

17. Is there anything else you'd like to share with AGE+ about aging? This could be either for yourself, your loved ones, or your community.

Responses available from OKT upon request.

18. What is your age?

RESPONSE CATEGORY	N=1377
18 to 24 years old	1%
25 to 34 years old	4%
35 to 44 years old	10%
45 to 54 years old	13%
55 to 64 years old	23%
65 to 74 years old	33%
75 to 84 years old	13%
85 years or older	2%
I prefer not to answer	<1%

19. Are you now or have you been a caregiver for an older person?

RESPONSE CATEGORY	N=1327
I'm a caregiver now.	19%
I have been a caregiver before.	39%

No.	40%
I'm not sure.	2%

20. Are you getting any care now related to aging, like in-home health visits or someone who helps you with daily tasks?

RESPONSE CATEGORY	N=1329
Yes	13%
No	86%
I'm not sure	<1%

21. How would you describe where you live?

RESPONSE CATEGORY	N=1313
Rural area	22%
Small town or city	34%
Suburb near a large city	15%
Large city	28%
I don't know or choose not to answer	1%

22. Which county in Oregon do you live in?

RESPONSE CATEGORY	N=1246
Baker County	2%
Benton County	1%
Clackamas County	5%
Clatsop County	1%
Columbia County	<1
Coos County	1%
Crook County	1%
Curry County	1%
Deschutes County	5%
Douglas County	<1%
Gilliam County	<1%
Grant County	2%
Harney County	<1%
Hood River County	4%
Jackson County	8%
Jefferson County	3%

Josephine County	<1%
Klamath County	<1%
Lake County	<1%
Lane County	1%
Lincoln County	1%
Linn County	<1%
Malheur County	4%
Marion County	1%
Morrow County	<1%
Multnomah County	29%
Polk County	1%
Sherman County	<1%
Tillamook County	5%
Umatilla County	3%
Union County	2%
Wallowa County	1%
Wasco County	5%
Washington County	8%
Wheeler County	<1%
Yamhill County	1%

23. Which races and ethnicities do you consider yourself to be? Please mark all that apply.

RESPONSE CATEGORY	N=1430
Asian, Pacific Islander	3%
Black, African American, African, Caribbean	5%
Hispanic, Latino	11%
Native American, American Indian, Native Alaskan	5%
Middle Eastern, North African	<1%
White, Caucasian	77%

24. What language do you prefer to get information in?

RESPONSE CATEGORY	N=1371
English	93%
Spanish	7%
Other (please write the language)	<1%

25. Do you think of yourself as:

RESPONSE CATEGORY	N=1315
Lesbian or gay	4%
Straight, that is, not gay or lesbian	81%
Bisexual	5%
Not sure	<1%
Choose not to answer	8%
Not listed here (please describe)	2%

26. What is your current gender identity? Please mark all that apply.

RESPONSE CATEGORY	N=1327
Male	26%
Female	69%
Female-to-Male (FTM)/Transgender Male/Trans Man	<1%
Male-to-Female (MTF)/Transgender Female/Trans Woman	<1%
Not sure	<1%
Choose not to answer	3%
Not listed here (please describe)	1%

Appendix B. Summaries from Community Conversations

NOTE: OKT also conducted a few individual interviews with Tribal members or community members in Spanish in communities where community conversations were held. These responses are incorporated into the summary report but not included in the appendix in order to maintain individual privacy.

Tillamook County

November 17, 2021 from 6:00pm - 8:00pm
(held via Zoom)

Participants

32+ participants from the community
AGE+ staff
Oregon's Kitchen Table (OKT) facilitation team

Welcome

The OKT facilitation team (Robin Teater) provided a brief overview of how to use the Zoom chat function and invited people to share in chat: "What's one thing you love about living in Tillamook County?" as people joined. People shared:

- The Dairy air! Said the farmer's wife ;)
- Trees, cheese and ocean breeze
- The beautiful scenery
- The beauty of the environment
- God's family in Tillamook
- Good community, gorgeous place to live
- Like-minded people
- Caring community and beautiful environment
- Being near the ocean
- The beauty
- The seabirds!
- Sandpipers
- Wonderful hiking options

Welcome & Agenda Review

AGE+ Host Committee member Michelle Jenck, Director of Community Integration at Adventist Health Tillamook, welcomed everyone to start the meeting and introduced the goal for the community conversation. Robin gave an overview of the format for discussion and offered some Zoom tips.

Participants were then invited to share with one other via chat or by raising their hands responses to two prompts.

What are you enjoying more as you age, even if you are younger, what you will enjoy in future?

- Freedom from obligations to work
- Retirement freedom
- More time to enjoy gardening
- Sense of community of elders/peers, and children of the community
- More time for travel and outdoor activities
- Volunteering
- More time to create
- Wisdom and patience
- Having time to be involved in community, activities, family and travel
- Keeping in touch with neighbors
- Hiking, fishing, a sense of close-knitted ness like family, volunteerism and a slower pace.
- Time, freedom to choose each day's activity

What are you concerned about aging?

- Housing
- Losing independence
- Living alone
- Lack of public transportation, healthcare access
- Few services such as house help
- Social isolations
- Poor health
- Losing mental facilities and independence
- No affordable housing here for caretakers, paramedics young people
- Transportation: driving
- Ambulance care to hospital
- Having health that allows me the freedom to do what I want to do
- Maintaining my independence, adequate health care and needs that can't be met by my family in Portland
- Takes 20 minutes or more to get first responders in Manzanita
- Transportation to medical/dental specialities in Portland if not OHP
- Air quality concerns in Tillamook town

Small Breakout Room Discussions

Participants were then invited to take part in small breakout room discussions with each other, focusing on three main questions. An AGE+ host committee member provided some light facilitation, helping people move from one question to the next and making sure everyone had a chance to talk. Either an AGE+ or an OKT staff person took notes to capture the conversation. After those discussions, participants returned to the main Zoom room and shared what their group had discussed for each of the three questions.

*GROUP 1***What does a community look like where everyone ages well?**

One member of the group noted that they are seeing a lot of change in how we think about aging. Many people now want to stay in homes, be supported staying in homes, and have resources to continue to live independently. For a community that allow people to do that:

- Community has social activities, including exercise, so people will get out and about, get out of their homes and be with other
- Community has a good transportation system that is expanded / offers more resources throughout the county

Needs or needed resources to achieve a community that supports people as we age

- Need to redo planning of our communities, so that we plan for aging and then have the resources and everything built in
- Need a central information hub for all of the organizations we do have that are helping (Quote: “If I don’t already know the organizations, I don’t know where to go to get help.”)
- Urgent care
- Grocery stores and expand what can get get delivered to homes
- Need for buddy systems. We could pair up people or have a hub of people that would do things for each other. For instance, someone could drive someone to an appt, someone could pick up groceries
- Affordable housing, both for seniors and people working in community
- Need to organize more efficiently and effectively

Assets that are working in community

- Rainy Day Village
- Dial-A-Ride
- North Coast BBQ - centralized info that ppl can go to (northcoastbbq.com)
- North County Recreation District
- Kiawanda Community Center
- Hoffman Center for the Arts - do a lot of activities in afternoon rather than later at night / in dark
- Sitka Center

The group felt that the biggest assets their community already has are the neighbors, friends, residents who live here. Someone shared that they saw that the previous Friday when the community experienced flooding, particularly in an RV park. Hotels were calling to offer rooms to people and other community members immediately started donating food.

GROUP 2

Group 2 shared that simply making this a topic of public interest was very important. As one person said, “To show up and have this conversation is amazing”

What does a community look like where everyone ages well?

Group 2 summarized their vision for a community where everyone ages well as one where people stay involved, connected, and active in a multi-generational way, with people available to help do the things older community members can't do anymore.

Needs or needed resources to achieve a community that supports people as we age

- People willing to help and money to support that
- legal help for End-of-Life decision making
- transportation alternatives
- Housing needs
- Having behavioral health support
- Connection to services, transportation, and housing

Assets that are working in community

- Rainy Day Village in North County to match labor needs with volunteers (was just about to launch right before COVID and hope to be up and running in next year or two)
- Meals On Wheels
- Churches
- Volunteerism
- Increasing housing (new coordinator position)

GROUP 3

The group member who shared the summary of the group's discussion noted that a high degree of engagement and care from the Manzanita area was evident in the group.

What does a community look like where everyone ages well?

- Diversity, including multi-generational diversity, was important to be a healthy community
- Having a sense of community and people willing to give back and contribute
- A built environment (e.g. sidewalks, benches, open public restrooms) that supports all people and is available to everyone

Needs or needed resources to achieve a community that supports people as we age

- Diverse, affordable, and attainable housing
- Stable healthcare workforce (Quote: "Being able to establish relationships with healthcare providers is important")
- Housing for healthcare workforce
- Access to health activities and healthy food
- Increased integration of existing resources
- Access to everyday home repair needs

Assets that are working in community

- A lot of people who are contributing in a lot of ways, including volunteers and small businesses and community organizations; saw this during covid
- Churches
- Library system
- Community gardens
- Emergency Volunteer Corps
- NCRD

- YMCA
- Tillamook County Wellness Initiative
- Connect Oregon Network (electronic platform that has 20 partner organizations in area and is being expanded / built out)
- Coming soon: a network for Community Health Workers

GROUP 4

In Group 4, participants expressed how much they loved living in Tillamook County but some are also worried they might need to live elsewhere as they age in order to get what they need.

What does a community look like where everyone ages well?

- A community where places are easy and safe to get to
- Good access to medical care, reliable caregivers

Needs or needed resources to achieve a community that supports people as we age

- Would like to see more diversity, including people of different ages, different income levels, different interests, different orientations (Quote: “I didn’t move here to move into a senior community, but I find myself by default in a place with a lot of older people.”)
- Affordable housing
- Public transportation or a system you can call up and get a ride to go where you need to go, especially for emergency medical assistance (might take EMTs 20-30min to get to home and seemed like a long response time)
- Some way to make more friends / connections in an informal way, especially if not part of a church. Someone wondered, “is there anything else like that that is structured and helps build networks of friends?”
- County seems focused on tourism and not on services for seniors
- Too much relies on volunteers (Quote: “sometimes it seems like volunteerism is the only way to get things done. It feels like seniors taking care of seniors and that’s not the best model.”)
- Would be nice to know more about each other, such as who we are, what our capabilities are, what incomes we’re living on

Assets that are working in community

- Food Bank
- Local businesses, such as grocery stores, are very invested in community and resource for helping people in a crisis (Quote: “They know that they need us and we need them”)
- Public library system, especially in help with getting internet access and support
- Hoffman Center
- Local fire department (loans out medical assistance equipment like walkers, canes)
- BBQ (neighbor-helping-neighbor)
- Animal Haven (helps take care of pets for people)
- Master Gardener Program
- Women’s Club

Discussion on what was shared

Different individuals shared their opinion about some missing elements that may be helpful for them in the community. An additional asset mentioned was the Emergency Volunteer Corps in both North and South Counties, which both helps community members prepare for emergencies and

helps create community cohesion. Participants also discussed the impact of COVID with a lot of local meetings and activities canceled or closed. Therefore, people are feeling isolated and are relying on friends and families. COVID has created an opportunity, though, for thinking about what might be needed to create and expand for a better infrastructure.

One common thing that came out was that all four groups placed an emphasis on the need for housing, particularly for people who work in various roles in the community. People shared that they saw both a need for affordable housing and “workforce housing.” Other people shared that they saw more housing being developed recently and felt that the area was working to meet that need. Another person thought that “The county and cities need to encourage zoning help for ‘extra’ housing.”

Another important point that came out in the discussion was about volunteerism. On the one hand, people recognized how critical volunteering was as an asset. Other people also expressed concerns about how many assets in the community rely on volunteers. Someone pointed out that there is a lifespan of volunteerism which means people cannot volunteer forever. They asked, “Are those of us who are volunteering more sensitive to ending of volunteer life because a lot of the people we assist used to volunteer and are no longer able to?”

People also noted that they saw a common theme around the need for a central hub. A couple of people wondered if there was a way to take advantage of different assets and resources and be more efficient by collaborating.

Finally, many people shared additional resources, links, and offered their own contact information to each other to learn more about various resources. A couple of people mentioned wanting to make sure that information was shared as they found it very valuable.

Jackson County

November 10, 2021 from 6:00pm - 8:00pm
(held via Zoom)

Participants

~40 participants from the community
AGE+ staff
Oregon’s Kitchen Table (OKT) facilitation team

Welcome

The OKT facilitation team (Robin Teater) provided a brief overview of how to use the Zoom chat function and invited people to share in chat: “What’s one thing you love about living in Jackson County?” as people joined. People shared:

- The beauty of the fall tree colors!
- The closeness of the out of doors. I live in Ashland
- The Ashland dog park and community activities like peace house
- Love Talent. Great small town, lots to do but still a small town feel. A very walkable community.
- My new community. I have great neighbors many of whom have become good friends
- Medford, beautiful scenery and organizations that work together cooperatively.
- Great place. Great people.
- I love all the friendly people outdoor recreation opportunities.
- Voters' earlier support to form a Library District so our public libraries' funding is secure!
- I enjoy the pace (slower) of life; lower traffic and really, really nice people!

- Lots of outdoor activities.
- What they all have said :-) + great hiking trails.
- Besides loving the beauty of our outdoors here, I love being in a community that is approachable. Having lived in bigger urban areas, I love the feeling here of familiarity with a larger percentage of this community.

AGE+ Host Committee member Liz James welcomed everyone to start the meeting and introduced the goal for the community conversation. Robin gave an overview of the format for discussion and offered some Zoom tips.

Participants were then invited to share with one other via chat or by raising their hands responses to two prompts.

What are you enjoying more as you age, even if you are younger, what you will enjoy in future?

- Continuing health
- Know and like myself better than in past.
- I enjoy sharing the changes I'm experiencing with my grandchildren.
- Still learning
- I think I'll enjoy more leisure time.
- Decide what I want to do
- Oodles of great memories and room for lots more
- Continuing meaningful work!
- I like knowing what services are “out there” if and when I need them. I also love that there are many of “me” amongst us. We live in a very responsive community.
- At 56 I deeply value each time I see my parents, knowing it might be the last. Not in a sad way but in a highly appreciative way.
- Naps

What are you concerned about?

- Cost of care
- Availability of CARE!
- Sources of personal support - all my age or older...
- Whether or when I might need to move closer to my adult child's family.
- Will services be available and affordable?
- Affordable housing - recovering from fire loss
- Finding balance, working full time, raising small kids and caring for my parents, along with self care.
- Coping with loss of independence
- At 33, I am concerned about cost of living and inflation. What will that look like in the future?
- Minimal public transportation
- I walked dogs for a time at Pioneer Village here in J-ville. At first it felt strange visiting a senior living community, but over time, I began to know people and feel at home there. The faces I'd see became people I cared about, chatted with, and had interesting conversations with. It opened me up to what the world of aging was about.
- Adequate and affordable transportation when I can no longer drive.
- What will social security and medicare look like in the future
- Where is climate change going in my lifetime? Fear for children and grandchildren.
- Becoming invisible

- Increasing hearing loss
- Endless pandemic precautions
- I love humor and cartoons about getting “old”!
- Increasing disability in general - vision, hearing, mobility, continence, etc.

Small Breakout Room Discussions

GROUP 1

What does a community look like where everyone ages well?

People in this group shared that while they recognized that people have different points of view about aging, such a community would include:

- Caregivers and specialists, including in mental health, who specialize in gerontology
- Opportunities for people to connect, gather, converse, listen to, and support each other
- Transportation is available for people to come together
- Opportunities for community service, which provides connections for seniors, too
- Different ways for people to stay engaged, depending on their own preferences
- Culturally competent

Needs or needed resources to achieve a community that supports people as we age

Some of the group’s discussion focused around caregiving as a profession and what might be needed to meet the needs of the region. These ideas included:

- Approaches to bring people into profession as culturally competent successful caregivers
- Make training and pay more attractive. “It is hard work and merits a liveable wage.”
- Resources for independent caregivers
- Certificate program through local educational institutions like Southern Oregon University that includes pieces beyond the regular scope of responsibility, such as advocacy
- Medicare Oregon does not pay for In Home Care while other states do

The group also discussed LGBTQ+ Elders don’t seek medical care or are not out to caregivers as they may feel vulnerable doing so. One participant shared a story about a trans community member who had a heart attack and was afraid to go to the hospital for fear of discrimination, undocumented people feel this way as well. Others wondered about other intersectional barriers for people that are important to understand in thinking about what might be needed.

Other areas of need discussed include:

- Need a place to call to be directed to resources
- Funding for senior housing
- Long distances between homes, such as ranches, and hospitals / family. “It may be too far for family and family is crucial to recovery.”
- Disparities between more urban areas and more rural areas. Grange Halls used to serve as community gathering places, but now need a similar type of multi-use center that seniors could access to socialize, play card games, and do other activities.
- Different ways to communicate with seniors. This became evident after the Fire as people left the area and email was difficult for seniors.

Assets that are working in community

- AllCare Pace Program but lacking locations in Talent, Ashland or Central Point (hopefully looking to set up a satellite)
- Asante Ashland Hospital is working on dedicating a number of rooms that focus on aging
- Food and Friends Program
- Ashland Food Bank - volunteers get to know recurring clients
- Ashland Library and Senior Center partner to request books and then deliver them
- Meals on Wheels
- Ashland at Home: paying \$500 per year provides transportation, picking up meds, errands accompanying someone to doctor's visits
- Aging and Disabilities Connect (part of Rogue Valley Council Government)
- Word of Mouth Referrals
- Connect Oregon
- Churches understand the needs of their aging parishioners
- Could connect through grocery stores-flyers
- Neighbor Outreach
- With COVID people started shopping for neighbors and people got to know who was on their block

GROUP 2

What does a community look like where everyone ages well?

- A civil society where we can have disagreements but still care about each other
- Bellingham model of how city listens to senior concerns
- Different modalities of transportation
- A diverse community that is welcoming to all and rich with different cultures
- Having available home and caregiving services and screenings for those services so you can trust and rely on how comes to your home
- Variety of things going on and activities that are age appropriate and keep people in community with each other
- Community that allows people to make decisions about where they want to be and the kind of supports they need in order for that to happen
- Local, personal news (Rocky Point News)

Needs or needed resources to achieve a community that supports people as we age

- Caregivers and people who are willing and able to do the job and stick with the job so people can stay in their homes and not be forced to move.
- Housing - accessibility, affordability housing (may require code or zoning changes).
- Support in own home (caregivers, people to do other tasks) and ways to overcome feeling vulnerable in bringing people into the home
- Need for navigators: We have a lot of services but need people to help navigate, find out what's available and where to go
- Transportation of all kinds, including sidewalks, especially in more rural areas
- Senior-friendly workplaces. Seniors do / want to work but we need to look at how we adapt those workplaces so it's possible for them to continue working
- Health supports, especially geriatricians in the Valley
- Behavioral Health and addiction supports
- Group support so people can get together and maintain communication. Hearing loss also plays a part in that. "I find myself more and more isolated, even when I'm in group settings. That has an effect emotionally."

- A way to make sure more collaboration / sharing of resources and information is happening as many churches and organizations operate in silos
- Volunteer opportunities

One group member noted that they see that many of these resources are available at places like The Manor in Jackson County, but that they think public support is required so more people, including people without financial resources, can also access them.

Assets that are working in community

- Rogue Valley Community of Governments
- Meals on Wheels
- Food and Friends
- Many of the religious organizations are providing a sense of community for others.
- ADRC
- Senior Services/AAA
- Rebuilding Together Rogue Valley (helps with adding grab bars and ramps)
- Osher Lifelong Learning Institute - Lets people keep their minds sharp, does classes on advanced care planning
- YMCA in Ashland and Medford
- Lots of great retirement homes - but not affordable
- Various festivals, Oregon Shakespeare Festival, theaters that add to the culture

GROUP 3

What does a community look like where everyone ages well?

- Excellent transportation - mass transit, walkability, mobility
- Affordable housing
- Healthcare availability at all different levels
- Such a community is not suffering from what we're seeing with climate change

Needs or needed resources to achieve a community that supports people as we age

- Tax breaks for having multi / intergenerational housing or house-sharing
- ADUs - getting rid of single family residential zoning
- Increasing hospital beds in area
- Increasing healthcare providers that know how to care for aging / senior community
- Help / education for older people to avoid scams (e.g. "the grandchild needs money" scam)

Assets that are working in community

- Very strong sense of community - we all came together to help each other during Alameda Fire - charitable org's had to turn ppl away from donations / offering help
- Political representatives seem to work for the people here / represent our needs.
- AARP
- Medford Senior Center
- Tax assistants
- Non-profits
- Adequate healthcare facilities - just need more of them trained in dealing w/ aging
- "Retirement connection" (helps to guide age people for aging process)

GROUP 4**What does a community look like where everyone ages well?**

The group observed that they think it's important to look at all ages / stages of life when thinking about a community. They also shared that such a community would have:

- Adequate healthcare, access to transportation and outdoor activities, and accessible / affordable housing
- Education in general for all ages
- Opportunities to engage across generations
- Volunteer opportunities
- Making provisions for those who have responsibilities when functional declines arise
- Functioning processes and infrastructure to fill prescriptions
- Being able to ask anyone for help

Needs or needed resources to achieve a community that supports people as we age

- Opportunities for people to get to know other people
- Connecting with existing organizations (like hospital systems) to do more intentional community education
- More formalized education and exposure in fixed times and places that aren't just online
- Alternative communication and outreach methods
- Training for professionals
- Opportunities to help people of all ages see how they can support the broader community
- Collaboration
- More opportunities to discuss the topic of aging in new ways

The group also discussed the need for people - in a variety of roles - to be supportive of people as they age, either informally or in more formal, professional capacities. This included:

- Robust service community (with trained professionals) where people are aware of services and can navigate/access them
- Care teams: More people in the community supporting people to both recognize and navigate needs, then knowing where to refer them for support or resources
- Intentionally focus groups to develop supports
- Develop navigation opportunities - potential for positions related to being community advocates - formal navigators who could be integrated into institutions or another source
- ID individuals that people would be comfortable to speak with (in person, phone or by Zoom)

Assets that are working in community

- AARP
- Initiatives around age-friendly environment (like Age Friendly Committee in Ashland)
- Senior Disability Services
- Food & Friends
- Hospitals support the community
- Hospice services
- Community Centers in specific towns in County
- SOU - cultural opportunities, potential development of Aging Services Program
- Libraries
- La Clinica de Valle

One group member concluded by sharing that they thought, “Information, education, and communication will move us forward regionally.”

GROUP 5

What does a community look like where everyone ages well?

The group highlighted that equitable access and resources were important themes, across these different aspects of the community:

- Readily available, affordable transportation.
- Well trained and well screened home healthcare workers.
- Nursing facility workers are well trained and well screened.
- Qualified, trained staff with specialization in the fields of gerontology and geriatrics.
- People of all ages are thriving and can see each other thriving at different stages of life. This brings personal happiness and a sense of community well-being.
- Multi-generational interactions are commonplace.

Needs or needed resources to achieve a community that supports people as we age

- A center (like a large hall or community center or conference center) that accommodates people of all abilities. Somewhere for the community to gather inclusively.
- Better pay, benefits and training to entice people into homecare work and increase the quality of homecare
- Broadband access and technology training
- Affordable prescriptions
- Workplaces without age discrimination (training for this)
- Resources and encouragement for Clear end-of-life plans with advanced directives
- Navigation assistance
- Housing that is accessible, affordable, supports all abilities, and fosters intergenerational connections
- Broadband access and technology training

The group also recognized that any number of things (the pandemic, a health crisis, a financial crash, caring for adult children, or disparities due to race, sexual orientation or gender identity and institutionalized biases) could lead to being an older adult without the financial resources needed to maintain well-being. They also noted the importance of training for nursing home and home health workers that includes working with older LGBTQ+ community members, people of color and others who may have faced a lifetime of discrimination and don't ask for assistance.

Assets that are working in community

- Ashland Senior Services Division has great programs and great reach (beyond Ashland)
- The local AAA - which is run out of RVCOG
- local AARP Community Action Team
- The City's Solar Ray program in Talent
- Retired Senior Volunteer Program (RSVP)
- Grant's Pass Senior Center
- Food & Friends
- Jamie Callahan
- UCAN in Josephine
- Community Volunteer Network (Call-a-Ride, SHIBA) - provide navigation assistance
- OLLI

- Medical Centers & Hospitals
- Pickle Ball
- There are so many groups to get engaged with: United Way, SOHealthe, YMCAs, climate activist groups
- Faith communities - churches, temples, mosques (for gathering and support)
- Shakespeare, The Bridge, many theaters, film festivals, Camelot in Talent, wineries and craft beer, Community College and Southern OR University, Maker City (Talent and Central Point)
- All Care - participating in the PACE program, a model to aide with aging well in place.

Discussion on what was shared

A couple of people in different groups shared that they observed that mostly women were participating in today's conversation. Some voiced a curiosity about why this may be. Others shared that in their experience there has historically been a power differential, with women planning and thinking about community needs and then having to ask people in power, usually men, to fund these needs. Another person noted that there are lots of older men who are having problems, but they may hesitate to reach out and ask for help.

- Communications was a common theme
- Often heard a lot about need for older adults to have help with maintenance at home, which seems to be a gap in the community
- People felt like they learned from the assets list that was shared tonight, and that there was an opportunity to help keep this conversation alive and empower people in this space to share this info with community members. Participants requested to get this list back so they could have it and be able to distribute it, too.
- A desire for screening services for people living in their home, so people can feel safe about who they hire to be in home or to do repairs or take care of house or take care of them physically in home.

Participants also discussed another common element in the group discussions was the different types of caregivers, patient advocates, or people who could assist with what one person referred to as “eldercare management.” This role was described as “a paid family friend,” a person who is in your life, checks in with you regularly, and knows your needs / contacts before you get into the case management stage of life and can help you get to that next level of care because you’ve had a long-going relationship.

Someone noted that there were a very limited number of those types of people as well as adult foster care operators in the region, and now many of those people are aging out, too. People also shared that they saw an opportunity for a certificate program for one or more of these roles through the community college or SOU and felt like highlighting this job market for those in higher education was important.

The Dalles / Wasco County

November 4, 2021 from 6:00pm - 8:00pm
(held via Zoom)

Participants

19 participants from the community
AGE+ staff
Oregon's Kitchen Table (OKT) facilitation team

Entering the Zoom Meeting Room

The OKT facilitation team (Robin Teater and Sarah Giles) provided a brief overview of how to use the Zoom chat function and invited people to share in chat: "What's one thing you love about living in The Dalles / Wasco County?" as people joined.

What do you love about living in The Dalles / Wasco County?

- The people, the views and the feel of community
- Living my life in Gilliam County, driving less mile is wonderful
- The natural beauty (mountain, rivers, forests and fields), country living with privacy
- Appreciate services such as the Link bus for people with problem driving
- Sense of community
- The history of Wasco County
- Strong community connections

Welcome & Agenda Review

AGE+ Host Committee member Scott McKay welcomed everyone to start the meeting and introduced the goal for the community conversation. He noted that Oregon's Kitchen Table would be facilitating the meeting and AGE+ staff would be listening and helping with note taking in breakout groups. Robin gave an overview of the format for discussion and offered some Zoom housekeeping tips.

Participants were then invited to begin the discussion by sharing one thing they're looking forward to or are concerned about aging. Some participants shared verbally while a few others shared in the Chat.

What's one thing you're looking forward to or are concerned about aging?

- Wisdom gained from experiences.
- Enjoying retirement, walking dogs and playing golf
- Enjoying outdoor activities: camping, fishing and walks.
- Teaching high school students and they respect me
- Flexibility to devote time to activities that are I'm most interested in
- A better perspective on what is really important
- Feeling comfortable with who I am

Small Breakout Room Discussions

GROUP 1

What does a community look like where everyone ages well?

In such a community, people stay social, are mentally active, and feel purposeful. There's access to good medical care, a hospital, and low-cost long-term care. People have food security and shelter in which they feel dignity and respect. They can remain independent and in their homes.

Needs or needed resources to achieve a community that supports people as we age

- Attention on adults experiencing houselessness and their needs as they age
- Addressing food insecurity
- Ways to provide supports for older adults who want to remain in homes, especially with odd jobs that are more difficult to do
- Companionship for older people
- Long-term care
- Healthy workforce to do important jobs like in-home care
- Connecting people to volunteer opportunities, perhaps through a Peer Mentorship program for older adults as volunteers
- More accessible and inexpensive transportation that runs more often on weekends

Assets that are working in community

- Law enforcement who are able to recognize dementia when they encounter it on calls
- Long term care facilities, such as Veterans' Home
- Community has a valuable asset in a brain trust of retired people who have knowledge and experience to help our communities.
- OSU Extension - Master Gardeners, StrongWoman program,
- Lions Club, Rotary, Elks, Kiwanis, Salvation Army
- Hospital and public health department (especially with Covid)

GROUP 2

What does a community look like where everyone ages well?

One in which everyone has mental, physical, spiritual and financial health

What other resources are needed:

- Transportation
- More resources for food programs like Meals on Wheels
- Housing is a major need, no matter what someone's age or income is
- Activities that are free or low cost

Assets that are working in community

After reviewing the list of assets the group identified in their discussion, one person in the group noted, "We have a lot going on for a community our size. We can keep people active and we have lots of places for them to volunteer."

- Senior Center
- Meal's on Wheels
- Library
- Classes on technology and other topics

- Churches
- Service organizations
- Helping Hands
- Hospital program with case management and navigators. Social workers and nurses attend to the homeside health issues for people and connect to other resources. They are professionals who understand complicated medical issues and can help set up appointments.
- Community college but there is a cost involved
- Local knitting or reading groups
- Waters Edge and Athletic Club
- Art Center
- The Link is great and growing to meet the needs for those who do not have a car or have trouble driving

GROUP 3

What does a community look like where everyone ages well?

- Access to good healthcare
- Mobility access
- One that has connections and social interactions
- Safe housing that includes universal design within the home
- A community where people feel comfortable and able to reach out and ask for help

Resources needed

- Improved access to healthcare. A new proposed complex for Mid-Columbia Medical Center is promising.
- Longer transit to hospital; especially concerned about how people are able to get there with ice and snow
- A resource list that is regularly updated and includes agency names, phone numbers, and what services are provided.
- Housing of many types, including options for cohousing or intergenerational housing with shared spaces. This may require rezoning for that to be possible in the region.
- Multiple ways of communicating, especially for those who don't use digital platforms. Perhaps use avenues like churches for communicating?

What's working

- MCEDD's Bus Buddies program that offers people who will ride with people on their first rides
- Senior Center programs, such as Senior Health Insurance Benefits Assistance (SHEBA), tax assistance
- Weekly newspaper article familiarizing people with aging issues
- Circles of Care that matched volunteers with older people to get services they need
- Police force has been picking up / delivering prescriptions for people during Covid
- MCEDD's Transit Connect Program. Organizations can request free transit passes for people living on low incomes (Jesus Mendoza or Kate Drennan).
- 5 County Resource Guide is being built out - <https://c-gorge-resourceguide.com/>

GROUP 4

What does a community look like where everyone ages well?

- One where continued improvements are made to the built environment, trails, parks and access to green space
- Have enough help so that people can stay in the environment they are comfortable in.
- Have people trained to help older adults and access to folks willing to help us keep our yard and care for us when the time comes

What resources are needed

- Lack of public restrooms is an issue. To be able to continue to be active, we need a place to go to the bathroom. City needs to recognize this is not just a good idea for tourism but to keep our community healthy and encourage people to get out.
- Funding schools as key part of community's infrastructure
- It would be great to have intergenerational opportunities or a daycare where grandmas can watch and engage with little ones.
- Time banking and work trade programs to connect people to help out with small / odd jobs
- Need to make connections between people / services that doesn't rely entirely on the internet / web platforms

One person shared, "With the pandemic there's been a lot of isolation and more depression than we are really truly aware of. It's not just a problem for the elderly but for everyone. We are going into winter now and it's a real concern."

What's working

- Well-connected parks, Parks & Recreation
- Senior Center and volunteers - "It's not just a place to have lunch"
- Bluezones set up opportunities and hope to see it come back once there's less need to focus on Covid
- Art Center
- AGE+ and Circles of Care
- 3 Scotts - Scott McKay, Scott Baker, Scot Stevenson

Discussion on what was shared

Participants discussed the concerns, assets and suggestions that they heard from other groups. One participant shared some differences between Wasco County with other counties and shared how Wasco County is well-represented and has opportunities for engagement. Communities in the county have the ability to reach out to community people and include them as active volunteers. For example, during a pandemic they reached out to senior people to help them get vaccines. Local elective representatives and officials have also been key in engaging people in different ways. One participant noted that while there wasn't a lot of discussion on long-term care, this would be a big issue in the future. Another shared that they were concerned about a lack of nail care in the region for older people who are no longer to do that themselves.

Another participant raised a concern for elderly people accessing grocery stores in The Dalles. Different existing programs and ideas emerged in the discussion, such as:

- Wondering about the services started during the pandemic where stores bring groceries out to the car
- Age+'s Circle of Care, which helps older adults with limited mobility to do grocery shopping
- Some older people like doing grocery shopping from an exercise perspective
- Volunteers are a big help picking up groceries for people who need help
- There are also options through MCEDD for Bus Buddies who help seniors to ride the bus, and Travel Trainers, who can train people in how to ride the bus, though this is a new initiative

What are you excited or hopeful about leaving the conversation?

The participants shared that they are excited and hopeful for following reasons:

- Glad that this kind of conversation is happening now
- Excitement of the plans for a new sports complex with w walking track and bathrooms
- Hope conversation stimulates actions and efforts.
- Hope for cohesiveness and there can be a real initiative that comes out of this that helps with the fragmentation of existing services and different groups working on pieces
- Excited to hear that MCEDD is expanding transportation services on weekends.
- Hope to advocate for Wasco County
- Looking forward to putting a resource list together. The Chamber of Commerce would love to have them all together as they receive calls about available resources for people.

Jefferson County

October 28, 2021 from 6:00pm - 8:00pm
(held via Zoom)

Participants

15 participants from the community

AGE+ staff

Oregon's Kitchen Table (OKT) facilitation team

Entering the Zoom Meeting Room

The OKT facilitation team (Robin Teater and Sarah Giles) provided a brief overview of how to use the Zoom chat function and invited people to share in chat: "What's one thing you love about living in Jefferson County?" as people joined.

What do you love about living in Jefferson County?

- People are friendly
- The environment is quiet and peaceful and you feel secure especially for seniors
- No heavy traffic driving around.
- Retirees can find some volunteer opportunities here.
- Good neighbors
- Diversity of cultures

Welcome & Agenda Review

AGE+ Host Committee member Barbara Manning welcomed everyone to start the meeting and introduced the goal for the community conversation. She noted that Oregon's Kitchen Table would be facilitating the meeting and AGE+ staff would be listening and helping with note taking in breakout groups.

Robin gave an overview of the format for discussion and offered some Zoom tips.

Participants were then invited to begin the discussion by sharing one thing they're looking forward to or are concerned about aging. Some participants shared verbally while a few others shared in the Chat.

What's one thing you're looking forward to or are concerned about aging?

- Looking forward to reaching Medicare age when I can save money on insurance and hope to have good or better care
- My biggest concern is staying healthy and active and independent, especially as I watch some of my friends who have declined.
- Housing is a concern I see a lot for a lot of people in our community, either because they can't afford rent or have a hard time finding somewhere to live independently or a place big enough for a wheelchair.
- Health and sanitation (personal hygiene, and sanitation,) loneliness, transportation, and financial problems.
- Our ability to live at home as long as we can and not be encumbered by illnesses or injuries. We see a lot of our friends struggle in being able to maintain their lifestyle and quality of life.
- We don't have close family who live nearby.
- Once someone is debilitated, the cost of care at home or of assisted living is a concern.
- With aging, it's nice to figure out that you really don't have to care about what people think of you. I feel like I can say what I think more and not worry about it.
- It's important to speak up as an older person
- Transportation to get to medical appointments and other places

A few people shared stories as caregivers for older family members. One person who has been a caregiver for older parents and in-laws, shared that they want to make sure they've prepared themselves for their older years and in the process given their own children comfort in that preparation and knowing they have the tools they need. Another person shared how frustrating it can be as a caregiver to access resources that their family member needs, especially when they as the caregiver can't be there. Even when they have found help through Meals on Wheels or an agency, it can be a slow process.

Small Breakout Room Discussions

Participants next moved into small breakout rooms with about 5 participants to discuss three guiding questions. They had about 45 minutes to share and talk about what they thought before rejoining as a whole group. Once back together, a host committee member from each breakout group provided a summary of the discussion.

Guiding questions for Breakout Room Discussions:

- What does a community look like where all residents age well?

- What are the resources that you think that you need to achieve that?
- What are the community assets (places, people, organizations) that you notice that seem to be working - either informally or formally - in your community?

Discussion Group 1

A community that ages well has or is:

- Accessibility, including walking paths for seniors
- One where seniors are valued and accepted
- Opportunities for social engagement just as people had in earlier years
- More interaction across generations

The resources needed to create such a community include:

- County and city leadership that values seniors and recognize changes we need to make for seniors that make the area more accessible and a more welcoming county for seniors assistance in shopping
- a clearinghouse of resources for people of all income levels
- classes in technology and mentors to help with technology
- help with figuring out finances and taxes
- access to cultural events
- Volunteer opportunities of different types and levels of complexity for seniors to participate, feel engaged, feel important and create a sense of caring as contributors to the community

The assets Jefferson County already has that are working well include:

- Church communities that support seniors
- Library (many types of services but there's an opportunity to make sure people can engage with them)
- Home Town Drugs, which helps people put their monthly prescriptions together
- Madras Aquatic Center has classes for seniors
- Warm Springs Museum and Long House honors seniors, has programs specifically for seniors, and values elders
- The work of Louise Muir at the Senior Center is of huge value

Discussion Group 2

In each part of the group's discussion both transportation and a lack of different services came up. The group felt that to keep a healthy community, one thing that people of all ages need is the ability to interact with other people. Interaction is critical to staying healthy, keeping our minds active, and preventing isolation.

A community that ages well has or includes:

- Everyone is aging well and healthy,
- People are able to get around, are included, and are engaged in the community
- People have good emotional health
- People have support systems, whether that's through family, a service agency, or neighbors

The resources needed to create such a community include:

- Expanded transportation options on weekends and later in evening and more places where curbside pick up is available

- Medical help, especially if a specialist is needed (e.g. have to get to Redmond or Bend for hearing aids)
- One resource that might help with medical needs could be a scheduled monthly visit from specialists in parts of the county
- Ability to easily get prescriptions, particularly if transportation or mobility is limited
- More supports or connections in evening hours (around dinner) or around breakfast. One participant shared, “Often we eat breakfast or lunch by ourselves. Especially at dinner, with several hours in the evening and in the dark by ourselves, it’s hard. Our emotional health is impacted.”

The assets Jefferson County already has that are working well include:

- Veterans’ services
- Meals on Wheels
- Legal Aid

The group also shared that even when there were the needed resources, the services are siloed, which can make navigation difficult.

Discussion Group 3

A community that ages well has or includes:

- Adequate, affordable housing
- Access to medications and healthcare at reasonable cost
- Opportunities for recreational activities
- Adequate support from family and friends
- Timely and affordable transportation for those who need care beyond the community
- People feel like they have security, including financial security and caregiving
- Older community members have a sense of being valued and having a voice in the community

The resources needed to create such a community include:

- A range of different types of caregivers, from in-home care to someone who can help with tasks like shoveling or raking leaves
- Need for a clearinghouse, which could also provide opportunities for early retirees looking to volunteer
- Support for those with visual or hearing impairments
- Legal assistance

The assets Jefferson County already has that are working well include:

- Meals on Wheels
- Food Banks
- Love in the Name of Christ
- NeighborImpact
- Veterans’ services
- Hospital and engaged medical staff
- Mosaic mobile clinic
- Service clubs (e.g. Lions)
- Great library

The group noted that they recognized how lucky they were to be close to a hospital as larger towns in other parts of Oregon didn't have as easy access to a hospital and all the services that come with that institution

Discussion on what was shared

Participants were able to respond to questions and suggestions that they heard from other groups, such as whether legal aid was already available and how. One participant provided more detail on Legal Aid and the services that are available four times a year. Other people added additional assets, such as Bob Bailey with the Council on Aging for Central Oregon, who was a critical information specialist and a wealth of knowledge.

One participant observed that hearing the different resources and assets already available made them think of the story of Stone Soup: at first you might think there's not much going on here, but then everyone adds a little bit and it's encouraging to see the ingredients. They noted, "But you still have to put it all together and make the soup." Someone else shared, "Some of these are social and cultural issues about how we perceive older people, and it will take time." Others shared a desire to engage elected leaders.