**Palo Alto**

**Focus Group Professionals**

**July 15, 2016**

**Transportation**

Transportation issues in Palo Alto include the usual challenges of availability and costs with two other areas of concern. Several professionals note that language is a key variable. For example, language barriers between drivers and clients are a frequent challenge from public buses to private pay services. Chinese elders use care and drive services frequently while Chinese-speaking drivers are rare. Spanish speaking drivers are difficult to find as well.

The other area of concern regards elders themselves who are no longer able to drive yet continue to place themselves and others at risk. Escort services are needed for this group and an educational program for DMV clerks who offer a “sympathetic pass” to elders’ whose physicians determine are unsafe. There is an ongoing “disconnect” between health care professionals and DMV staff regarding unsafe drivers.

Like most communities, the “first mile” problem exists in Palo Alto where elders cannot make it to the bus stop or the taxi stand or even driver and car services without someone escorting them to the vehicle.

**Housing**

Professionals observe that in an affluent city like Palo Alto there are no safe shelters for seniors or for those with mobility or behavioral health issues. The city has reached the crisis state wherein seniors without homes face no available housing, especially those with disability or chronic diseases and other health issues. Many suggested a carefully crafted program in shared housing.

Professionals noted the need for a strategic plan regarding affordable senior housing: affordable, accessible and available.

Another element of affordability is for assisted living or even board and care homes. Prices have become so inflated, that many elders cannot afford to move to another level of care. Many elders explain that they are not “poor enough” for some housing options, yet cannot afford market rate.

Another need concerns the absence of social services in current senior housing. There is very little stimulation for shut in seniors and isolation looms for many. Even green space is rare as more and more developers “build to the curb” per the cost of housing and a lack of vision or enforcement of planning for age-friendly city

**Social Participation**

Professionals pointed out the double threat of a lack of transportation, in that it oftentimes precludes social participation for the very seniors who need it most. Oftentimes social activities are available, but seniors cannot get there or back home.

Professionals pointed out the relative North South disparity where more services and programs are in the North, but seniors cannot make the 45 minute bus ride to the North to participate. There is also the matter of differing expectations between the North and South. North Palo Alto seniors tend to want more comprehensive services where South Palo Alto seniors need a different type and range of services.

Again, language barriers inhibit the type and range of services that can be offered and funding is not following the need. Professionals argue that funds tend to automatically flow to children’s programs while seniors are a faster growing segment of the population. City budgets are not reflecting the shift in demographics. Perhaps, intergenerational programming may be a stopgap solution until city leaders can become more aware of the growing number of seniors in the community.

Isolation is becoming known as a significant social problem with worse health risks than smoking. Many seniors are self-isolating because of depression and anxiety in addition to the disabling challenges of language and transportation.

**Respect and Social Inclusion**

In this domain, professionals think a good way to start is to initiative more intergenerational activities for seniors. Generations United in Washington, D.C. has many evidence- based and model program ideas.

Professionals argue that we need a culture shift wherein citizens are taught about normal aging and what is unique about elders, just like we do for children and early childhood needs. We need to learn to have more civility and respect for each other and, values in action. Areas of need include patience, communication, not defaulting to technology and caregiving.

Professionals also reiterated the community-wide need for an age-friendly community lens when undertaking city planning, construction, public transportation, signage and infrastructure.

**Civic Participation and Employment**

Professionals observe that there are many social activities for seniors, but few are age-friendly. Organizers really need to become more informed about the unique needs of elders. Professionals noted the “structural ageism” of Silicon Valley where in the digital divide is massive and few grasp the realities of the situation. Maybe Aging 2.0 can serve as a start. They continue that discrimination in employment is not so much related to ageism per se, but to the structural and cultural issues.

Professionals explain that seniors want short term, not committed opportunities where they can find *meaningful* work. One quote was that “… I have been on enough boards in my lifetime…”

Another awkward situation are the seniors who have been uprooted by their children and brought to Palo Alto as live-in baby sitters and child care providers. These seniors are isolated, do not want to be here and do not want (nor can they) engage. These seniors need to be found and brought out of isolation, they need to be brought to a welcoming environment sensitive and culturally competent.

**Communication and Information**

Again, language barriers abound, especially for Chinese speaking seniors. Regarding emergencies, 211 needs to be updated for additional languages. The internet is a significant challenge for seniors who would rather use the phone. Many sites have no phone option, other sites charge for using the phone (airlines). These examples illustrate the real and hidden costs of the digital divide. Additionally, seniors who experience hearing loss depend on in-person contacts as the only solution. Many times these options do not exist or the persons are not reality available or speak the language, or there is a charge for these services.

**Community Support and Health Services**

Professionals point out there is a pressing need for better in-home care of the elderly both in terms of availability and quality of care. The need is pressing for home-bound seniors and those receiving hospice care. There is a pressing and nearly urgent need for geriatric training. There is a very limited availability of those with education and training in gerontology and geriatrics.

In many cases there is very limited or no post discharge hospital care of elders, no single point of contact; and elders are overwhelmed or lost by post hospital contacts or lack thereof. If there is no friend or family advocate, elders are at sea with little knowledge or even the language skills to manage a post hospital experience.

Care and case management is not being organized properly, there are few nurses involved who can deal with medication and symptom related issues. First responders need education about how to deal with non-emergency situations. And first responders, including police and the public need education and training in screening for fall prevention, dementia screening, depression and anxiety screening and advance directive planning.

There is also a pressing need for caregiver training including Medicare and Medical issues and post discharge planning and care.

**Outdoor Spaces and Buildings**

Professionals observed that there are “very bad sidewalks” due to tree roots; and all the while, walking is being promoted as a health promotion activity. They also noted a need for more and better signage and way finding. Walking outdoors can be a hazard as rude and dangerous drivers talk on mobile phones and fail to respect pedestrian rights and safety. Drivers seem to be more and more aggressive. Professionals ask for more enforcement of existing laws to protect seniors and others while walking. They also said that “…pot holes are terrible…” in Palo Alto.

**Ideas About Programs and Services**

**Transportation:**

**Counseling for elders who lose their driver’s license because of vision problems.**

**Social Participation:**

**Social chat programs in small groups for social and intellectual stimulation.**

**Intergenerational programming, for example, city-wide photography project.**

**Respect and Social Inclusion:**

**Offering a special service provider space for grandparents and grandchildren. Grandparents caring for grandchildren.**

**Educational sessions and dialogue to influence how we think about seniors**

**Signage about interacting with seniors with respect**

**More multicultural events and culture sharing**

**Communication and Information:**

**PAASIR: Palo Alto Senior Information Referrals**

**Hire a consultant to help with language issues.**

**Create block captains (per village model) to help with seniors at risk and keep up with who is in the hospital etc.**

**Create senior action teams to provide resources and implement ideas. These same teams can work to implement best practice/model ideas and programs.**

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**Dementia Question Feedback**

Once again, there was a long silence when professionals we asked about how to help with elders with dementia. They came to the conclusion that it depends on the situation. Key variables are diagnosis, education and treatment. They say it depends on the situation in terms of early stage, moderate or advanced. A vital dimension is caregiver training. The system needs to be better defined including dealing with the high risk of fraud, scams and elder abuse.