Dear Orange County Resident,

Thank you for taking time to complete this survey. Your input, combined with the responses from other Orange County residents, will guide the development of our 2017-2022 Master Aging Plan. Overall, we want to learn from you about what it takes to age well in Orange County.

This survey asks two main questions:

- 1) What are the aging issues that are foremost in your mind?
- 2) How well is Orange County doing now to address important issues related to aging?

Are you a resident of Orange County, North Carolina?

- O Yes
- No -> Thank you for your interest, this survey is for Orange County Residents only.

Please mark or fill in the circle that matches

1. How often do you think about the following life situations?

| Lide Sinaratirom | Never | Once a year or less | 3 or 4 times a væar | Monthly | Deuty |
|---|-------|---------------------|---------------------------|---------|-------|
| Losing mobility (such as not being able to walk) | O | O | O | O | O |
| Losing the ability to take care of my home and/or my yard | O | O | O | O | O |
| Living alone | • | 0 | O | 0 | 0 |
| Being a burden on my family and/or my friends | O | O | <u>O</u> . | O | O |
| Experiencing spiritual emptiness | 0 | O . | O | O | 0 |
| Leaving behind dependent children | 0 | O | O | 0 | O |
| Not having my end of life choices granted | O | O | O | O | 0 |
| Not leaving a legacy | O | 0 | O | O | 0 |
| Not leaving an inheritance | O | O | 0 | O | O |
| Getting dementia | O | O | O | O | O |
| Getting sick and not having a doctor | 0 | 0 | 0 | 0 | 0 |

1. How often do you think about the following life situations?

| Life Situation | Nover | Once a year or less | 3-4 times a year | Monthly | Daily |
|--|-------|---------------------|------------------------|---------|----------|
| Running out of money | O | O | O | 0 | O |
| Not being able to drive a car | 0 | 0 | . O | 0 | O |
| Becoming socially isolated | 0 | 0 | O | 0 | O |
| Losing my job | O | 0 | 0 | O | 0 |
| Not having meaningful work to do | 0 | 0 | O | · O | 0 |
| Losing my source of income | 0 | 0 | , O | 0 | O |
| Not having access to a grocery store | 0 | 0 | O | 0 | 0 |
| Getting sick and not having a caregiver | 0 | O | 0 | O | 0 |
| Needing nursing home care | O | O | O | 0 | 0 |
| Not having enough money to stay in my home | O | 0 | O | O | O |
| Managing chronic illness | 0 | 0 | 0 | 0 | 0 |

2.Based on your experiences, the experiences of people you know, or things you've heard about how would you say the community is doing on the following aging issues?

| Aging Issue | Termible | Poxin | Okny | Grozoid | Parntastic | Not fatbeiddau writh thús |
|---|----------|-------|------|---------|------------|------------------------------------|
| Providing affordable housing for older residents | 0 | 0 | 0 | 0 | O | O |
| Providing quality long term care (nursing homes, assisted living) | O | O | O | O | O | O . |
| Providing door to door transportation services | O | O | 0 | 0 | 0 | 0 |
| Providing access to healthy food | 0 | O | 0 | O | O | O |
| Providing personal care in the home (meal preparation, bathing, dressing) | O | 0 | O | • | O | O |
| Providing access to doctors | O | • | O | O | O | O |
| Providing information about available resources and services for older people | 0 | 0 | 0 | O | O | O |
| Providing emergency services tailored to older people | O | O | O | O | O | 0 |
| Providing mental health support services | • | 0 | O | 0 | O | 0 |
| Providing job training for older workers | O | O | O | O | O . | O |
| Providing opportunities to stay physically active | O | O | 0 | O | O | 0 |
| Promoting home safety | O | • | O | • | O | 0 |
| Promoting safe neighborhoods | O | O | O | O | O | O |

| Aging Issue | Temible | Poor | Okary | Good | Fantastic | Not Familian |
|---|---------|----------|--------|------------|-----------|-----------------|
| Hosting community discussions to solve common problems | O | O | O | 0 | 0 | O |
| Providing support and training for caregivers | O | 0 | O | O | O | 0 |
| Providing assistance for life transitions (health changes, retirement, loss of a loved one) | O | 0 | 0 | O . | O | O |
| Providing opportunities for older people to socialize | 0 | 0 | O | 0 | O | O |
| Providing opportunities to be with people of different ages | O | 0 | 0 | 0 | 0 | O |
| Providing need-based home maintenance and repair services | O | 0 | 0 | . O | O | 0 |
| Providing support for using computers, cellphones, internet, etc. | 0 | O | O | O | 0 | O |
| Providing safe streets for older people to walk on | O | O | , O | 0 | O | 0 |
| Creating public outdoor spaces for quiet and contemplation | 0 | O | O | O | O | 0 |
| Providing county-wide internet service | 0 | 0 | O | O | 0 | 0 |
| Creating opportunities for meaningful volunteer work | O | O | O | O | O | 0 |
| Creating opportunities to explore spirituality | O | O | O | O | O | O |
| Providing workshops about using online resources such as AirBnB, VRBO, Uber, Lyft, Amazon, or Meetup. | 0 | 0 | 0 | 0 | O | 0 |

| 3. What is your 5-digit ZIP code? | 6. My home is a: |
|---|---|
| 4. What is your age group? O Under 18 O 18-44 O 45-54 O 55-59 O 60-64 O 65-69 | Single Family home Condominium Mobile Home Apartment Co-housing community Supported group housing Other |
| 70-74 75-84 85 - 95 96+ | 7. My living environment is:O Urban, suburban, small city or townO Rural |
| 5. I live in a home that I: O Own O Rent O Other type of arrangement | 8. What is your employment status? ✓ Check any and all that apply. □ Part-time □ Full-time □ Retired □ Not working □ Looking for work □ Volunteer 9. Are you currently providing unpaid |
| | assistance for an older person who is having trouble taking care of themselves? Examples include helping with dressing, bathing, driving or managing money. O Yes O No |
| | |

- 10. What is your yearly household income (before taxes)?
 - O less than \$25,000
 - **O** \$25,000 to \$49,999
 - **O** \$50,000 to \$74,999
 - **O** \$75,000 to \$99,999
 - **O** \$100,000 to \$149,999
 - **O** \$150,000 or more

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