

Dunedin Committee on Aging – Age Wave Sub-Committee

Dunedin: Vision 2025 - Shaping Our Future Together

Round Tables and Survey Executive Summary

Michael E. Whalen M.A. LMHC
Age Wave Sub-Committee Chair, Project Manager
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Acknowledgments

The scope and professionalism of this project has only been possible through collaboration between University of South Florida’s Sociology Department, the members of the DCOA Age Wave subcommittee, the Dunedin Planning Department, Dunedin Leisure Services Department, City Communication and Secretarial Staff, DCOA members at large, and most importantly, the 50 citizen participants at the Round Table Discussions and the 543 Dunedin residents who completed the not-so-short Dunedin Vision 2025 – Shaping Our Future Together survey instrument.

USF’s Dr. Sara Green’s assistance and incalculable hours of effort in design, implementation and analysis have been invaluable. Her students provided essential assistance in facilitation of the Round Table meetings and analysis of specific modules. DCOA is grateful and proud of the collaboration with USF.

This project has been accomplished by the hours of meetings, preparations, physical participation in the Roundtable events, flyer distribution, calls to churches, condos, businesses, report preparation, email blasts, news article and press releases, brainstorming and thoughtful analysis by Age Wave subcommittee members and friends Sharon Williams, Andy Demers, Lorraine Thrush, David Rice, Mary Gynn, Roger Thrush, Frances Fowler, Anita Apley, Cathy Goocher and all DCOA members at large. We are grateful to the staff of the Hale Senior Center and Dunedin Community Center for their patience and assistance.

Since beginning the project in earnest in early 2013 there have been approximately 60 meetings or events over approximately 150 hours, attended by an average of 5 people per meeting for total of 750 person hours. This figure does not include individual time spent creating notes, reports, articles, flyers, the research and design of the survey itself and the survey modules power point, making calls, distributing flyers, emails, etc., all done outside of meetings and on the volunteer’s own time.

I cannot express adequately enough, my appreciation for the amazing dedication these volunteers have demonstrated toward their beloved city and its future. Nor can I express the depth of admiration and gratitude I have for their hard work, persistence, good nature and loyalty to this project. Their concern for the future of their compatriots, their children and future generations will surely have an impact for many years to come.

Sincerely,

Michael E Whalen M.A. LMHC – Project Manager

DCoA Age Wave Sub-Committee Chair

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Introduction

Dunedin has been at the forefront in meeting the needs of elder citizens. Dunedin’s leadership and continuing commitment to being a community in which to age well and to meet the goals of many to ‘age in place’ are demonstrated by: establishment by city charter of the Committee on Aging in 1992 (res. 92-14; res. 02-21); building of the Dr. William J. Hale Senior Center; being selected as the very first recipient of the Florida Department of Elders Statewide “Communities for a Lifetime Award” in 2007, and then again in 2009; being chosen nationally as 1 of 5 “Intergenerational Communities” in 2013; accommodations in walkways and intersections; support for senior events and activities; and a general honoring of its elder citizens.

Today, a convergence of critical factors are combining to create unprecedented challenges to planning and need prioritization for Dunedin and all communities for the coming years. These factors include: demographic shifting to an older population; climate change; and economic downshifting (and resulting housing issues). With limited resources available to meet these rapidly evolving future challenges, it is imperative that resources be used wisely and solutions pursued creatively.

Age Wave Factor

An example of the extreme demographic affecting communities is the so-called “Age Wave” or “Silver Tsunami”. One often quoted statistic easily demonstrates the degree of impact on communities is the growing number of citizens who are older: Nationally, 10-11,000 people are [retiring every day](#) and will do so [for the next 19 years](#).

The current percentage of Dunedin residents 65 and over in 2010 (the last available data) is 29.8%. When 2010 Census data for 60-64 age group (8.3% in 2010) is projected ahead five years to today, a rough estimate for Dunedin residents age 65+ in 2015 is nearly 40 percent or about 14,000 of 35,800 (unadjusted for attrition or immigration).

With regard to ageing, Dunedin’s median age is 51.3 years ([U.S. Census 2010](#)) well ahead of the national median age of 37.2 years.

These numbers are remarkable enough when considering the number of 65 year olds today. But when a 20 year projection is made, the effects of a population with 40% of 85+ year olds and their accompanying needs, is staggering to consider. And, the numbers of “early elders” (65-79) and “older elders” (80+) will remain high for another 19 years beyond that. With that perspective, a ‘tsunami’ is, indeed, the appropriate metaphor. But, whereas the term “Silver Tsunami” communicates a sense of monolithic needs and priorities for an aging population, the situation on the ground is rather more complex.

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Because of this complexity, there really is no “Silver Tsunami”. There is, rather, a Silver, Red, Ash-blond, Touch of Gray, and many other color tsunami. These variations encompass people’s varying desires, abilities, activity levels, physical and mental health, cognitive function, social connection, etc., living in and intersecting with evolving environmental, societal, financial and economic conditions.

This rainbow of diverse abilities, needs and wants creates aging communities with a unique set of strengths, resources and needs; a very complex situation, to say the least. To discern the appropriate assignment of resources to these varying groups is a great challenge requiring information and understanding of these needs and strengths of the population in our communities.

New Age of Aging

Aging is not what it used to be. Evolving, healthier lifestyles, medical advancements, compensation for dis-abilities, enhancement of abilities through technological innovation contribute to life extension. Expectations of what it means to be older have changed. A more active, youth oriented lifestyle for many older adults, “encore careers” or financially necessary delayed retirement, a release from personal career ambition and parenting duties allow for a new life-development stage where personal fulfillment through bucket lists or finding purpose through service to society become options previously unavailable.

Because of these changes, there is a need to stratify the definition of what it means to be older. How much older? At what level of physical health, condition and functionality? With what degree of access to financial security and resources? In what environmental conditions? With what quantity and quality of familial, social and spiritual connections? With what degree of cognitive impairment? These are the questions that define where members of any aging group fit.

Survey History

Dunedin Vision 2025: Shaping Our Future Together roundtables and survey were implemented with an eye toward these impending considerations. Previously, the Committee on Aging, at the urging of Helen Brewer, a founding DCOA member, established an Age Wave (originally ‘Boomer’) Subcommittee in 2009, chaired by Michael Whalen. A goal of surveying seniors to determine issues of concern was established in the DCOA Annual Retreat in 2010. The effort was revitalized at the Annual Retreat in 2012. By early 2013 Age Wave subcommittee was considering possible models and methods. The Older Dominion Study (2008, [no longer available via internet; hardcopy @ DCoA files]) and the [Florida Department Elders](#) (2012) “Assessing the Needs of Elder Floridians” ([rev. 2013 pdf](#)) were 2 such models. Then-current DCoA chair (2011-13), Sharon Williams, contacted Dr. Sara Green of USF Sociology Department for assistance in the project. Dr. Green volunteered to lend her considerable expertise and USF resources to collaborate in the design and analyzation the survey.

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The Age Wave Subcommittee imagines a model of “Anticipate, Plan, Adapt” in creating these opportunities for citizens to dialogue, vision and offer their valuable input to City Commission, Departments and Staff at this critical moment in time.

The project has been implemented to work in conjunction with development of the City Comprehensive Plan and is seen as the beginning of an ongoing conversation about planning for an optimal future for Dunedin and its citizens.

“Dunedin Vision 2025+ - *Shaping Our Future Together*” project was designed to create opportunities for citizens of all ages (18+) to give their opinion on:

- View of future needs and priorities;
- Perceptions of the level of personal, institutional, business and community preparedness to meet those needs.
- Analyze and Identify possible gaps between needs and current conditions and plans.

An additional, important, though indirect, goal of the project was to start a conversation between residents, associations and groups, businesses and government about these major issues, and thereby raise consciousness around the need to consider and prepare for individual and community futures.

Project Overview

(For the full Project Methodology, Design, Administration, Study Ethics and Statistical Summary of Major Results, see Dr. Green’s Executive Summary of Process and Findings)

The project began with two Round Table community visioning and brainstorming meetings in mid-October 2013 conducted at MLK Jr and the Community center during a weekday evening and Saturday morning, respectively. Participants around the tables discussed 5 topics of concern: Transportation, Health/Medical/Caregiving, Housing, Emergency Preparedness and Environment, and Community Engagement and Social Life. Input (Appendix 1) from the 50 or so participants were considered in the design of the 99 item, multi-input survey questionnaire.

Following an intense media, PR, a 10-10-10 email blitz, utility bill mailer announcement, and other participant recruitment strategies, the survey was available on-line via the City web site from September 22 through October 13 of 2014. Five-hundred and forty-eight Dunedin residents (approx. 2%) completed the on-line or paper survey (a small number).

Analysis and interpretation of the results by Dr. Green and members of the Age Wave subcommittee, continued into and throughout 2015. The larger DCOA group also dedicated time

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during its regular meetings as well as a major portion of its 2015 Annual Retreat to discussion of concerns, possibilities and recommendations of Survey results and analysis. The DCOA will continue to consult the Survey results to assist in determination of ongoing concerns as greater understanding of the results evolves.

Reports on progress, ongoing data and available results were shared with all parties at timely points along the way. Planning Department head, Greg Rice was very supportive and met with Age Wave members on several occasions. Analysis of results and final report were prepared for the Dunedin City Commission and Staff Workshop November 2015. A possible follow-up community meeting to discuss results and continue dialogue is also envisioned.

Notes on Participant Demographics

Most participant demographics align closely with the latest U.S. Census (2010).

Generally, there are just a few percentage points separate most of the participant numbers from existing demographics:

- Veterans = 16% Participants (P) vs 13% Census (C);
- Gender – Women = 61% P vs 54% C;
- Men = 39% P vs 46% C
- Foreign Born = 7% P vs 10% C;
- Race = 7% Non-white (all) P vs 8% C

However, some exceptions should be noted.

Race

With regard to race, representation of races other than white were approximately one-half of 2010 Census percentages:

- Blacks = 1.7% P vs 3.3% C
- Hispanic/Latin@= 3% P vs 6% C
- Asian = 0.4% P vs 1.6% C.

It is worth noting that some specific outreach efforts were made to include non-white participation. USF students were present on a couple of occasions at the MLK Jr. Center to let people know about the survey and to give paper copies if desired, as was also done at the Hale Senior Center one time and at the Library 2 times.

Also, the DCoA followed outreach efforts utilized in other projects, such as calling on pastors of churches with a focus on serving the African-American community, holding events like the Roundtables in the recreational setting most utilized by the African American community (MLK Jr) and, as mentioned, having students stationed at the MLK Jr. Center to inform residents of

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the survey itself.

No particular efforts were made to outreach to the Hispanic/Latin@ or Asian community. Although, discussion did take place regarding having Spanish language versions of the survey available. Resources for doing so were limited and the idea was eventually dropped.

The Committee on Aging very much would like the input of all minority communities on this and every project. We have learned from this experience that more and continuing efforts need to be made to outreach to minority communities.

Education Levels

Education level was another area of difference between survey participants and Census data demographics for Dunedin. The percentage of survey participants with a Bachelor’s degree or higher was nearly inverse to that of the Census data.

Sixty-two percent of survey participants claimed a Bachelor’s degree or higher, while Census data numbers reported only 26% of residents with a Bachelor’s degree or higher. This should be considered when evaluating the overall results.

Renting & Home Ownership

Renting vs Home Ownership was another skewed demographic.

- Renters = 9% of survey participants vs 34% reported on Census data.

This skew was recognized and brought into view as a comparison in many of the measures presented throughout the survey because, though the numbers of renter participants was relatively low, statistical analysis revealed that they represented a number of other categories including economic standing and, thus proved a necessary comparison group.

Dr. Green’s report clarifies issues related to the effects of these demographic characteristics of survey participants.

Results and Recommendations

Detailed survey results are reported in **Dr. Green’s Executive Summary**. The purpose of this section is to highlight the responses and suggestions from DCOA members.

Each module was addressed by DCOA members at the DCOA Annual Planning Session, in September 2015 and the following highlights and suggestions were noted:

Module 2: Overall Subjective Well-being, Concerns and Preparation for the Future

- Recommend Resources Brochure on Legal Documents for estate planning to educate residents on what is needed and why it is important.
- Distribution through Hale Center, Comm. Centers, provided as residents sign up at Hale

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Center; Promote through Dunedin TV or Facebook site, VFW, American Legion

- Youth Guild encourage info to high school in Life Skills classes to teach basic real-life finances; enlist elders for this task to form long lasting mentoring relationships
- Town Hall with panel of experts from elder law, hospice, caregiver groups, housing specialists, PSTA and other transportation, SHINE, intergenerational and other aging well topics

Module 3: Overall Satisfaction with life in Dunedin

- Develop more activities geared toward interest to men to encourage their community involved. Get demographics on Senior Center and other recreational center participants to understand who is attending what programs.
- Recommend senior center programming to consider male oriented activities such as poker, pool tournament, darts, sports viewing, intergenerational mentoring programs (basic finances, home ownership, etc.) men’s fitness.
- Promote male oriented activities through VFW, American Legion, Golf Club and other existing male targeted groups.
- People of color and men were identified as less satisfied overall with life in Dunedin. Look into if Dunedin has a multi-cultural volunteer committee.
- Carefest is a county sponsored workday to assist disabled, elder with outside home chores – how can more men and retired men be recruited to participate and help with these type events in effort to involve them more into community life?
- Encourage development of a neighborhood chore and repairs assistance program (e.g. a “Dunedin Service Corps”). Look into existing models (the “Village” concept in Massachusetts).
- Development and promotion of Porch Bucket Gardens to grow vegetables from October to June. An intergenerational activity to promote healthy eating and also provide more cost effective food for renters and people in economic need. Tie in a recipe book and/or cook-off contest as promotion.

Module 4: Disability and Well-being

- Develop an Adult Day Care in Dunedin
- For disabled who require a caregiver to attend with them, we ask the City to provide a 2 for the price of 1 admission to events, programs or activities.
- Instruct staff and volunteers to promote the utilization of \$200 DCOA scholarship fund to assist those in economic need to attend activities
- The survey identifies that the disabled are also less happy because of the isolation and inability to attend activities. Financial costs and transportation are always barriers to

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participation:

- A shuttle bus operated by the Hale Center could improve this problem.
- Transportation is a critical issue for the well-being of persons with disabilities.

Module 5: Transportation

- Pay more attention to transportation issues at large. In particular: transportation to senior center events. Again, Hale Center shuttle bus.
- Promoting volunteer efforts to provide rides to the doctor, grocery, social activities, replacing the loss of services formerly provided by Faith in Action, Red Cross. Suggestion is for businesses and services provide transportation to customers and patients.
- With 11,000 people retiring each day, a future population who cannot drive will mushroom, so solutions need to be explored today that can help people stay in their homes but not be isolated. Better public transportation options, as well as local access to groceries, medical and social needs for the elderly and/or disabled and residents who are unable to afford personal transportation need to be explored and implemented.
- Medicaid and Care-Lift provides transportation to doctor appointments only. Uber works well but is only available to people who have cell phones with data plans (which leaves out many elderly). Develop an “uber-type” app for seniors.
- A token system (I T N – Inner-city Transportation Network) where volunteers drive people in return for credits or tokens for future use has worked in other communities; e.g. Sarasota.
- Study possibility for implementation of a non-governmental volunteer transportation services such as I T N, neighborhood associations, Rotary, Veterans, etc.

Module 6: Health, Care Getting and Care Giving

- Develop “Advocates School” for care getters and care givers to address the lack of information and education on how to be your own medical advocate or how to advocate for a loved one. Focus on discharge from hospitals where an understaffed social worker handles an entire floor of people. Hospitals are now keeping people under observation more often, rather admitting them. Then the senior or elderly patient does not qualify for Medicare paid rehabilitation leaving a gap in services.
- The Alzheimer’s Association has grants for respite care for caregivers. Check with Area Agency on Aging (AAA) for information.
- Promote AAA Senior Helpline and services on Channel 15
- Increase awareness of existing resources through several means from printing and distribution (not just electronic) of the Social Services Committee Resource Directory; an

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annual Town Hall panel event with experts from PSTA, legal, caregiver, Alzheimer’s association, etc.; promotion of the Area Agency on Aging Resource Line, an information station (computer) kiosk type in Hale Center lobby, develop an elder services app for local, county and national service linkage.

Module 7: Housing

- Increase affordable housing units in Dunedin
- Creation of shared mini-community houses for 3-4 seniors and other shared-housing options
- Home Share Pinellas, www.homesharepinellas.org helps people looking for a roommate or companionship and matches people who can’t afford their own rental housing with people who own homes and want to share the cost. Some churches also assist with this task. Distribute flyer on Home Share to local churches, invite to speak at associations.
- Dunedin’s Social Services Committee published a directory of social services in 2013 which includes lots of information on where to find help and support. We recommend it be updated and printed (not electronic) and made available at various city locations, including the library and on-line.
- Survey results indicated that younger residents are interested in growing their own food. New Developments, Apartments, existing ALFs and Senior Residences should incorporate community garden areas or bucket gardens for residents for social, intergenerational interactions and food security.
- Community Garden at Hale Center.

Module 8: Emergency Preparedness and Climate Change

- Education and a broader awareness of existing City and County plans for evacuation and shelters are needed. A Citizen Emergency Response Team (C.E.R.T.) could help police and fire personnel to distribute information
- Communication with elderly and disabled about evacuation planning is especially important.
- Existing HOA’s can establish “reserve 911” systems, or simple call out lists to their members in the event of emergencies.
- Hold a symposium on the city’s awareness of Climate Change issues and plans for dealing with the effects of Climate Change to address underlying anxiety about being prepared to deal with the future.

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Module 9: Community Engagement and Social Life

- DCOA feels that the City services for senior and elderly especially lower income elderly has declined and needs more attention. For example, in just the past few years Dunedin has lost these important services for its residents:
 - The local Adult Day Care Center
 - Meals on Wheels Dining Site location at Palm Lake Village, important for fulfilling both nutritional and social needs
 - Handyman program at Hale Senior Center
- Develop an Adult Day Care in Dunedin
- Renewal of Dining Site at Palm Lake Village or other suitable location (Hale Center?)
- Financial and transportation limitation for lower income and/or elderly and disabled are always barriers to participation. Does the City own a shuttle bus or van that can be used for transportation to events at senior center?
- Efforts to improve the satisfaction levels of men and non-white residents through increased outreach, programming at the senior center designed to encourage participation of men and all ethnicities.
- Inclusion of representations of people of color and people who are disabled in advertisements for activities, committee brochures and other city promotional printed materials, web sites, Public Service Announcements, etc.
- Promote projects to unite neighborhoods and intergenerational participation such as Front Porch Bucket Gardens

It should be noted that these are suggestions that apply specifically to seniors, as it the DCOA focus, whereas the survey results include responses from a wide age demographic. This list might not be representative for a broader range of policy and community suggestions.

Some respondents, for example, recognized the need for continued and increased intergenerational flow in Dunedin’s demographic. They advocated for doing things to attract and keep younger people the City.

Conclusion

Dunedin is a great place to live. Most people are pretty satisfied living in Dunedin. They see Dunedin as safe, welcoming, full of great things to do, diverse and responsive. The areas highlighted above are suggestions to improve an already great place to grow older.

Yet, as the elder population grows, and grows older, their needs will ultimately also grow. If current resources and service levels remain constant, they will not be sufficient to keep up with the needs. The picture is one of thinning services spread over a wider population of needs at local, regional, national and global levels.

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Solutions are not easy. Unless tax structures change dramatically, more money for services coming from already stretched budgets is only somewhat likely to be made available. While government may be able to prepare to meet some of these needs through policy, e.g. policies encouraging and attracting affordable housing units, it cannot be expected to solve all problems for all people.

Many solutions will depend on the individuals and the communities in which they are connected. Creative collaborations between individuals and their families, neighbors, communities, government, NGOs, churches, and businesses will ultimately be formed through formal and informal means to meet the many needs of aging and caring for elders.

Though the challenges are dynamic, they do not need to be seen as negative. A sense of taking steps to be prepared, building social connections and interdependencies, intergenerational relationships; all are the hallmarks of community resilience and aging well.

Dunedin Vision 2025 – Shaping Our Future Together project has served to raise the level of awareness of the need to prepare for the challenges of the future. A dialogue has begun which we hope will just be the beginning of a long and continuing conversation about the future and preparing for that future between all of those who are invested in the wellbeing of Dunedin and its citizens.

Future of the Survey

The Age Wave subcommittee looked at the survey data from aspects that were most obvious and preeminent. However, some further explorations of the data were suggested as we went along to dig a little deeper into different subgroup answers.

Why do men not feel as engaged in activities in the city as women? Could drilling down in the data reveal more about this issue? Probably. It may be possible to look deeper into the data, but it needs to be kept in mind that this project is entirely volunteer and the ability to do more may be limited. The data is there and accessible through Dr. Green. We should continue asking further questions and seeking better understanding.

An original intent of the project was to contribute to the formulation of comprehensive plan. Our hope is that some of the responses, data, analysis and suggestions will be pertinent to that effort.

One thought for a future activity is to conduct a community meeting to go over the survey results and re-engage the general community to keep the conversation going. The survey results will be available on the city web-site. DCOA will reach out to other committees and departments to provide details about the survey as might be desired. DCOA itself will continue to pursue activities with guidance from these results.

An obvious factor that the Dunedin 2025 - Shaping Our Future Together Roundtables and

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Survey has revealed is that Dunedin has a citizenry thoughtful about issues that matter to their community and their future who is willing to engage. While not new or unique to Dunedin, this willingness speaks to the strength and resiliency inherent in this community that will serve them as they move forward to meet the challenges that lay ahead.

Appendix List

Appendix 1 - Combined Roundtable Comments – Edited comments from Roundtable discussion groups held at ML King Jr. Center and Community Center October 2013.

Note: The Survey had 3 open comment questions: What changes would most improve Dunedin?, What do you like least about Dunedin?, What do you like best about Dunedin? These have not yet been processed in a useable form at this time. DCOA will forward these responses to staff and commissioners as soon as they become available.

Further Note on verbatim responses: While the verbatim responses are numerous and may be a bit cumbersome as qualitative data usually is, they do represent the direct voice of the participants and give a flavor to the issues as nothing else can. As such, they are interesting, informative and can lead to insights not otherwise available. However, they may also reflect the views of those with a particular ‘ax to grind’ or may be related to specific issues of the time. Care should be taken not to take the comments personally or be too attached to any as being representative of anything other than one person’s opinion on any particular subject at a particular time. These questions were particularly wide open and care should be given to avoid any broad interpretation from any single answer.