



Department of Aging and Adult Services Dignity Fund Community Needs Assessment (DFCNA) Community Research: Draft Findings

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Dignity Fund Oversight & Advisory Committee Meeting

Agenda

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Overall Goals and Objectives

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Conduct a participatory DFCNA process rooted in robust data collection that will identify the strengths, opportunities, challenges, and gaps present in the current services landscape to support an equitable and data-informed Service and Allocation Plan

Review literature and conduct initial research

Develop a robust data collection plan

Conduct community forums, survey, and focus groups

Complete equity and gaps analysis

Create DFCNA to support the Fund's Plan

Major Activities Timeline

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Community Planning Process

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- Designed to provide community members across the city opportunities for input
- DAAS' network of Community Based Organizations assisted in outreach and recruitment of community members and service providers to participate in:
 - Community Forums
 - Focus Groups



COMMUNITY FORUMS
SAN FRANCISCO DEPARTMENT OF AGING
AND ADULT SERVICES
WANTS TO HEAR FROM YOU!

USE YOUR VOICE!
The Department of Aging and Adult Services is holding community forums to **hear your opinions** about the needs of older adults and adults with disabilities living in SF. It is a chance for you to **help your City and County plan** for future services. We want to hear from you about **strengths, challenges and gaps of current services** for older adults and adults with disabilities in our community.

For more information, contact Melissa McGee at Melissa.mcgee@sfgov.org or 415-355-6782.

RAFFLE and PRIZES at each event!
Support Older Adults and Adults with Disabilities: Attend a forum!

Note: You do not have to attend the forum in your district. You can attend any forum. No RSVP is needed.

ALL SF COMMUNITY MEMBERS WELCOME
ADA Accessible

District 1 - 10/18: Richmond Recreation Center
251 18th Ave. 11:30 AM - 1:30 PM
Interpretation available: Cantonese, Russian

District 2 - 10/27: Aquatic Park Senior Center
890 Beach St. 10:00 AM - 12:00 PM
Interpretation available: Cantonese, Russian

District 3 - 10/25: Lady Shaw Senior Center
1483 Mason St. 2:00 PM - 4:00 PM
Interpretation available: Cantonese

District 4 - 11/2: Ortega Library
3223 Ortega St. 1:30 PM - 3:30 PM
Interpretation available: Cantonese, Russian

District 5 - 10/27: Western Addition Senior Center
1390 Turk St. 2:00 PM - 4:00 PM
Interpretation available: Cantonese, Japanese, Korean, Russian

District 6 - 10/19: Curry Senior Center
333 Turk St. 3:30 PM - 5:30 PM
Interpretation available: Cantonese, Russian, Tagalog, Vietnamese

District 7 - 11/1: West Portal Clubhouse
131 Lenox Way. 1:00 PM - 3:00 PM
Interpretation available: Cantonese, Russian

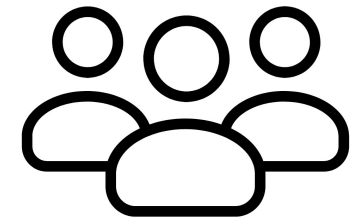
District 8 - 10/13: Openhouse
55 Laguna St. 11:00 AM-1:00 PM
Interpretation available: Cantonese, Spanish

District 9 - 10/30: Mission Neighborhood Center
362 Capp St. 1:00 PM - 3:00 PM
Interpretation available: Cantonese, Spanish

District 10 - 10/18: George W. Davis
1753 Carroll Ave. 3:00 PM - 5:00 PM.
Interpretation available: Cantonese, Spanish

District 11 - 10/28: OMI Senior Center
65 Beverly Street. 10:00 AM - 12 NOON
Interpretation available: Cantonese, Spanish

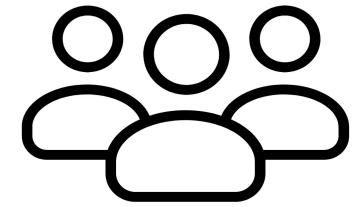
Methodology



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- 7 Key Informant Interviews included DAAS staff and members of the OAC
- District Forums were publicized and held across all 11 districts to maximize participation of all community members:
 - District 1 → Richmond Recreation Center
 - District 2 → Aquatic Park Center
 - District 3 → Lady Shaw Senior Center
 - District 4 → Ortega Library
 - District 5 → Western Addition Senior Center
 - District 6 → Curry Senior Center
 - District 7 → West Portal Clubhouse
 - District 8 → Openhouse
 - District 9 → Mission Neighborhood Center
 - District 10 → George W. Davis Center
 - District 11 → OMI Senior Center

Methodology



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□ Focus groups targeted specific communities, including:

- Spanish Speaking Community
- African American Community
- Russian Community
- Cantonese-speaking Community
- LGBTQ Community
- Veterans
- Filipino Community
- Japanese/Korean Community
- Housing Insecure Adults
- Homebound Adults
- Adults and TAY with Disabilities
- Community Service Center Participants
- Active and Involved Older Adults
- Blind/Low Vision Adults
- People Aging with HIV
- Case Managers
- Housing Representatives
- Seniors and Adults with Disabilities Seeking Employment
- DAAS Social Workers
- Caregivers
- Faith-Based Community Leaders
- Behavioral and Mental Health Consumers
- Coalition of Agencies Serving the Elderly (CASE) Members

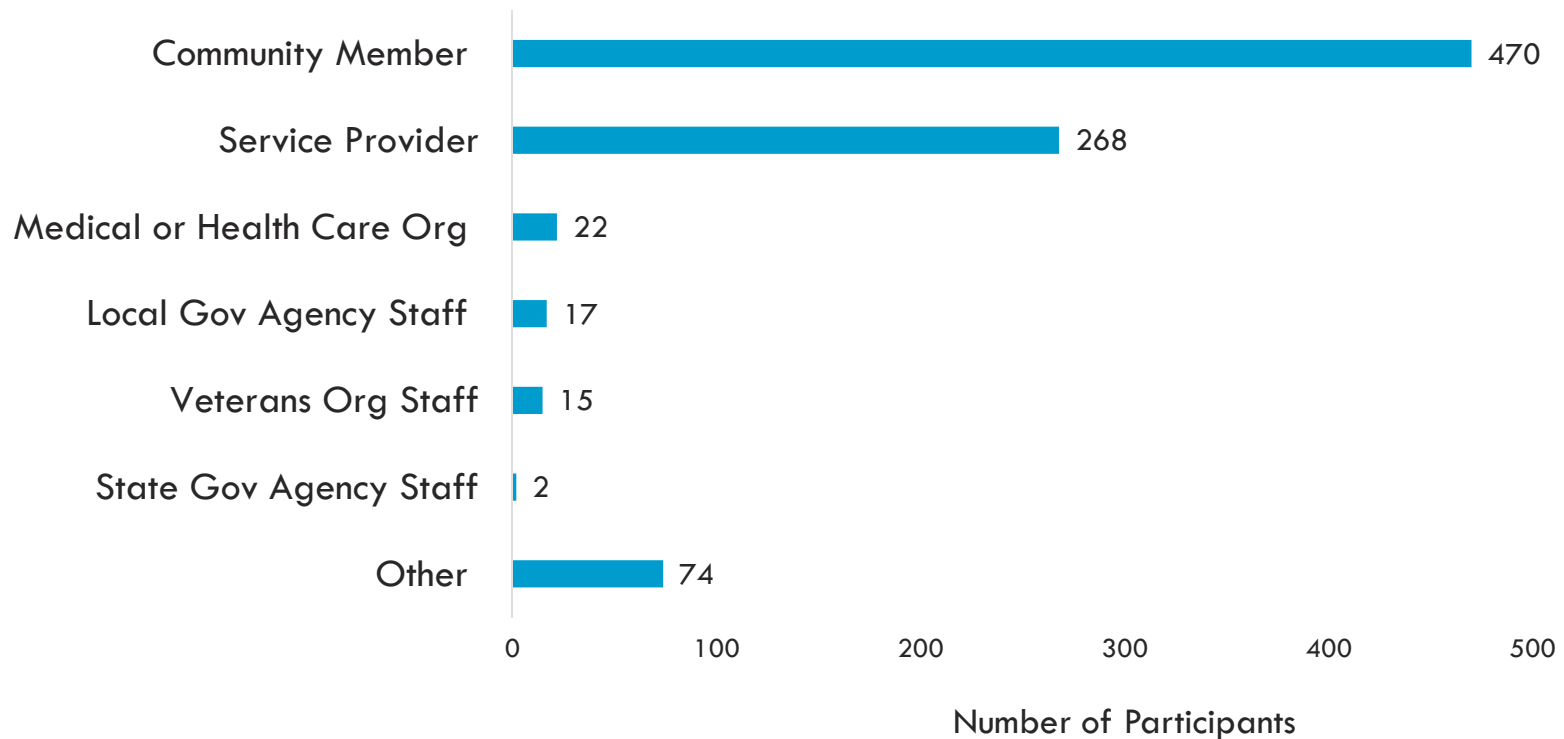
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Stakeholder Participation

Community members were well represented

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Number of Participants by Stakeholder Group (N=744)



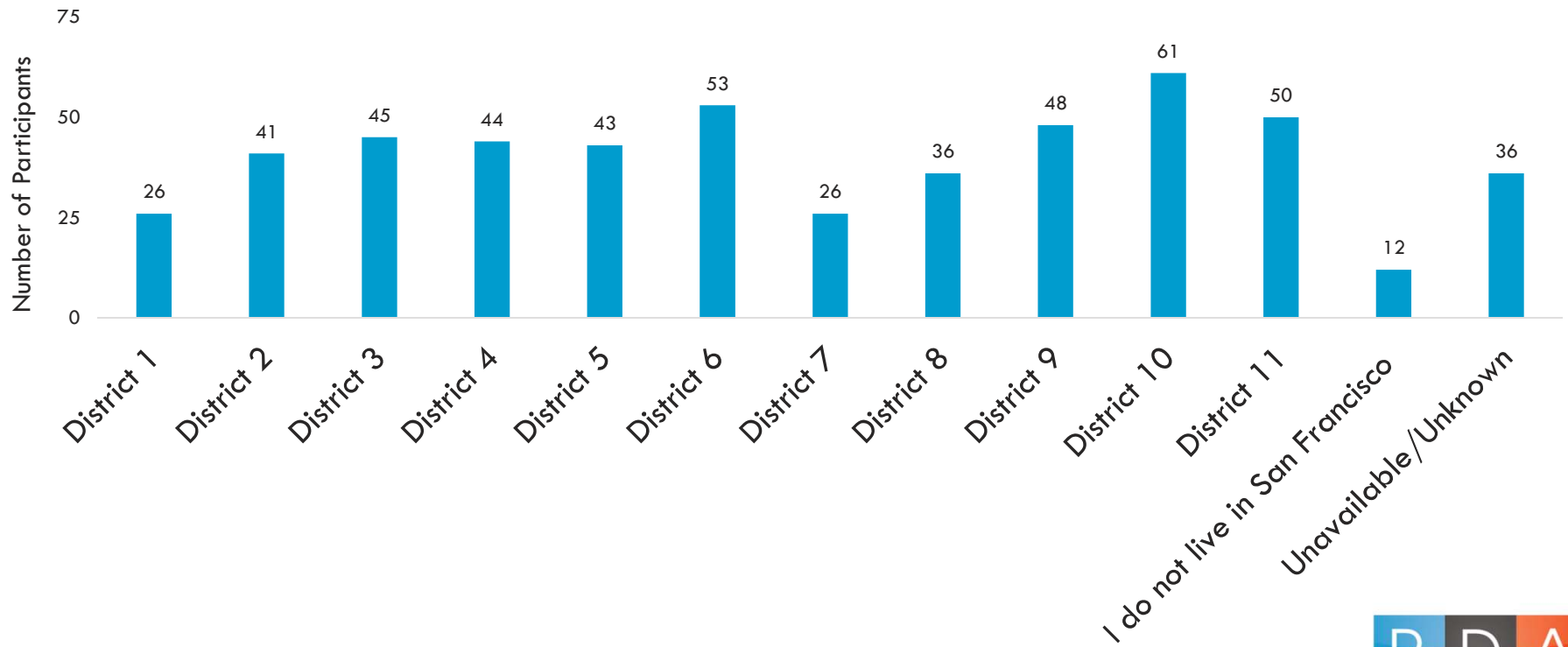
(462 participants in community forums and 282 participants in focus groups)

**Participants could select more than one option.*



All districts were represented, with an average of 43 attendees per district

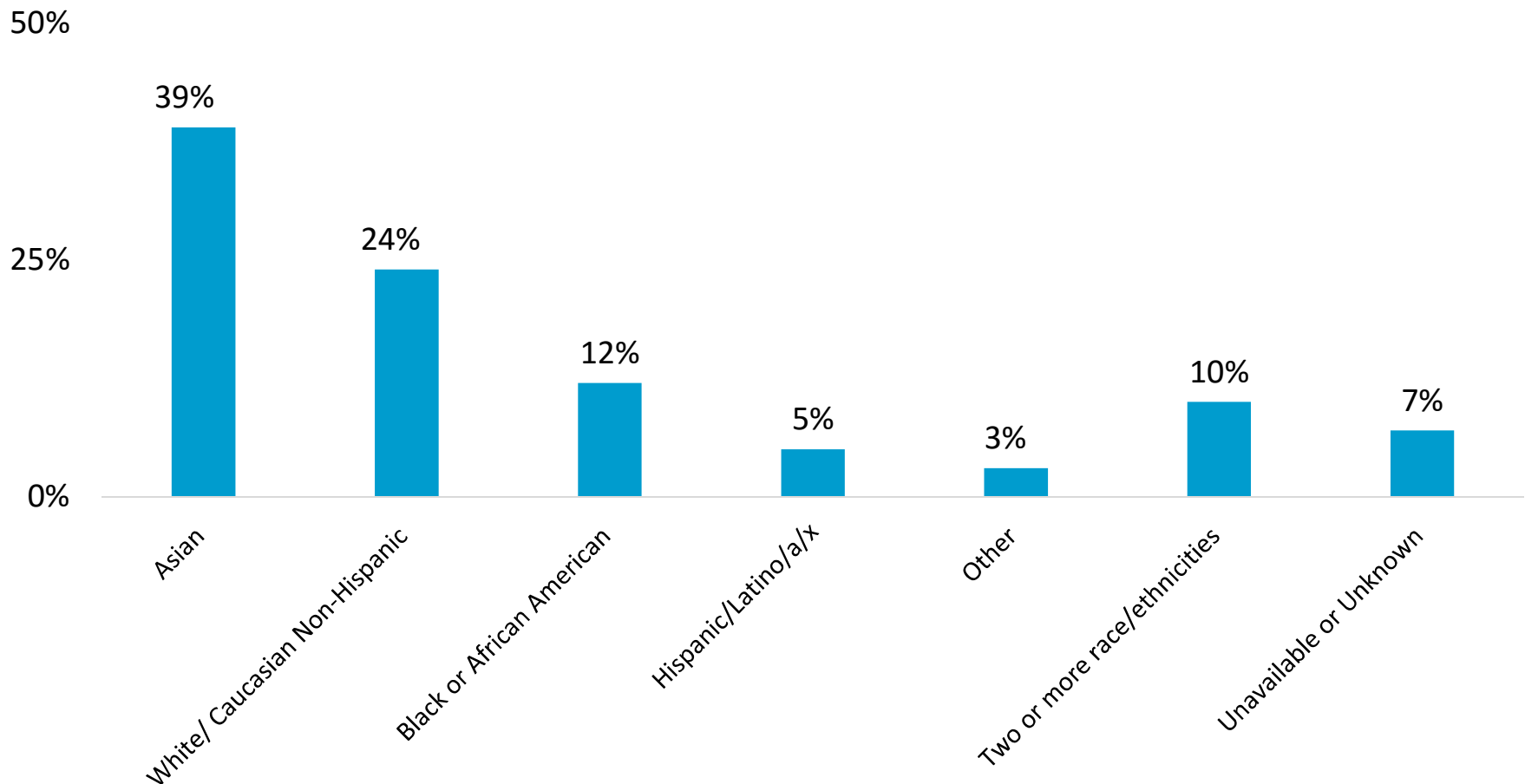
Number of Participants by District of Residence (N=521)



Participants were diverse with a similar distribution to the overall population

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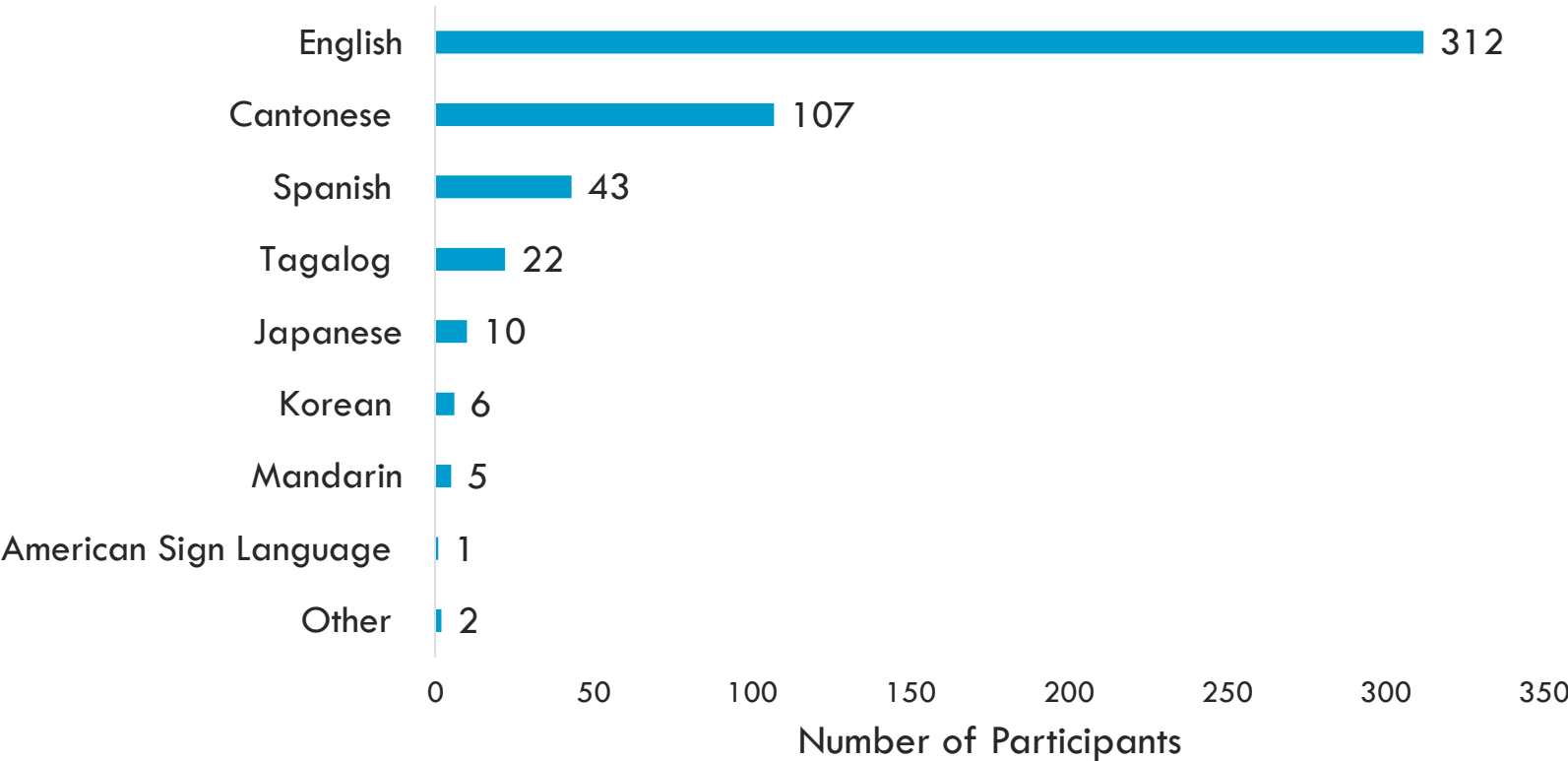
Percent of Participants by Race/Ethnicity Distribution (N=521),



30% of participants had a preferred language other than English



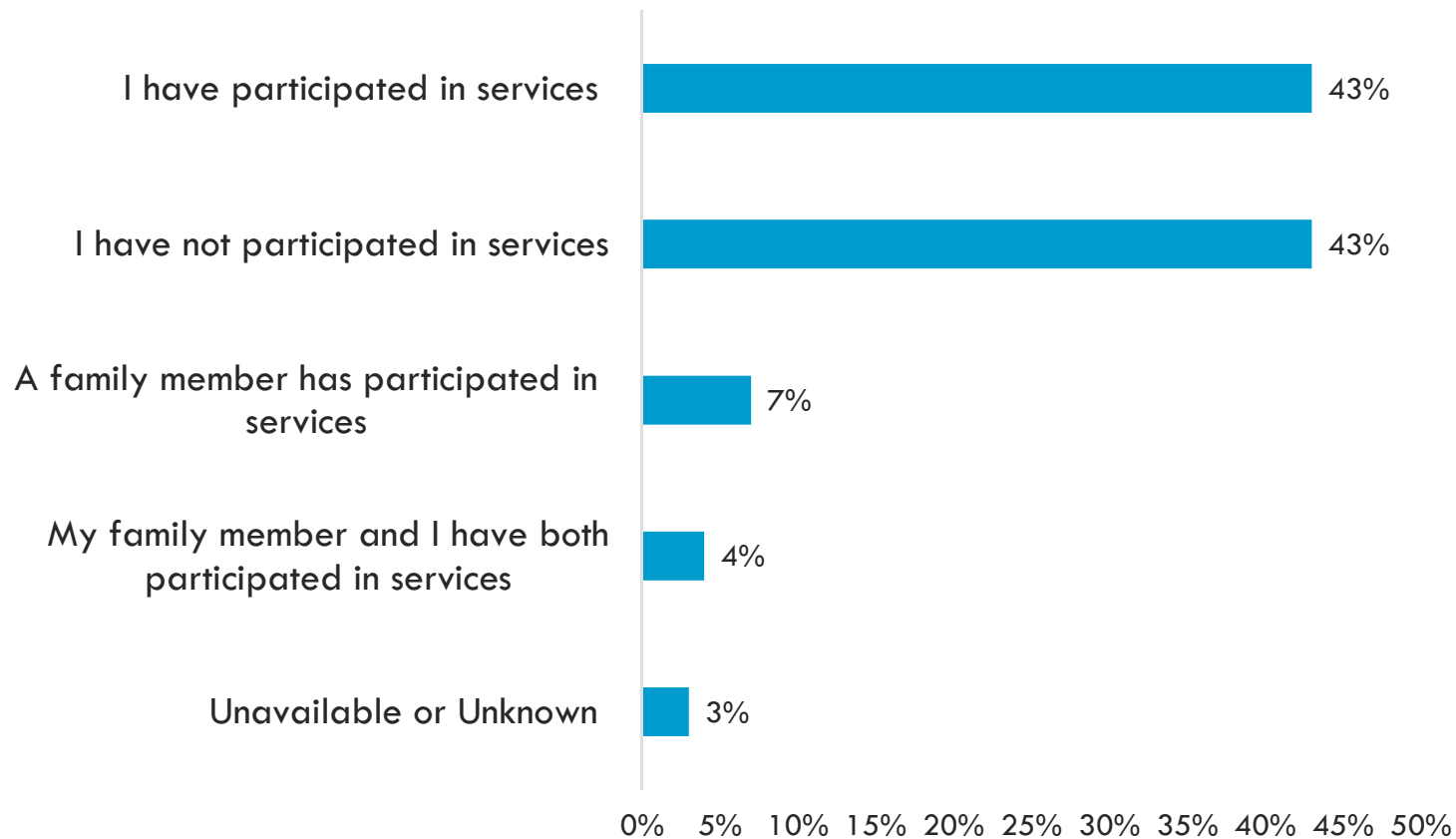
Number of Participants by Preferred Language (N=521)



Almost half of participants had participated in services

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Percent of Participants Who Participated in Services (N=521)

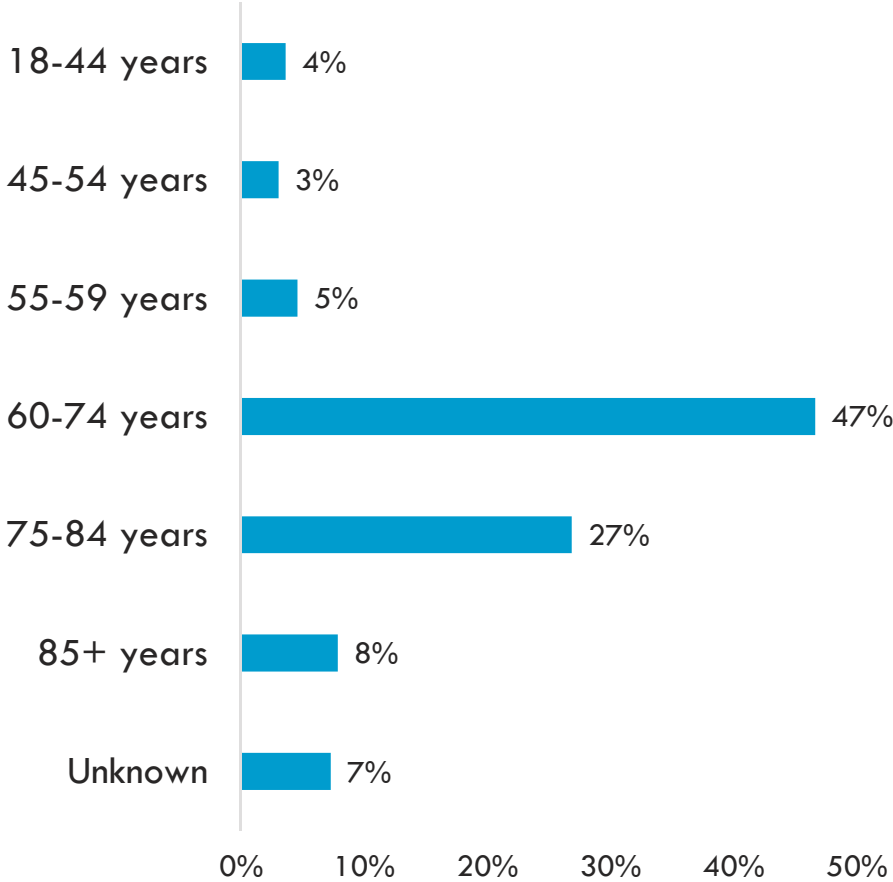


The majority of participants were older adults; Two-thirds were female

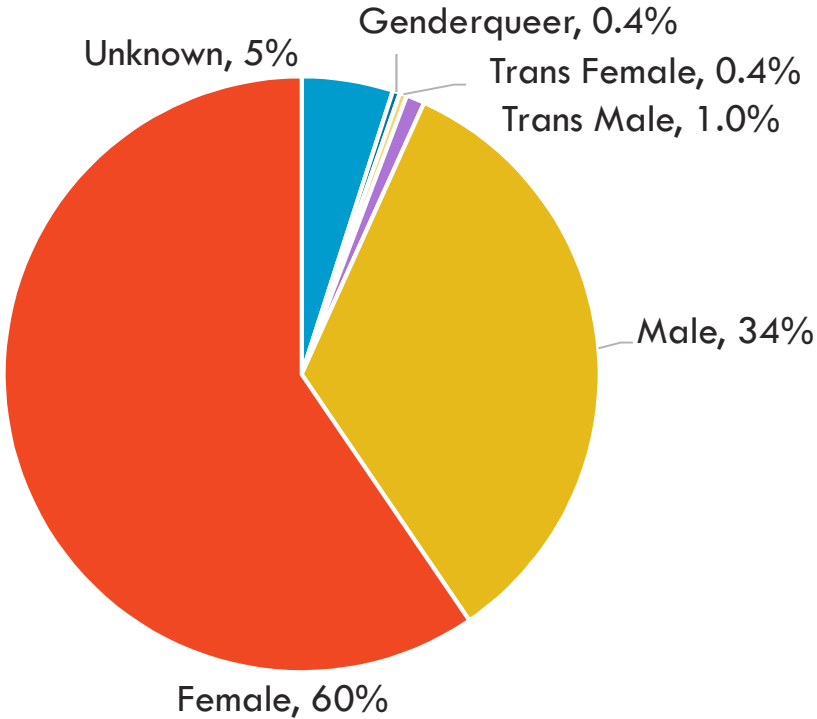


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Age

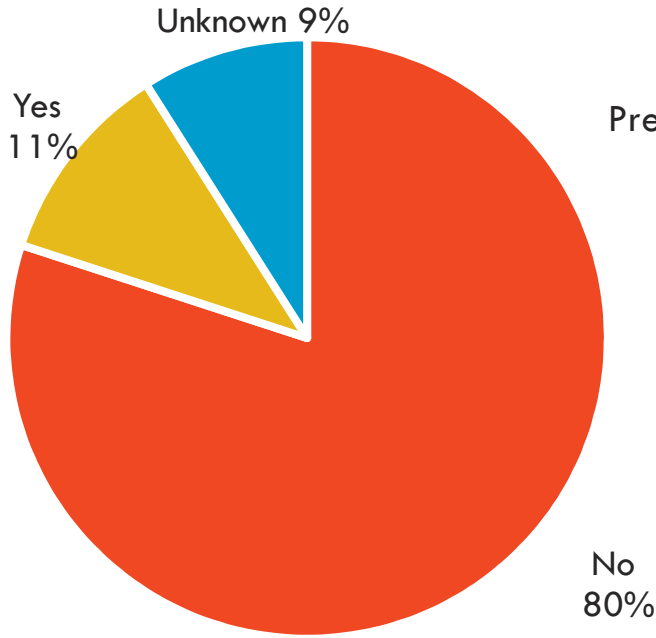


Gender

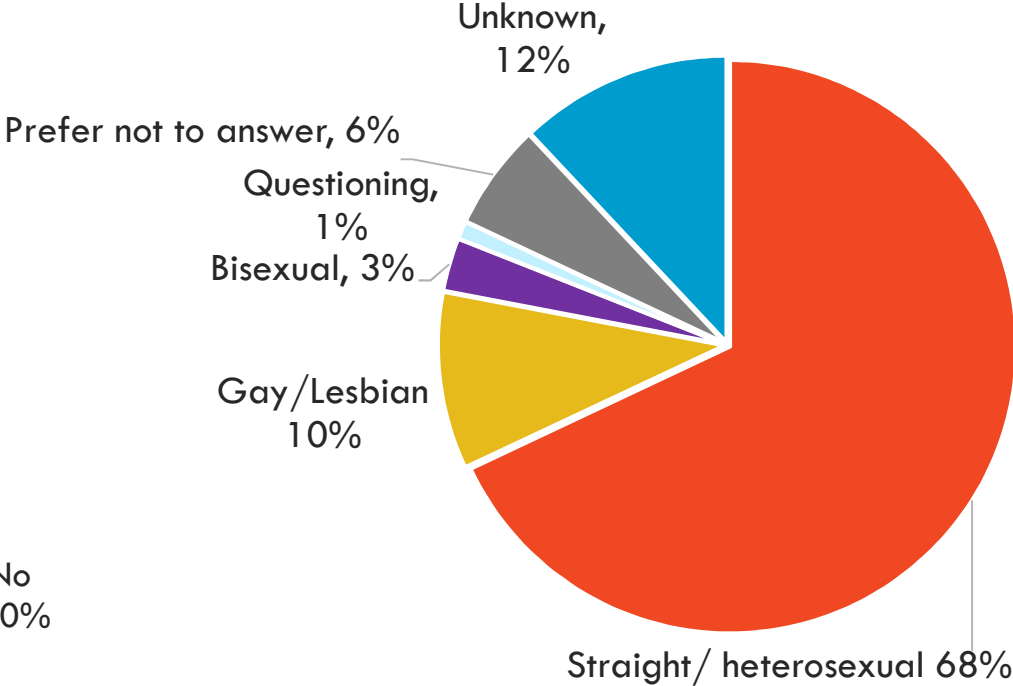


Participants included veterans and LGBTQ+ community members

Veteran Status



Sexual Orientation



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Findings

Key Findings: Awareness

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- ❑ Participants reported a lack of information about available support services and programs
 - ❑ Limited awareness of DAAS' information and referrals sources such as DAAS' Aging and Disability Resource Centers (ADRCs)
- ❑ Reported perception that general public lacked awareness of challenges facing older adults and adults with disabilities
 - ❑ Participants suggested awareness campaigns to increase community members' sensitization (e.g., respecting disability seating protocol on public transportation)

“It would be helpful if there was one office where we could go and someone could tell us about all of the services, instead of having to figure out by yourself.”
– Older Adult

“A key issue is communication: getting the word out...about services that are available and providing mechanisms...to connect.”
– Older Adult

Key Findings: Service Engagement

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- ❑ Existing programs were often viewed favorably
- ❑ Centralized resource centers (hubs such as Senior Centers) were reported to reduce social isolation, promote community, and offer networks to social services
- ❑ Access barriers (such as service navigation, waitlists, language capacity, eligibility criteria, and operational resources) can limit service engagement

"I wanted community to help me transition into retirement. This place is a safety net. When I have question about financing, banks, or therapy [they help]. The classes have been helpful, encouraging. [It] matters to me to spend time with my peers who are elders."
– Older Adult

"Generally the way it's set up in the city, [you] have to come to their office. This is a big barrier to people. The mobility problem is a big problem. It's a mountain of paperwork in the beginning. Each program, agency, advocacy."
– Older Adult

Key Findings: Areas of Reported Need

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- ❑ Participants reported desire for increased efficiency, safety, and accessibility of transportation services
 - ❑ Many reported the reliability and responsiveness of Para-Transit as an issue

- ❑ Desire for increased advocacy and legal support related to housing security
 - ❑ Especially assistance with housing evictions, power of attorney, financial abuse, and case management for affordable housing options

“Para-transit is even more unreliable than Muni. I basically have to make my way super early so I will have enough time to get home [before dark].”
– Adult with a disability

“[Housing is] not well communicated priorities [...] what types of housing you qualify for. I know because of all the applications I see. They have to do something more. Update their requirements.”
– Older Adult



Key Findings: Areas of Reported Need

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- ❑ Reported need for expansion of counseling and companionship opportunities
 - ❑ Connection to treatment for substance use services

- ❑ Reported need for expansion of in-home care services
 - ❑ Difficult to receive needed support

“Seniors seem to be overlooked when it comes to substance abuse services. Most such services are directed at younger people and seniors don't seem to have a lot of options.”
-Older Adult

“I would like a person that comes to this center, with a schedule, of people to talk to. A calendar of professionals you can talk to. I have four kids but I don't like to talk to them about my problems.”
-Older Adult



Key Findings: Agency Collaboration

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- ❑ Opportunities to increase collaboration between San Francisco agencies, especially community service providers, mental/behavioral health sectors, and medical health providers was reported as a need
 - ❑ Service providers suggested treating mental health through spaces for community engagement and social activity
- ❑ Need for more intergenerational collaboration and skill sharing

“We are seeing increasing behavioral health issues in who we serve through community services. There is more and more behavioral health involved in our work because of isolation, depression.”
-Service Provider



Perspective: Older Adult Veterans

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- 70 veterans participated in the community forums and focus groups
- Need for expansion and improvement of transportation services to increase safety
 - ▣ Veterans cited the difficulty of utilizing public transit due to PTSD and related fear of being “triggered”
- Need for women’s activities/support groups for female veterans that meet consistently and reliably

“[Public transportation] is really dangerous because it’s all you can do to not seriously react [in] situations when high school kids on the bus route are acting up.”

-Older Adult, Veteran

Perspective: LGBTQ+ Population

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- Reported that social support services, housing, and congregate meals specifically targeting LGBTQ+ population offer safety, support, and community
 - ▣ Social isolation reported as key concern; desire for more opportunities to connect
- Although “trans-welcoming” spaces exist, it can be difficult to attend service centers if there are few to no trans individuals present
 - ▣ Reported a desire to see “Trans-competency” increase among even LGBTQ+ services

“We want to be together.
[We want] things that build on
optimism and engagement.”
-Older Adult

Perspective: Non-English Speaking

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- Participants reported service staff are often culturally and linguistically representative of the population(s) they serve
- For some non-English speaking groups, service centers require additional space and hours of operation due to high utilization
- Request for more multicultural interactions, activities, volunteer opportunities, and translation services

“All of our staff speak the languages of the community. Cantonese, Mandarin, Vietnamese, Spanish... we are very community-driven so a lot of the services they ask for, we do.”
- Older Adult

DISCUSSION



Resource Development Associates