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Still  
We Are Right Here:

# Older Adult & Senior Residents of Dayton, MN

## 2018 Needs Assessment Report



In collaboration with:



**Resilient Communities Project**

UNIVERSITY OF MINNESOTA

**We Are Still Right Here:  
Older Adult & Senior Residents of Dayton, MN  
2018 Needs Assessment Report**

**December 2018**

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The project on which this report is based was completed in collaboration with the City of Dayton under the direction of the Resilient Communities Project (RCP). RCP is a program at the University of Minnesota's Center for Urban and Regional Affairs (CURA) that connects University faculty and students with local government agencies in Minnesota to address strategic projects that advance community resilience and student learning.

The contents of this report represent the views of the author, and do not necessarily reflect those of RCP, CURA, the Regents of the University of Minnesota, or the City of Dayton.



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UNIVERSITY OF MINNESOTA

*Building Community-University Partnerships for Resilience*

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**OLDER ADULT & SENIOR NEEDS ASSESSMENT:  
CITY OF DAYTON\_SUMMER 2018**

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## **1.0 Overview of Project**

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### **1.1 Project Introduction**

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The general population of the United States is aging, evidenced by large numbers of “baby boomers” retiring and entering an era of old age in 2011. As we grow older, there is a greater likelihood of a disability or dependence on others; elderly individuals are also living longer due to medical advancements. As seniors age in place the need for assistance and supportive services will be provided mainly by their children and other relatives, with additional assistance from community-based programs (Sierakowska, Doroszkiewicz, Markowska, Lewko & Krajewska-Kulak, 2014).

In 2018, the City of Dayton, MN, conducted a needs assessment to describe the current landscape of its seniors and older adult (55+) residents. While there is no formal senior services unit in Dayton, the City’s administrative leadership and Council members sought to enhance program development, maximize its service utilization, and broadly identify needs. Although a statistically representative sample was not sought, participants engaged during the project had the potential to provide insight on the population’s characteristics, problems, and hopes for maintaining a quality life.

A brief literature review was conducted across multiple areas of inquiry to provide insight into how to engage the target population appropriately, critical issues facing seniors and older adults, and current trends for effectively designing elder-friendly services, programs, and communities. Areas of inquiry included: demographics, differences in age groups, life satisfaction, problems facing older adults, aging in place issues, delete financial security, health and health care, social connections, housing, supportive services, transportation, and safety issues. Data collection processes used in similar projects across the US were also explored so that key questions and data collection protocols could be developed.

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## 1.2 Project Scope

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During the summer of 2018, a multi-dimensional engagement strategy was conducted to reach residents (55 years and older) of Dayton, Minnesota, to support the City's efforts to better assess, plan for, and meet the needs of its senior and older adult (55+) residents. The original project scope specified the collection of data among this population regarding current and future needs in the areas of transportation, housing, social services, healthcare, recreation, education, and volunteer and employment opportunities.

In early 2018, the City of Dayton contracted with The Resilient Communities Project (RCP), a program of the Center for Urban and Regional Affairs (CURA) at the University of Minnesota. RCP connects communities in Minnesota with University of Minnesota faculty and students to advance local sustainability and resilience through collaborative, course-based projects.

Key project objectives included:

- reaching out to older adults and senior residents in Dayton to identify their needs in the areas of transportation, housing, social services, healthcare, recreation, education, and volunteer and employment opportunities;
- helping the city of Dayton identify short- and long-term goals for meeting the needs of seniors and older adults that are consistent with the roles and responsibilities of a municipal government, as well as public-private partnership opportunities and private resources available to meet their needs;
- determining job priorities for a new senior coordinator for the City to inform creation of a job description; and
- determining policy changes (comprehensive plan, ordinances, etc.) that can potentially address the needs of senior and older adult residents.

In May 2018, Douglass Moon, a PhD candidate from UMN's Organizational Leadership, Policy, and Development (OLPD) Department was hired as a research assistant by RCP to coordinate the needs assessment project. The selection process took place after submission of Moon's resume, a reference check, and interview by Tina Goodroad (Dayton's City Administrator), Alec Henderson (Associate Planner for

Dayton), and Bob O'Brien (Dayton City Councilor). Mike Greco (RCP Director) continued in his role as the project principal investigator and helped to facilitate the interview.

Authoring this report, Moon has academic training in public administration and evaluation science as well as years of professional experience developing public health programs, conducting community-based research, and coordinating needs assessments and evaluations for non-profit organizations and governmental agencies. RCP had also previously employed Mr. Moon as a graduate assistant helping to coordinate programmatic work and evaluation efforts.

The following deliverables were agreed upon among Dayton staff and RCP:

- Summary report of findings and recommendations (short- and long-term);
- Presentation of preliminary findings to City Council and staff; and
- Detailed summary of work products developed during and specifically for the project (including presentations, survey data, reports, data collection instruments, and other deliverables).

With these interests in mind, the project coordinator employed a mixed-methods design with quantitative and qualitative elements that would strategically engage stakeholders at various levels of the Dayton community. The project became entitled, "2018 Needs Assessment for Older Adults & Seniors of Dayton."

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### ***1.3 Project Methodology***

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#### Literature Review.

Foundational information was generated for the needs assessment project with a review of literature developed to understand senior community needs, approaches for meeting those needs, and explore appropriate data collection strategies and adaptable instruments. Secondary data regarding historical and current demographic trends of Dayton and the surrounding area was also compiled. These efforts provided insights on how surveys/research/assessment efforts have been undertaken in US communities sharing a similar demographic makeup as Dayton. The review of background literature demographic information was also helpful in crafting general research domains of understanding and, ultimately, specific survey questions for the project.

### Steering Committee Formed.

In early June 2018, a group of community members (55+) met at the Dayton Activity Center (DAC) at the request of city staff. Among these meeting participants were business owners, civic leaders, longtime residents and farmers, and other key opinion leaders. The meeting was convened both as a kickoff event announcing the project and a discussion (facilitated by the project coordinator) of issues generally facing older adults and seniors and particularly by those living in Dayton. Input was also solicited at this time for how to best reach other older adults and seniors (especially for data collection activities).

Nearly all participants at this kickoff meeting agreed to continue as a loose-knit steering committee that would help disseminate information and guide decision-making for the project. Steering committee members proved invaluable as trusted community liaisons, helping to ensure the success of data collection activities and events.

### Data Collection Plan Developed.

In late June 2018, a data collection plan was drafted based on the literature review, input from community members, and in consultation with city staff. As is beneficial in most evaluation projects, multiple strategies were used to gather both quantitative and qualitative information. Also, a robust outreach plan was developed to capitalize on the use of social networks, email lists, Dayton's public website, and other "on the street" efforts.

### Survey Design: Two Versions

Survey questions were developed and pre--tested with members of the target population. Subsequently, these questions were formatted into a survey created in *Qualtrics* that would be disseminated online. Promotion material was created to recruit online survey participation from the target population, including Information about the needs assessment project and instructions on how to access the survey online. This material was disseminated among multiple social networks

Initially, city staff and steering committee members cautioned that online surveys were not ideal for gathering a desirable quality of information from the community, and that older and aging residents might not participate in a survey conducted online. A complementary paper-based survey was thus developed to assuage this important concern.

Paper surveys were made available at Dayton's City Hall, the Dayton Activity Center, at the trailer park office, and at multiple residences throughout Dayton whose homeowners were hosting "National Night Out" neighborhood gatherings. Steering committee members and other volunteers helped to distribute paper surveys via their social networks. Finally, the project coordinator could be contacted by phone or email to request a paper survey be mailed to them.

The period for survey data collection ran from late July through mid-September. Versions of the survey may be found in the Appendix.

### Focus Groups.

Preliminary survey findings informed the content of subsequently held focus groups exploring the variation in attitudes and opinions on how Dayton could serve its aging population. Recruitment efforts targeted Dayton residents 55 and older. Ages of participants ranged from 60 to 75 years old and nearly all were long-time residents of Dayton.

Preliminary analysis of the survey data was used to generate questions of interest for focus group meetings held in Dayton on August 20 and August 21, 2018.

The design for the focus groups was structured using standard accepted practices in focus group research design. Three focus groups were convened and facilitated by the project coordinator (considered to be a neutral party among participants). To ensure autonomy of viewpoint, the groups were held in a neutral location in the community.

Focus groups provided for the elaboration of several emergent themes sought in the research design and survey. The focus group moderator introduced the following topics for discussion: 1) backgrounds, lived experiences, and perceptions generally held of Dayton; 2) needs for this population in the areas of transportation, housing, and health services; 3) current gaps regarding these areas and other issues relating to aging residents; 4) recommendations for how City staff, planners, and policy makers might respond to current and future needs of its aging population; and 5) perceptions about and recommendations for the Dayton Activity Center.

## 2.0 LITERATURE REVIEW

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### *Demographics of Dayton, MN*

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The total population of Dayton in 2017 according is 5,427 (Metropolitan Council, 2018). Between 10-13% of this population are persons 65 years and over (American Community Survey, 2017; Metropolitan Council, 2018).

The Minnesota State Demographic Center projects that Minnesotans 65 and older will increase their ranks by more than half a million people by 2035, while the 18 and under population will increase by about 32,000. The share of Minnesota's total population of those 18 to 64 will decrease significantly (62% to 57%) by 2028 (MN.gov, 2018).

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### *Differences in Age Groups*

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Cantor (1989) suggests that individuals age 65 to 74 have little functional impairment and only need assistance during acute illnesses or emergency situations. Feldman and Oberlink (2003) found that individuals under the age of 60 recognize the importance of good health as much as older participants but seemed less aware of their own.

Moderately older individuals (age from 75-84) have increased rates of disabilities and illnesses that lead to increase need for help for housekeeping and other home maintenance tasks; however, at least half of these individuals have the ability to carry out most activities of their daily life (Cantor, 1989).

Cantor (1989) also found that elderly individuals, those over the age of 85, need the most supportive services including personal care- washing, feeding, and assistance with their medication, and that these burdens increase for low SES individuals and members from racial and ethnic minority groups (p. 101).

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## ***Problems Facing Older Adults***

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Cities across the United States are facing a national crisis that will severely threaten public resources, especially the needs and expectations of aging baby boomers for appropriate housing and services (Kennedy, 2010). Bookman (2008) cites three concerns with the growing number of elder individuals in the United States: increased health care costs, relative decrease of working Americans who fund the retirement system, and the shortage of workers needed to provide home care and other services to elders who remain in their homes (Bookman, 2008).

Kennedy (2010) suggests that in addition to providing homes that attract young people there also are places that welcome older individuals to “age in place” and stay in their homes for the rest of their lifetime.

An infrastructure that focuses on the aging community’s increasing needs for housing, transportation, social services, health care options, and safe neighborhoods benefit the entire community (Alley, Liebig, Pynoos, Banerjee, & Choi, 2007). Regardless of age, the lack of transportation, for instance, fosters isolation—a risk factor for depression, declining physical health, and reduced quality of life (Bedney, Goldberg, & Josephson, 2010).

Retirement or other employment transitions may leave older adults feeling underutilized and without a sense of purpose (Ristau, 2011). Older men may be less able to navigate such transitions or seek out necessary resources (p. 73).

Linking older adults with appropriate resources and services that promote socialization and reduce isolation are important factors that broadly promote health and one’s ability to successfully age in place (Bedney, Goldberg, & Josephson, 2010). Tang and Pickard (2008) found that older adults who were aware of supportive services were more likely to age in place.

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## ***Elder-Friendly Communities***

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*Elder-friendly communities* are places that “actively involve, value, and support older adults, both active and frail, with infrastructure and services that effectively

accommodate their changing needs,” (Alley et al., 2007, p. 1). “Elder-friendliness” requires that community resources (i.e., the local services, programs, policies, and facilities) maximize their assistance with aging individuals through support and especially convenience (Alley et al., 2007). Such communities plan and develop a comprehensive strategy that addresses all the issues of their aging population, in which locals and communities agencies provide for the needs of its residents, advocate for appropriate services and plan for a supportive environment for the elders of the present and future (Alley et al., 2007).

Aging and community development experts broadly agree on important characteristics that help define elder-friendly communities. In such places, basic needs are addressed; social and civic engagement is promoted; physical and mental health and well-being are optimized; and independence for frail and disabled elders is maximized. To age in place successfully, elders require financial security, long-term health care, social connections, housing and supportive services, personal safety, and accessible transportation (Sanker, Liebig, Pynoos, & Banerjee, 2002; Feldman & Oberlink, 2003).

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### ***Financial Security***

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Questions persist among seniors regarding their ability to outlive their financial capacity and whether they will spend all retirement savings on issues such as long-term care (Cutler, 2011). Feldman and Oberlink (2003) found that financial security is perceived as a personal issue and not a community issue. However, the perception of financial security factors significantly in the activities that seniors participate in and the services on which they rely to continue aging in place (p. 271).

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### ***Connecting Socialization and Health***

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Kristel, Snyder, and Scott (2006) reports that a major concern of older adults was the lack of social and recreational activities. Nelms et al. (2009) found that

individuals less connected to their family and community faced more difficulty accessing care services needed to support themselves at home.

Research suggests that individuals with regular social connection are less likely to experience cognitive decline compared to those who are lonely or isolate. Further, this type of socialization among aging adults may help the brain to adequately function despite physiological evidence of damage (Ristau, 2011). Online activities and social networks may similarly be beneficial to the brain health of aging individuals; these older adults (50+) are one of the fastest growing demographic groups using these online social networks (p. 75).

As the population of aging adults increases, so does the presence of chronic illness among them, in turn heightening the concern for adequate health care treatment and facilities. However, research suggests a major weakness amidst the nation's largest health care system for seniors (Medicaid/Medicare) that focuses more on acute conditions rather than evolving into a more robust long-term care system. Such institutional bias has results in fragmented, poorly funded health care delivery that does not address the needs of older adults with multiple chronic illnesses (Davitt & Marcus, 2008; McDonough & Davitt, 2011).

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## ***Housing***

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Baby boomers want to stay in their homes as long as possible (Kennedy, 2010; Kristel, Snyder, & Scott, 2006). In a 2006 study, seniors intending to move from their area within the next five years reported that they would reconsider staying if housing was available that was affordable and had low maintenance, no lawn-care, and privacy (yet close to neighbors) (Kristel, Snyder, & Scott, 2006).

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## ***Quality of Life***

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### **Supportive Services**

The primary objective for supportive services for the elderly population is maintaining their quality of life by enhancing individual competency and making

environmental improvements (Cantor, 1989). Although aging adults (65+) tend to have one or more chronic illness; however, data suggests the that majority of these individuals are healthy enough to live independent lives and need very minimal assistance (p. 100).

Aging adults may also need assistance with driving and shopping to maintain their independence (Alley et al., 2007). Individuals with disabilities facing additional challenges with daily activities and participating in community activities may have an increased dependence on service systems and community resources (p. 3).

### Informal Services

A large portion of care provided to elderly Americans is done so by informal caregivers such as friends and family members (Cantor, 1989). As these informal resources become exhausted or unavailable, more formal supportive services are sought for assistance. However, some elders may not have family (close by or at all) that are capable of providing appropriate assistance; therefore, their community is often needed to step in (p. 102).

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### ***Transportation and Safety***

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Many older individuals have difficulties maintaining their driving abilities as they age, leading to numerous personal transportation concerns (Kristel, Snyder, & Scott, 2006). Roughly 7 million Americans older than 65 do not drive and about over half of these individuals stay at home in part because they lack transportation (Bedney, Goldberg, & Josephson, 2010). Kristel, Snyder, and Scott (2006) found in their study that a high number of elders (38-45%) capable of driving their own vehicles say the median lines and street signs are difficult to see.

Transportation connects older people to other community members and activities. Feldman and Oberlink (2003) suggest that aging individuals that don't feel safe leaving their homes (or don't have transportation to do so) may face increased isolation. In addition, those no longer able to drive missed the convenience of their car and reported that public transportation was insufficient.

## 3.0 SURVEY FINDINGS

### 3.1 Cohort Analysis

The sample of Dayton residents who responded to this survey is employed slightly less than labor statistic estimates, is more White, and has slightly higher income than estimated by the US Census Bureau (2016-2018).

However, the 93% of individuals in the sample who live in a home that they own mirrors the homeownership rate mirrors estimated for the City of Dayton provided by the US Census Bureau (91%).

The average annual income for this sample ranged from below \$10,000 to more than \$100,000. The respondent group may be slightly more affluent than the US Census Bureau reports for the city of Dayton. The reported median annual income for our sample hovers around \$70,000 which appears within the range of US Census Bureau estimated distribution of median incomes (\$60-75,000).

Although this study did not specifically use the word “retired,” 41% of survey respondents suggested that they were not currently working for pay. Slightly more (43%) report working 26-40 hours and more. Further studies might specifically use language regarding retirement and examine the unemployment rate among older residents and related concerns separately—especially among those reporting a disability that inhibits their ability to secure employment if desired.

The racial and ethnic breakdown of the sample presents a slight concern for the representative quality of the research. The extremely large majority (95.3%) of White survey respondents under-represents racial and ethnic minorities in this study. The US Census Bureau estimates that the population of Dayton is 1.5% Black or African-American, 11% Latino/Hispanic, and 85% percent White; others (e.g., American Indians, Native Americans, Asians, etc.) together make up less than 3% of Dayton’s population. Further study can address this potential underrepresentation of non-majority opinions and interests through additional research activities, such as focus group and interviews of key opinion leaders within specific culturally-defined communities.

Preliminary analysis of the survey data explored differences in attitudes and opinions based on respondent age. A review of relevant literature suggested that elder studies and projects should focus on the needs of three distinct age cohorts. Roughly speaking, older adults (55+) are preparing for, nearing, or at retirement age. The first age group, or cohort, was made up of respondents between 55 and 64 years of age. The second included respondents 65-79 years of age, and the final age cohort included respondents 80 years or older.

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### **3.2 Descriptive Analysis**

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This section provides a basic description of the data from each survey question. A preliminary analysis of the descriptive data (i.e., survey responses) indicated that significant correlations could potentially be made among different domain questions. One limitation of the data is that *significance* (e.g., p value is < .05) was difficult to detect; however, the presence of a *notable* difference may indicate a need for further analysis and/or additional data collection.

Questions presented in the online survey had no numbers while the paper survey benefited from having numbers. For clarity here, survey questions have been numbered and/or re-numbered so that they can be consistently referred to in these findings. Questions used to modify or skip to other questions contribute no value to the analysis and thus have been excluded from analysis. The version of the hard-copy survey instrument may be found in the Appendix. Further analysis can be conducted on these descriptive data using crosstabulations and other explorative processes.

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#### **SURVEY SNAPSHOT**

117 surveys collected

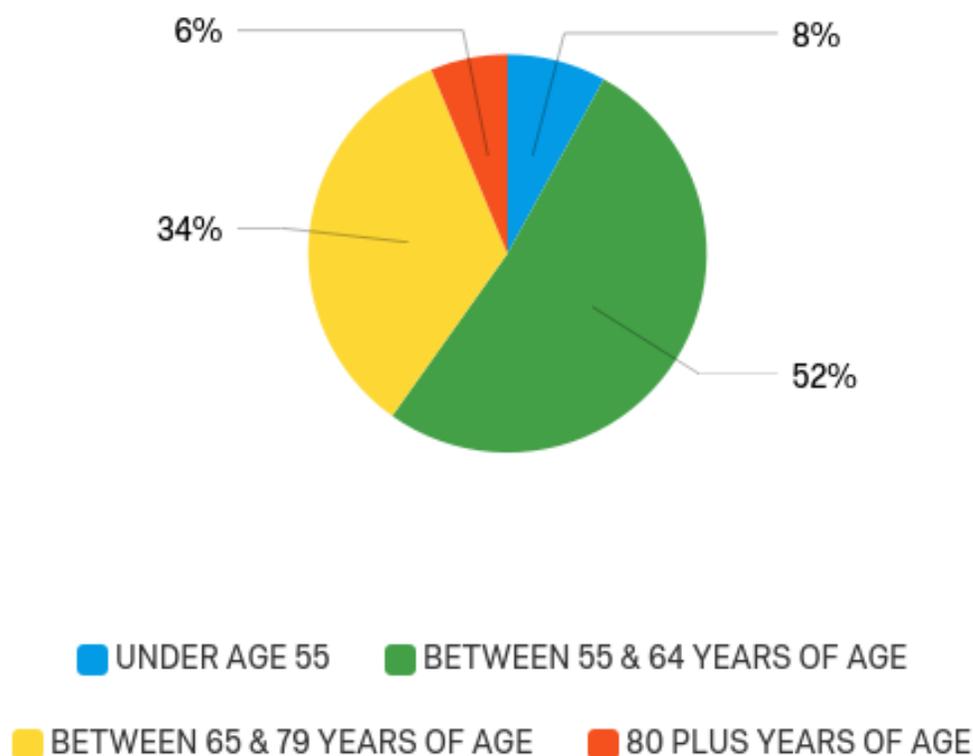
Online surveys: n = 100

Paper surveys: n = 17

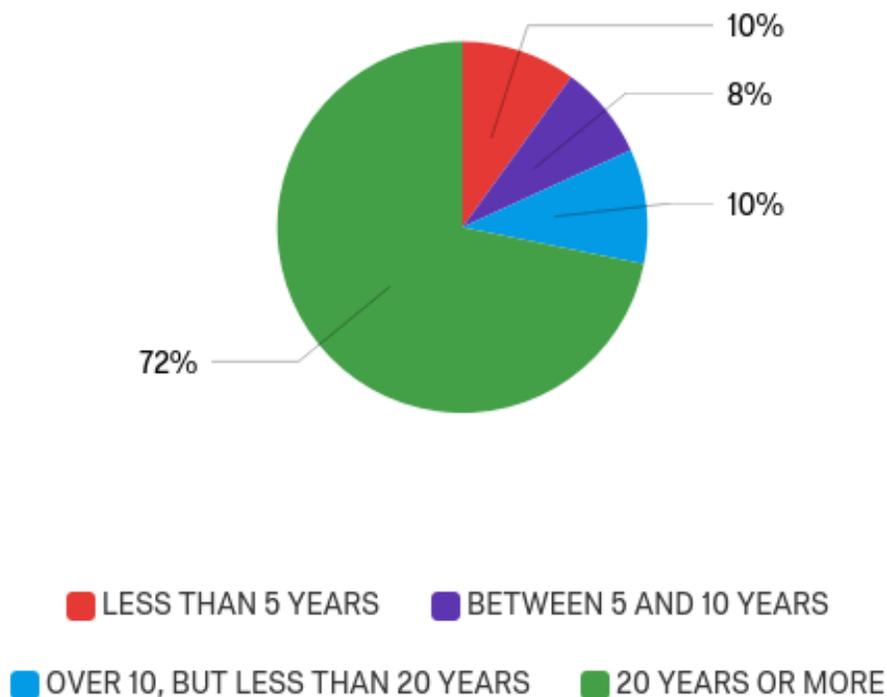
**PART A. DEMOGRAPHIC (AGE) INFORMATION****Q1 – Age of Respondents (N=112)**

In its original design, the project targeted Dayton adults 55 years and older. Per suggestions in the reviewed literature and similar surveys, we broke the age groups into more discrete categories. This way we could analyze other data more effectively. Those reporting their age as less than 55 did so because they were answering on someone else's behalf. We will account for this [intended] error in our analyses if necessary.

Chart Q1. Respondent Age



USE OF OVERSIZED GRAPHICS AND FONT IS INTENTIONAL AND DESIGNED FOR A SPECIFIC AUDIENCE.  
THE PRESENTATION OF THESE FINDINGS (IN THIS VERSION) IS DESIGNED FOR ONLINE-VIEWING.

PART B. **LIVING IN DAYTON****Q2 - How long respondents have lived in Dayton, MN (N=110)**Chart Q2. Length of Time, Residence in Dayton

*1 out of every 4 persons residing in Dayton more than 20 years has lived here their whole lives, or "almost."*

**Q3 – Residential Area:**

This map of Dayton (below) was shown to respondents that roughly divides the town into 4 basic sections (NW, NE, SW, & SE).

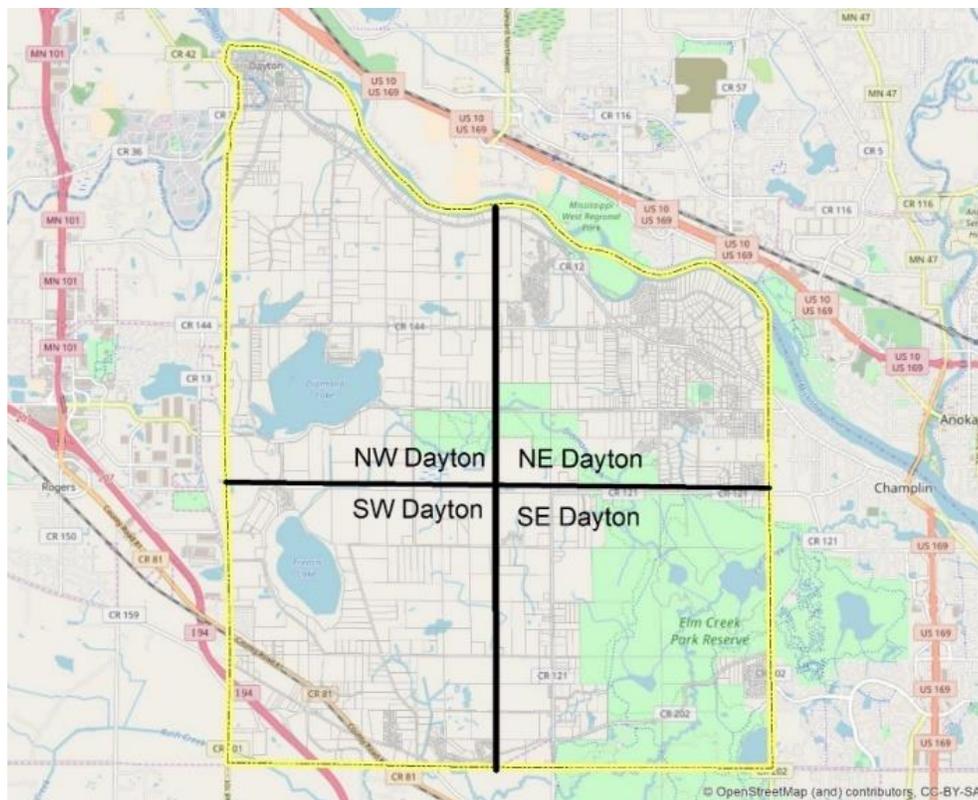
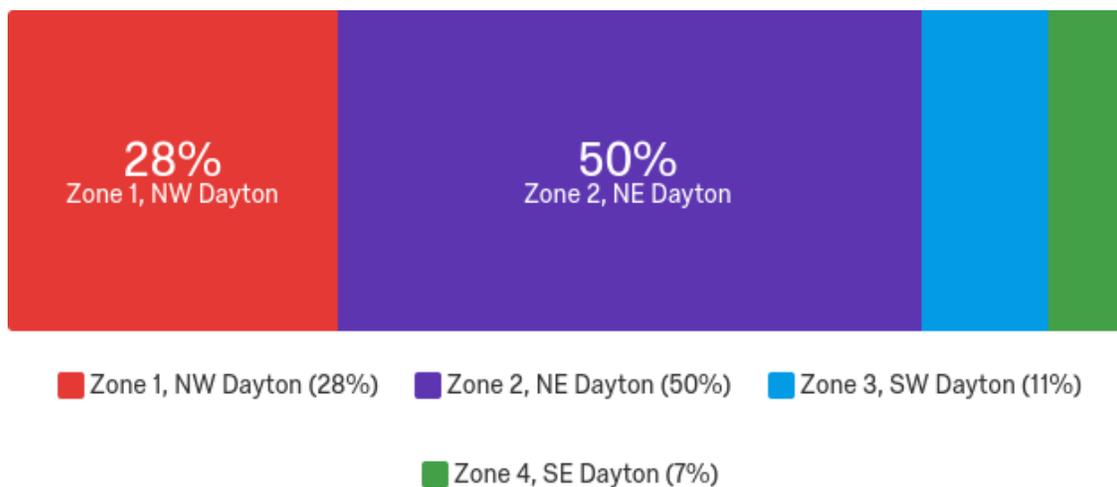


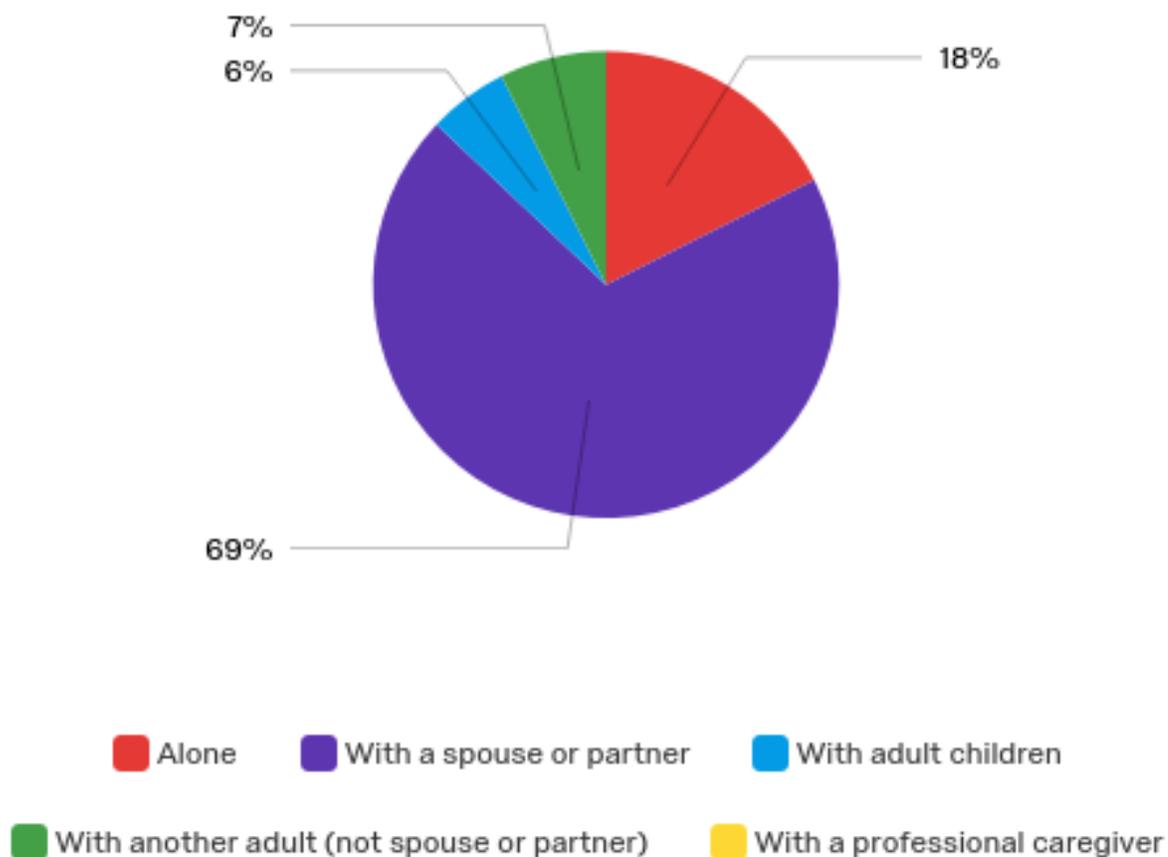
Chart Q3. Where Respondents Live (N=110)



#### Q4 – Respondent’s Living Arrangement

As the graph below indicates, seniors and older adults are mixed in their plans of whether to stay in Dayton as they approach retirement or are currently retired. Respondents were asked the extent to which they agreed with the statement, “I will remain in Dayton throughout my retirement.”

Chart Q4. Current Living Arrangement



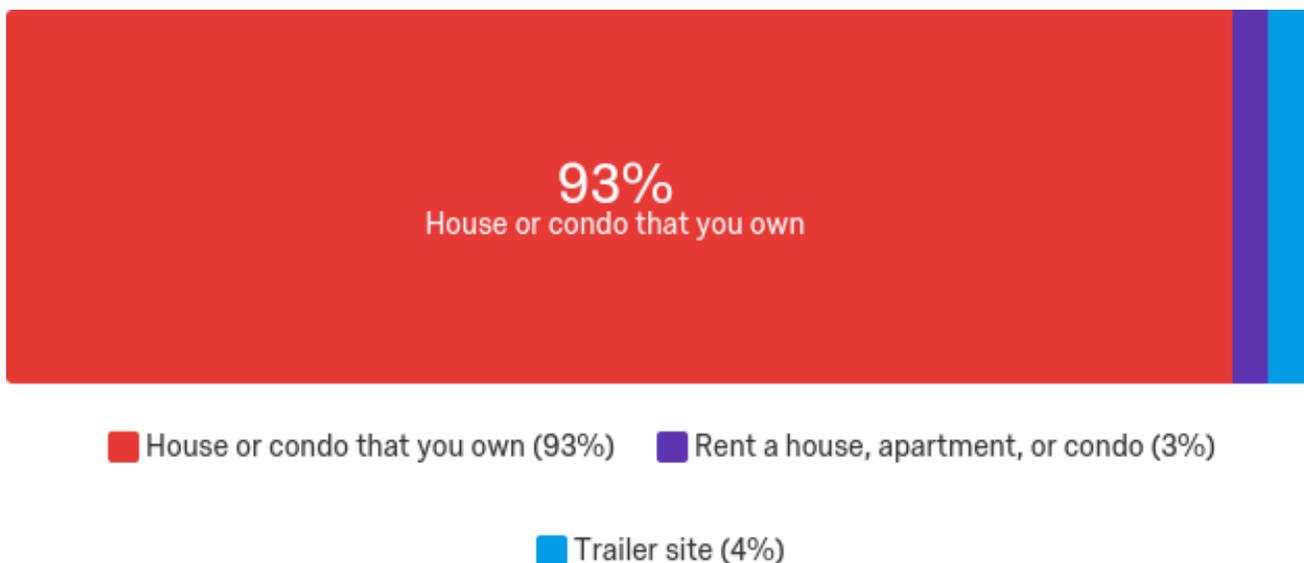
**Q5 - Caregiving for an older or disabled adult**

7% of respondents reported that they provided caregiving for an older or disabled adult; in or outside their home 93% do not.

**Q6 - Which of the following describes your housing situation (n=109)**

Of those respondents reporting (N = 109), most lived in the house or condo that they owned; others rented a house, condo, or apartment. 4% reported living in a trailer home. No one reported being homeless.

Chart Q6. Current Housing Situation

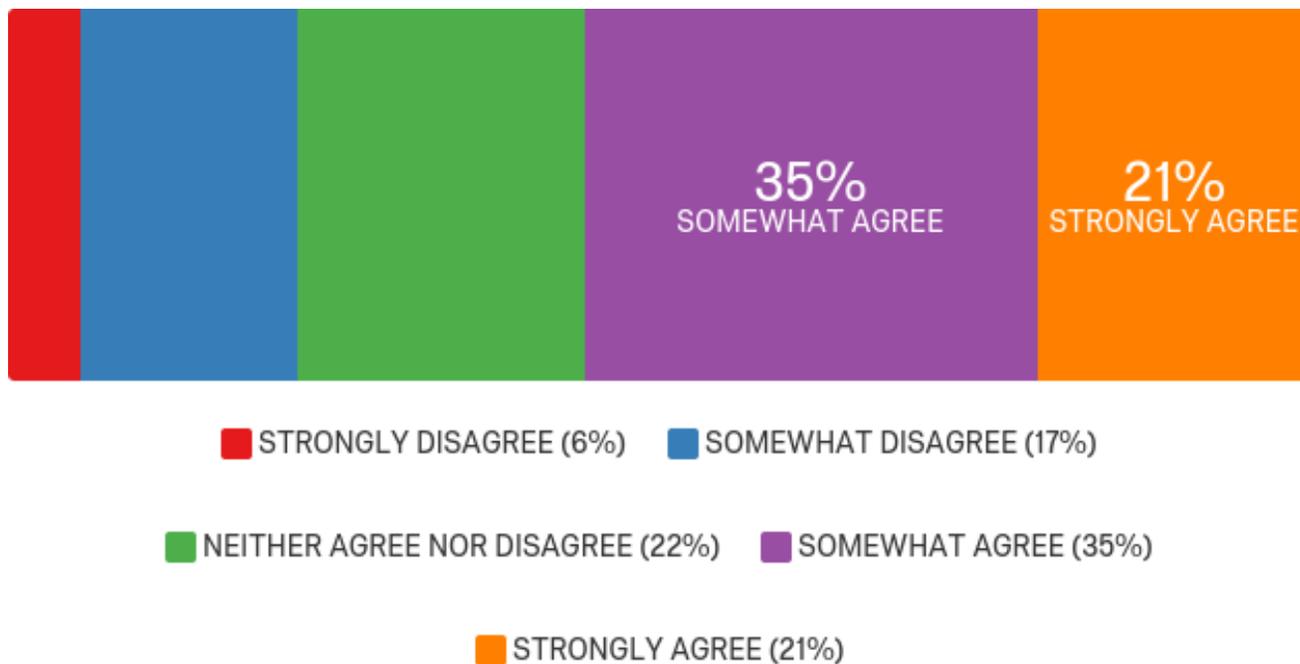


### Q7 – Recommending Dayton to Others (N=109)

Respondents were asked how strongly they agreed with the statement, “I would recommend living in the city of Dayton to older adults.” A majority (56%) agreed or strongly agreed with the statement; however, nearly one in four disagreed to some extent. Almost as many (22%) had no strong opinion either way in recommending living in their city to other older adults.

The survey question (Q7) suggested that over half of the respondents would “recommend living in the City of Dayton to older adults.” There does not appear to be significant differences among responses across age groups or area of residence.

Chart Q7. % of Respondents Recommending Living in Dayton to Older Adults

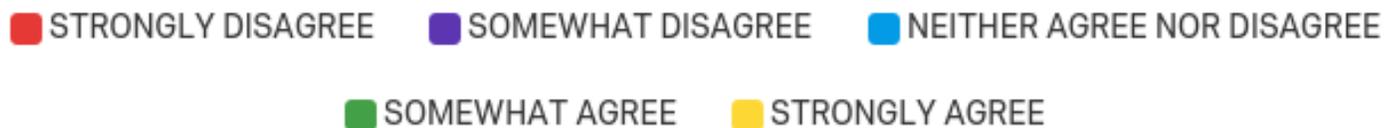
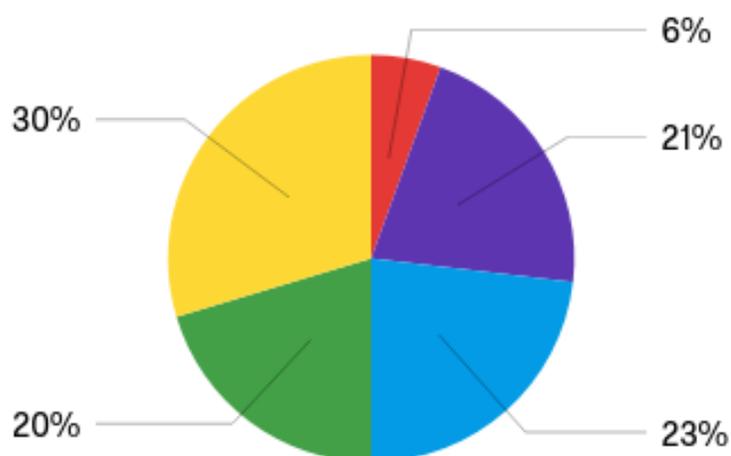


### Q8 – Retiring in Dayton

As the graph to the right indicates, seniors and older adults are mixed in their plans of whether to stay in Dayton as they approach retirement or are currently retired.

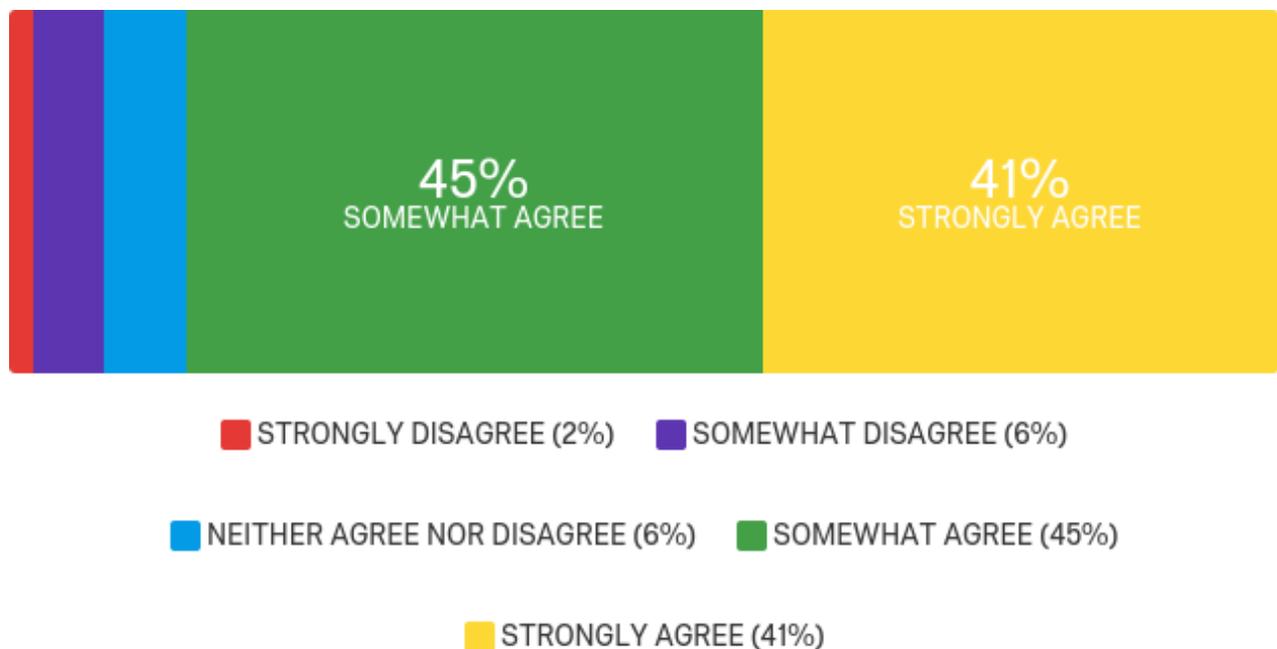
Respondents were asked the extent to which they agreed with the statement, “I will remain in Dayton throughout my retirement.”

Chart Q4. % of Respondents Planning to Retire in Dayton

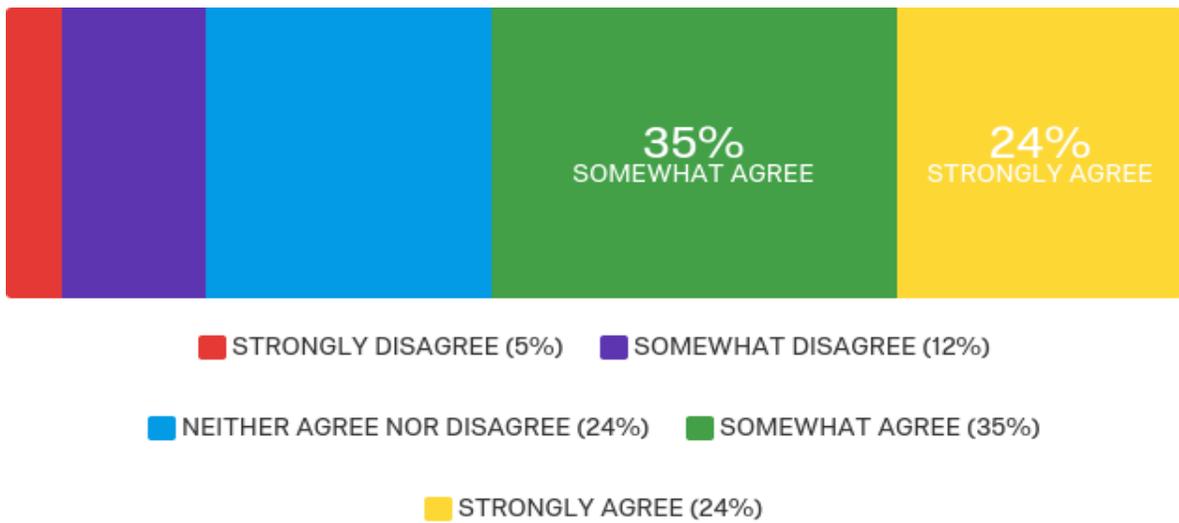


**PART C. FEELING SAFE IN DAYTON**

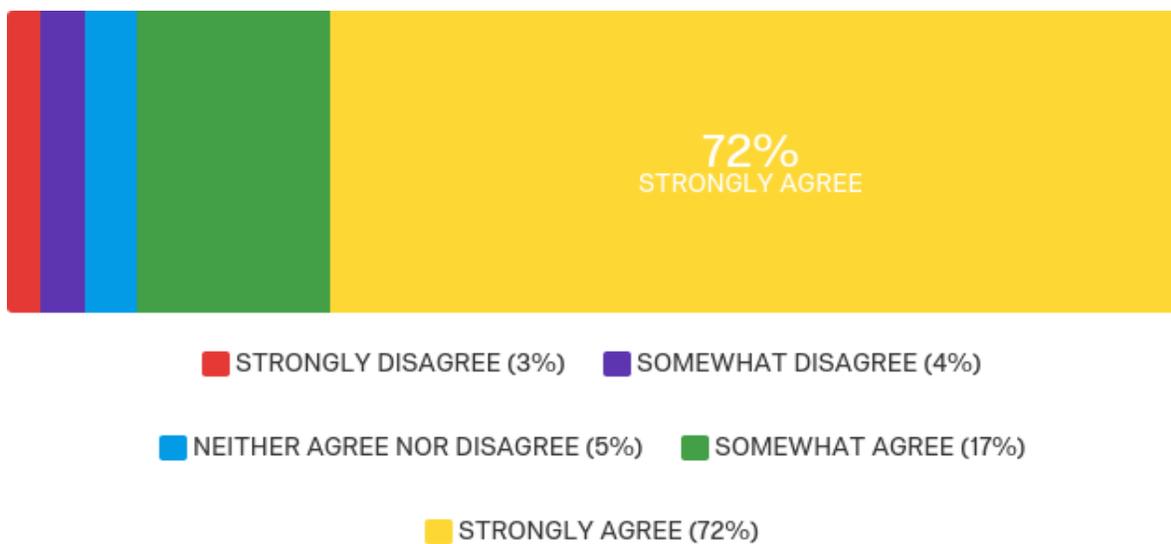
Most seniors and older adults feel generally “safe and protected” in their Dayton homes. Respondents were asked the extent they agreed with a series of statements regarding safety issues. Graphs help to visualize the responses along with percentage totals for each response categories. Each statement began with “I feel...”

**Q9 - ...protected, safe from robbery or burglary.**

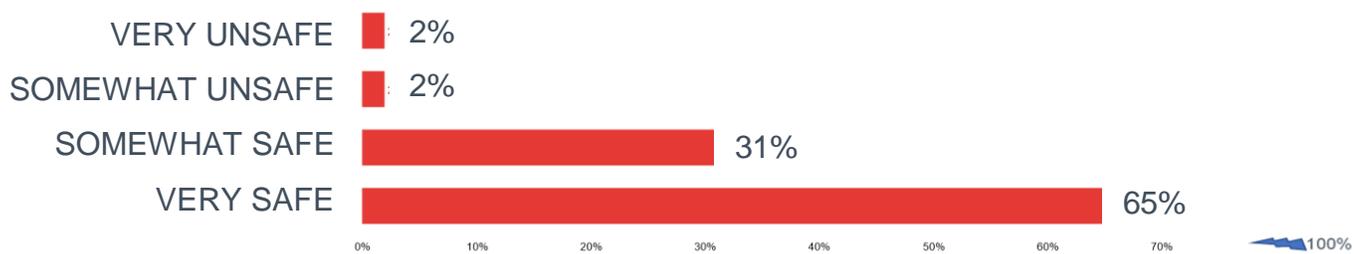
**Q10 - ...safe from frauds, identify theft, or other scams.**



**Q11 - I feel safe from physical and emotional abuse.**



**Q12 - In general, how safe do you feel where you live?**



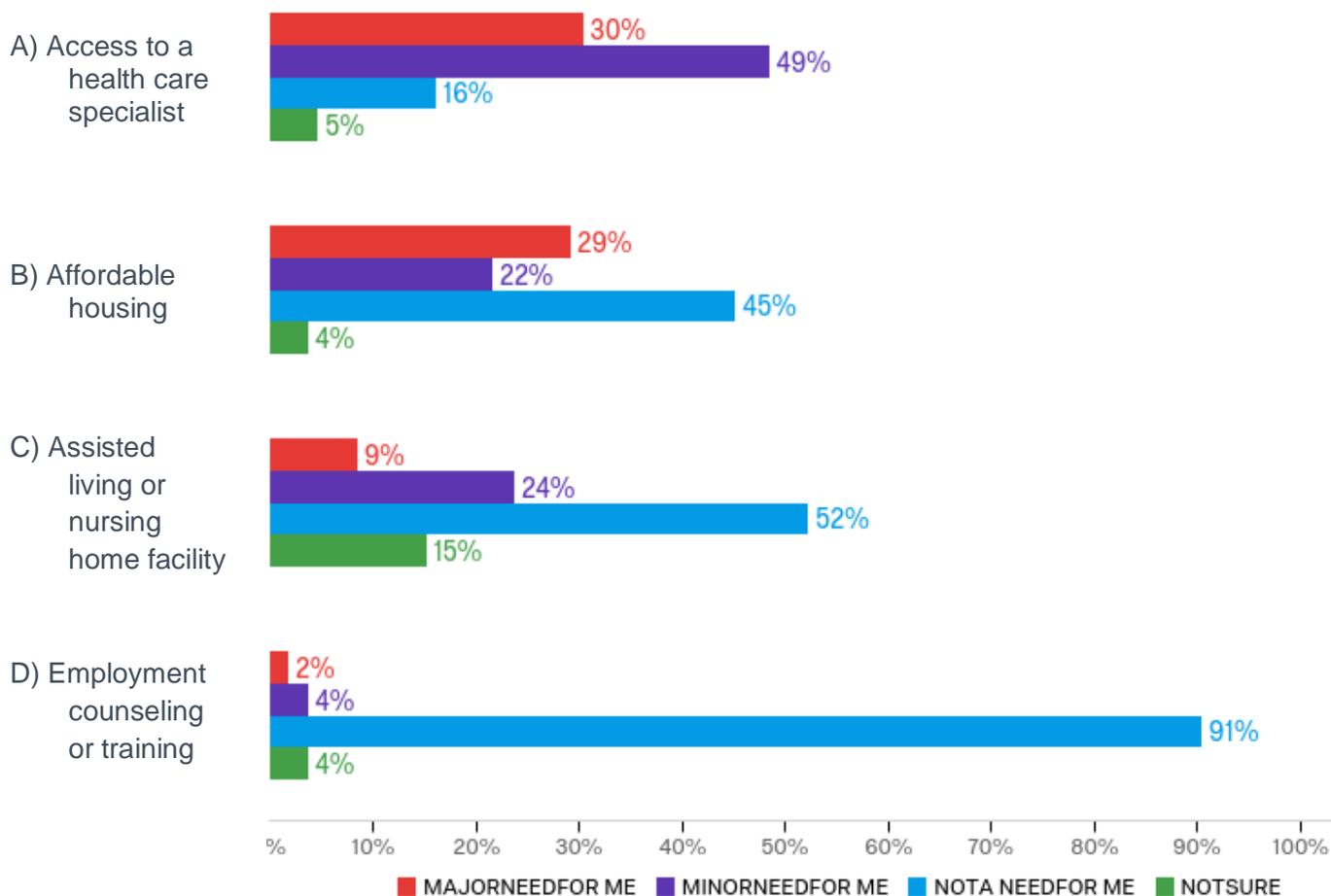
## PART D. **NEED FOR VARIOUS SERVICES/FACILITIES**

Respondents were shown a list of various services or facilities for adults 55 and older that are available in some communities in Minnesota – that might be needed by them now or in the future. For each of these items, respondents indicated whether the need is (or will be) a major or minor one, or not a need at all. Respondents could indicate if they were not certain at the time of the survey.

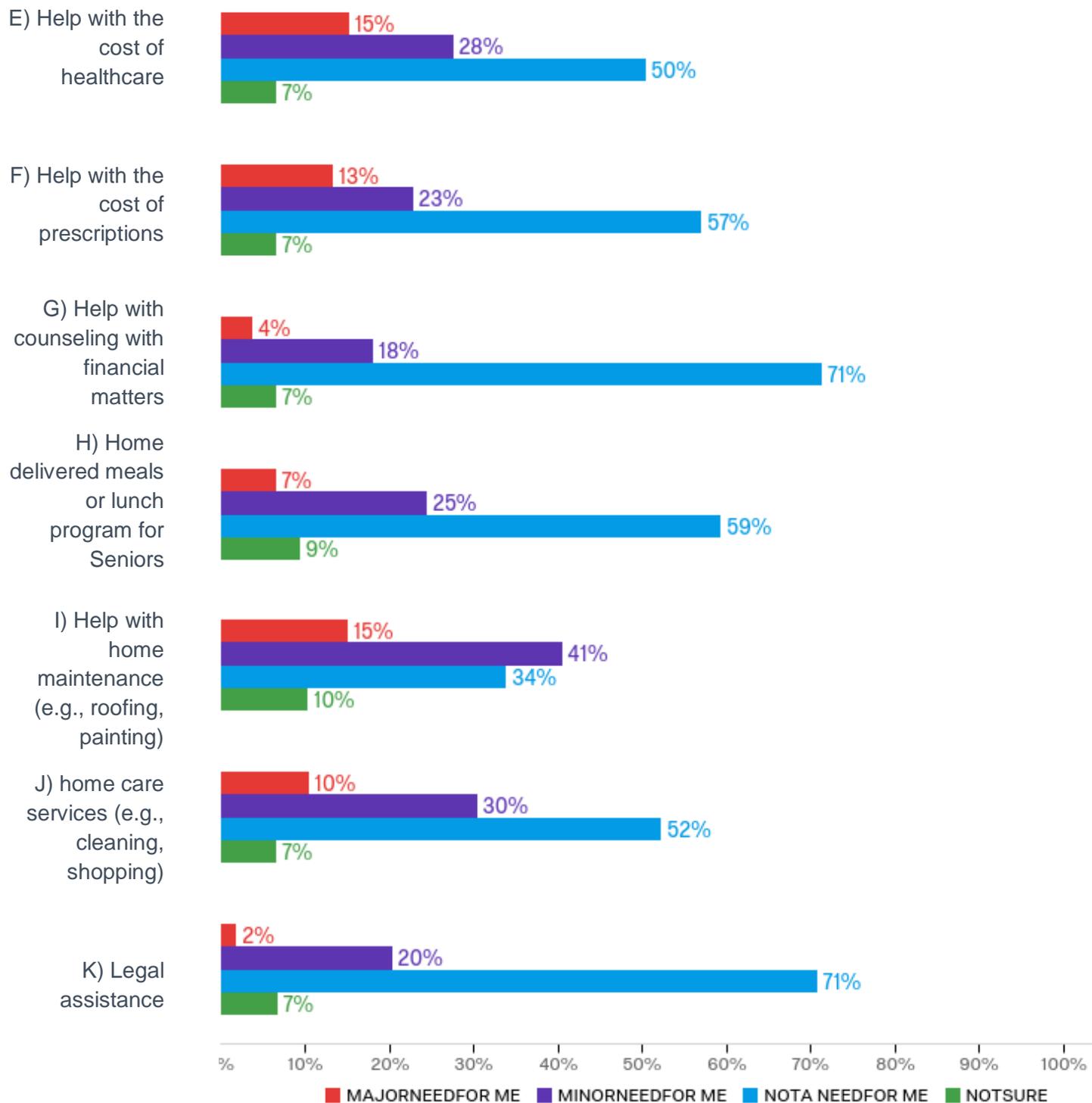
Below is a summary of these responses organized by each item with percentages indicated for the aggregated sample. Respondents could add items to the list; a summary of these responses is shown after the set of quantitative data.

**Note:** Further analysis of this question can be found in “Cross Tab Analysis” section.

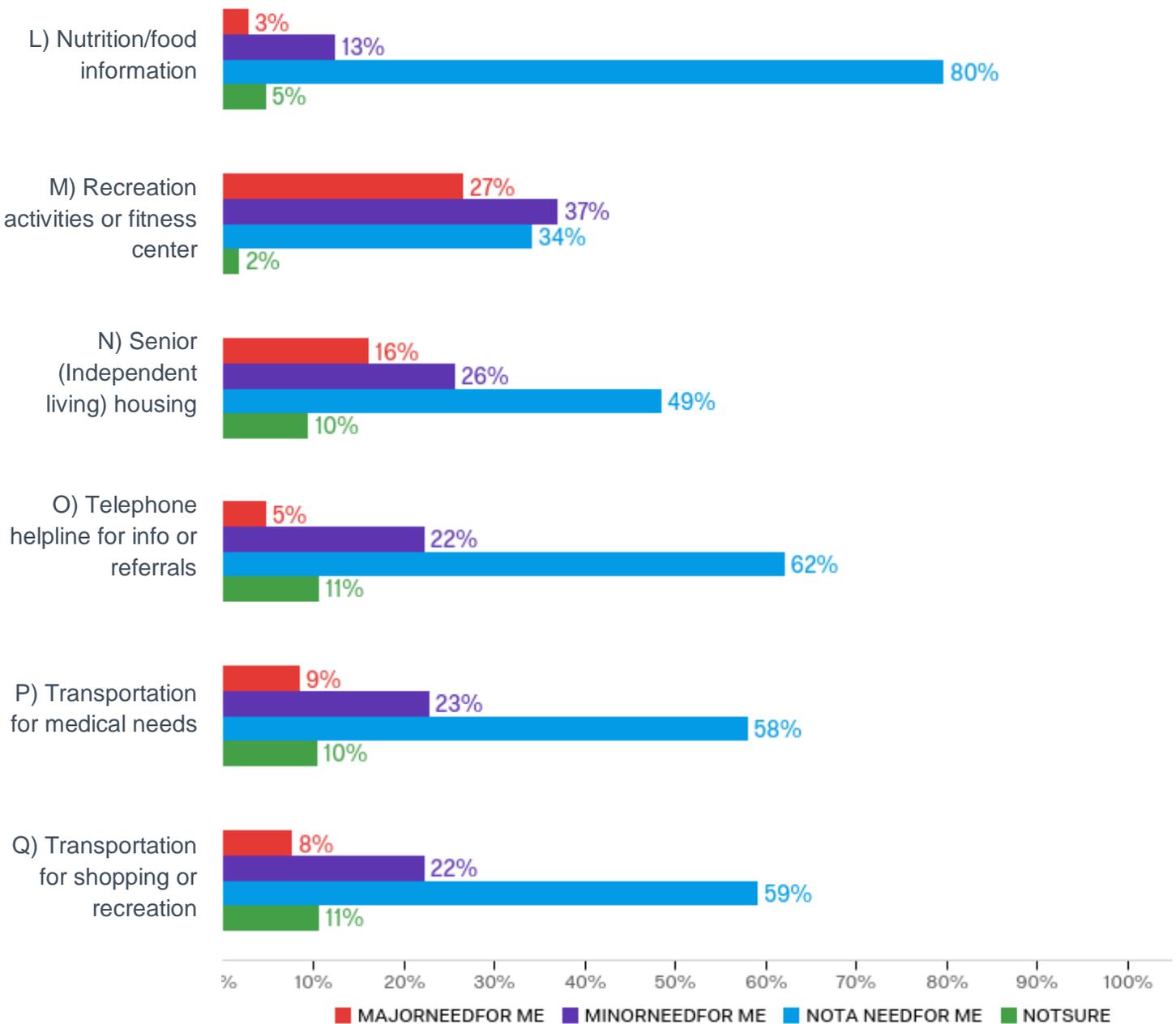
### Q13) Need for various services or facilities



### Q13) Need for various services or facilities (ctnd)

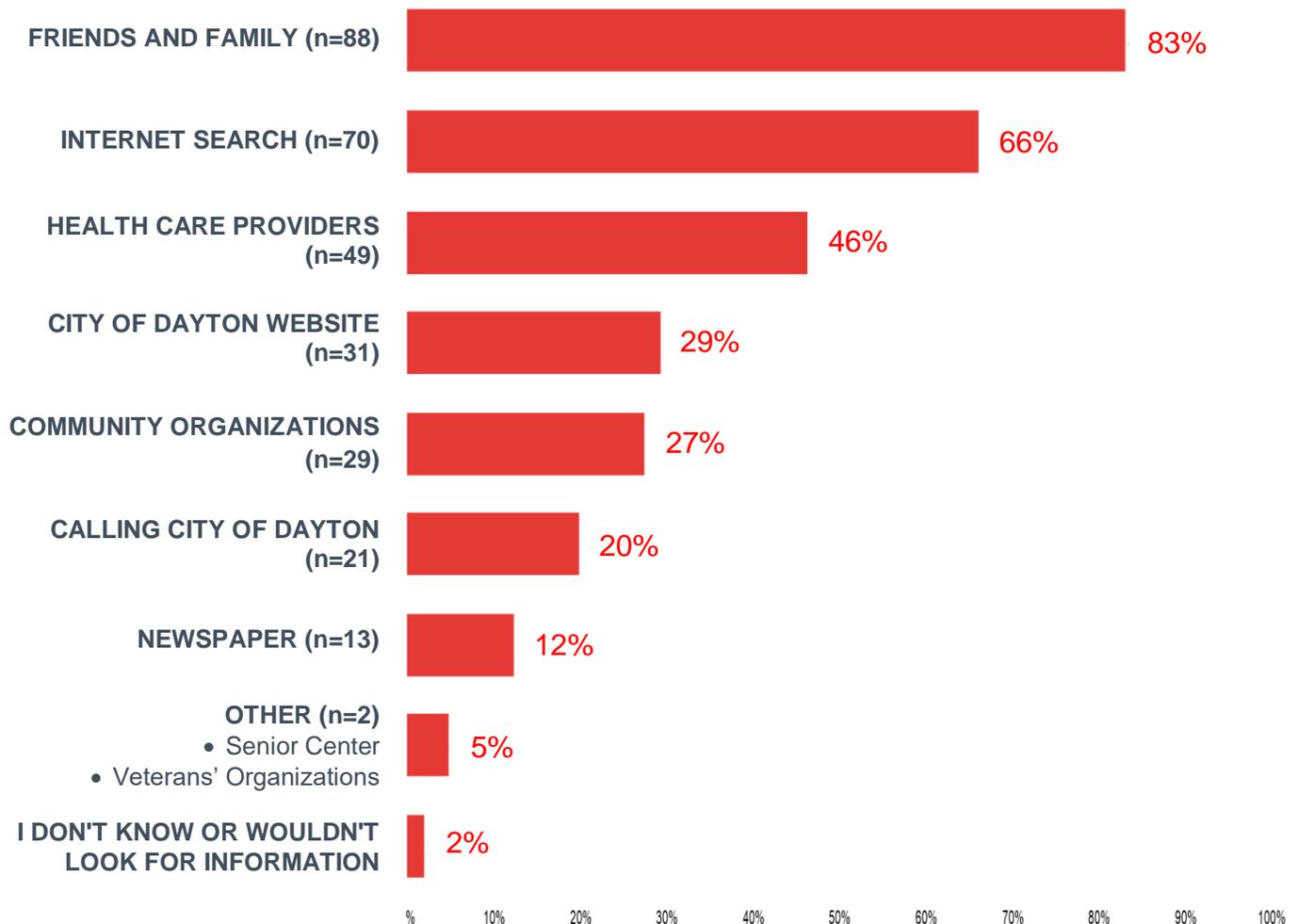


### Q13) Need for various services or facilities (ctnd)



### Q14 - Finding services in the community (N=106)

Respondents were asked to review the list from the previous question and indicate where they would turn for information if they needed to find one of these services. More than one choice could be selected, and respondents could add to these choices.



Because multiple choices could be selected, totals do not add to 100%. The above display indicates the data by “percentage of responses.” For example, of the 106 individuals responding to this question, 88 of them (or 83%) selected “friends and family” as the source from whom they would seek information about finding services they desired. 70 of the 106 respondents (66%) said they would search the Internet to find information about services in which they were interested.

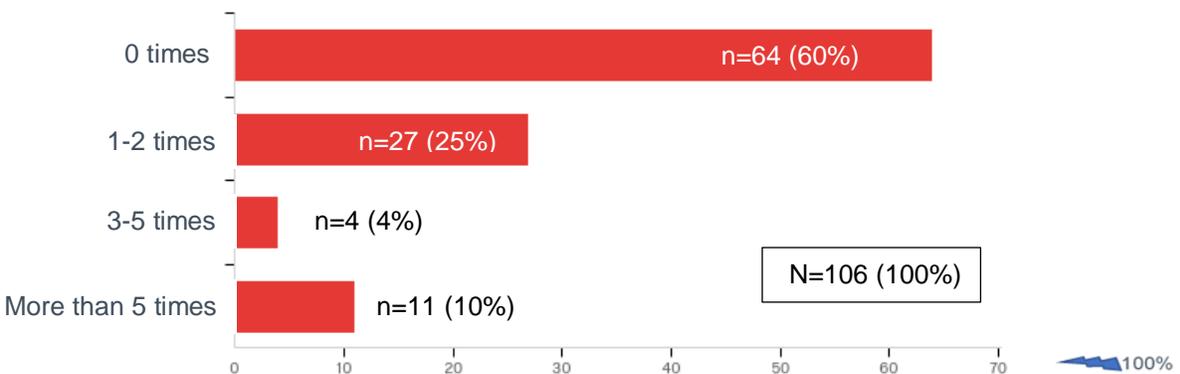
## PART E. OPINIONS ON THE DAYTON ACTIVITY CENTER

Questions in this section asked about the Dayton Activity Center, reasons for attending (or not), and suggestions for improvement. The frequency of respondents using or going to the center has been low over the past year (e.g., 60% of respondents have not gone at all in the last year). While this may have been expected during a transition, Q16 Indicates that nearly half of these have never gone to the Center—ever.

Reasons that explain why a respondent has not gone to the Center in the past year (Q17) include *not knowing about it* or *not knowing its location* (8%, 5%); however, a significant number of those not going to the Center in the past year was due to a lack of interest (46%). Another 39% gave additional reasons why they did not go to the Center in the past year, including (in order of emphasis):

- *Not knowing what the Center provides or “does;”*
- *No interest in games or meals;*
- *Lunches not being served;*
- *Not needed, not relevant, not a “senior;”*
- *Working, no time.*

### Q15 - In the past year, how many times have you been to the Dayton Activity Center?



**Q16 – Of those responding “0 times in the last year,” in question above:**

**OVER HALF (51%)**

Have never been to the Dayton Activity Center.

**Q17 – Reasons for not attending the Dayton Activity Center in the past year.**

<b>Answer</b>	<b>%</b>	<b>Count</b>
I did not know that such a place existed	8%	5
I did not know where the Dayton Activity Center was located.	5%	3
I don't have transportation to get to the place.	2%	1
<b>I have no interest in going to such a place.</b>	<b>46%</b>	<b>28</b>
Other (please give reason)	39%	24
Total	100%	61

**What increases the likelihood of visiting the Dayton Activity Center?**

The companion question to this issue, of course, is Q18, with charts (18A, 18B) showing preferences for a selection of added enhancements to the Center. Chart 18B, indicates more clearly (without the ambivalent “I’m not sure” responses) the types of amenities that would likely increase the use of the Center. Most responses suggest that more scheduled events and specific social activities (e.g., workshops, seminars, fitness classes, and craft fairs) would be well received across all age groups). Additional comments made by text entry reinforced and expanded upon these approaches.

**Q18 – Which services, amenities, or activities would increase likelihood of visiting the Dayton Activity Center.**

Two graphs are provided for Q18. The first (Chart Q18A) includes a tally of “I’m not sure” responses. Chart Q18b removes responses indicating ambivalence to the likelihood question. Green and red color-coding help clarify this significance.

Chart 18A. Likelihood of increased use of Dayton Activity Center per service item provided

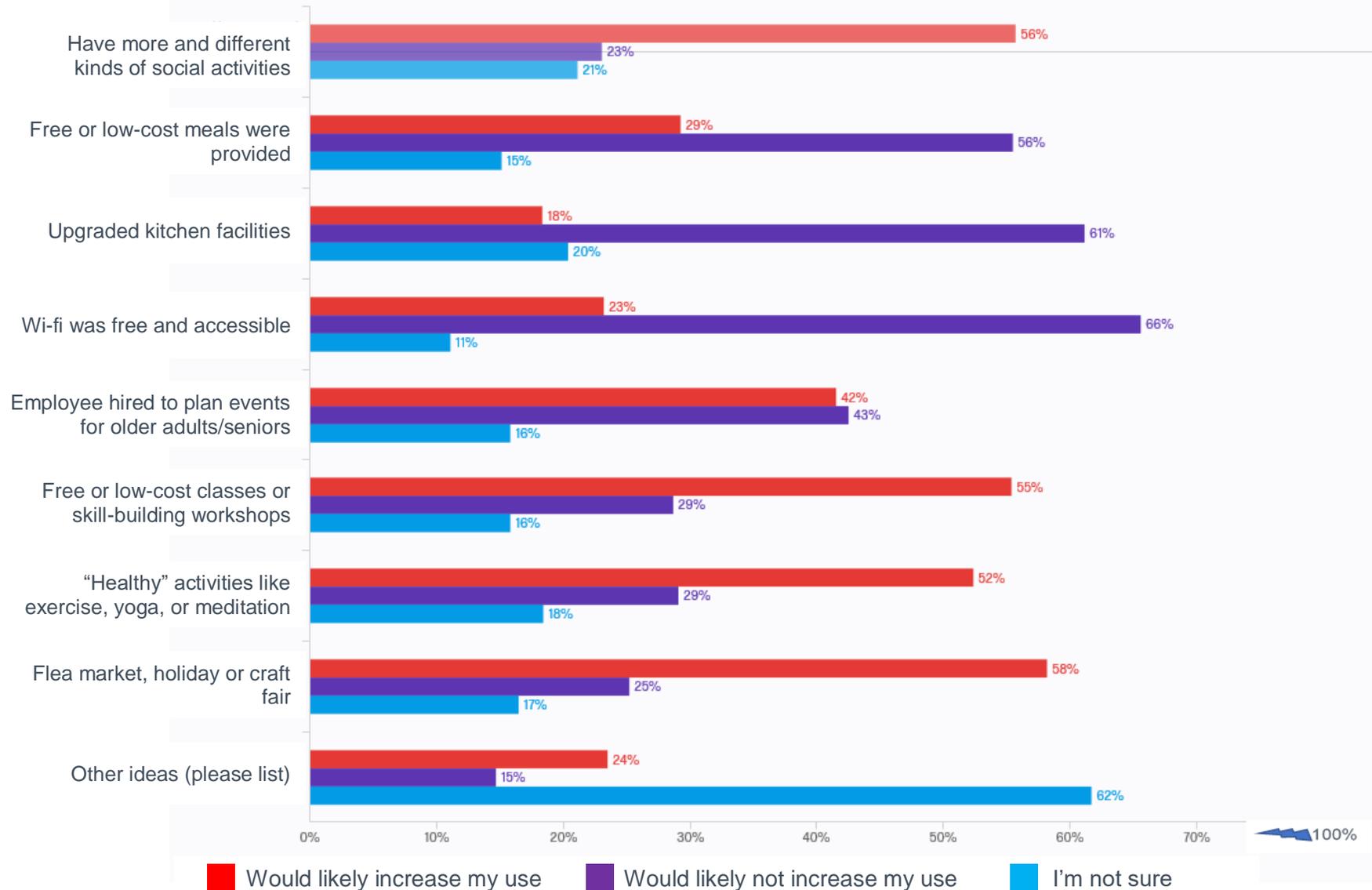
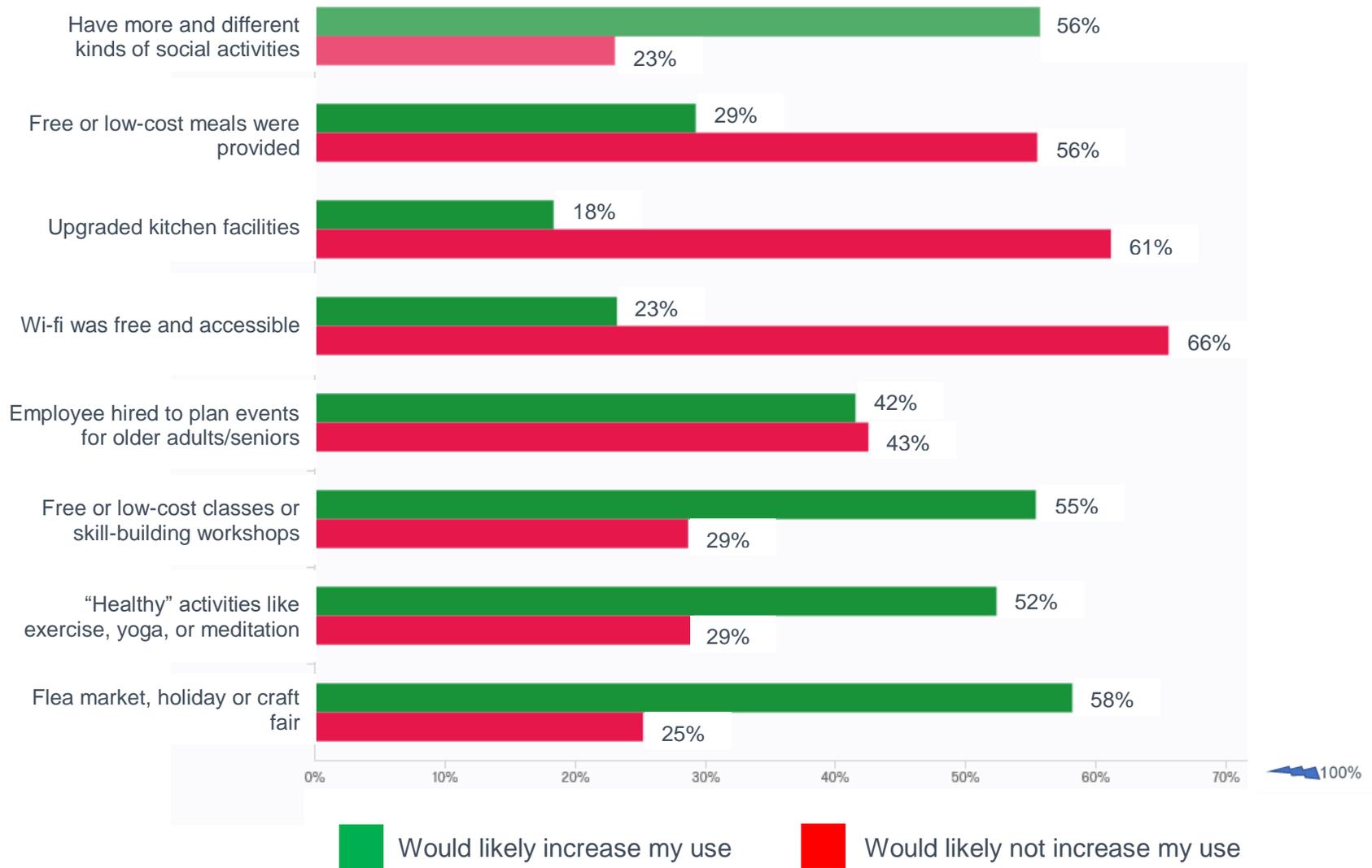


Chart 18B. Likelihood of increased use of Dayton Activity Center per service item provided (Ambivalent choice removed).



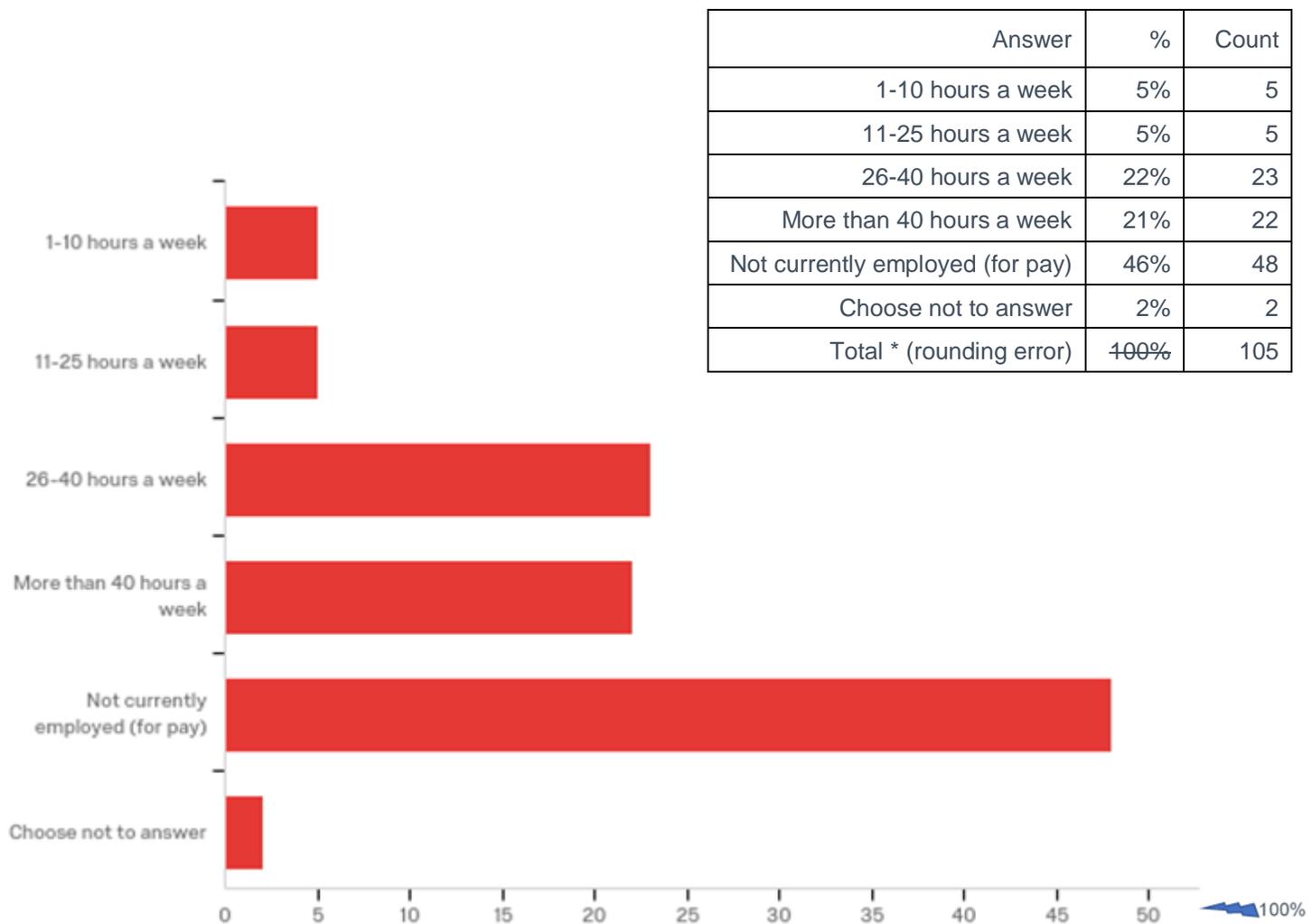
**Q18A. Other ideas/suggestions for increasing likelihood of visiting DAC.**

Additional comments regarding the use of Dayton's activity center can be sorted into 4 primary themes

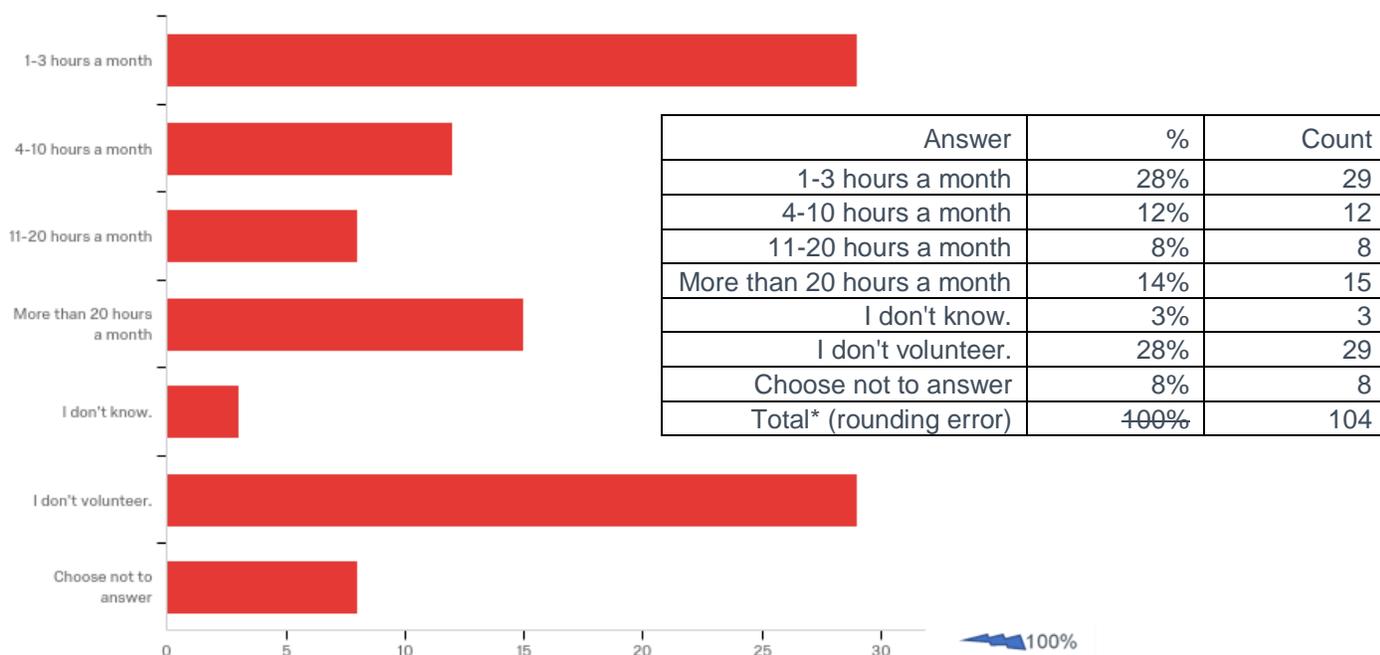
- **Topical events:**
  - Bible study
  - Book club
  - Community social gatherings
  - Current events meetings like Eden Prairie senior center
  - Movie night
  - Performances (brought in or senior groups)
- **Space for social games** (e.g., Bingo or Scrabble)
- **Resource/learning center (i.e., Info/advice sessions or seminars):**
  - Financial
  - Health care and social security seminars
  - Legal
  - Medicare
  - Retirement
  - Technology assistance
  - Volunteering opportunities
- **Space for fitness activities** (e.g., "Zumba" or "Jazzercise")

## PART F. DEMOGRAPHIC (OTHER) INFORMATION

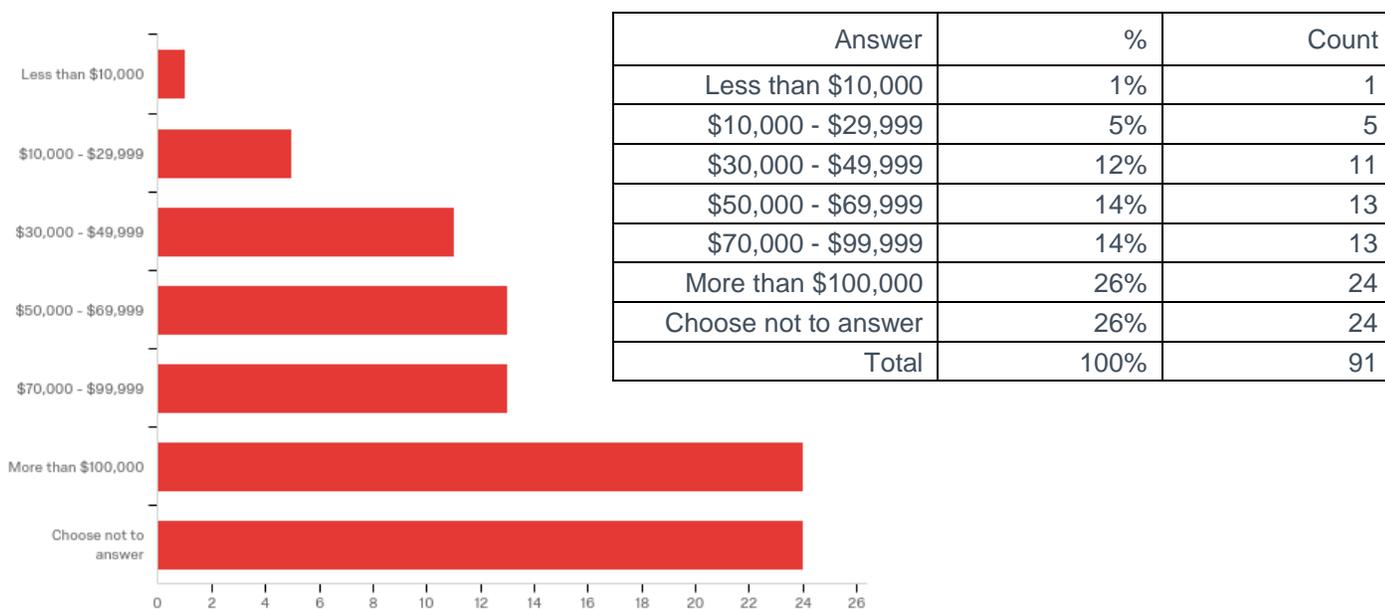
### Q19. - How many hours a week do you work (for pay)?

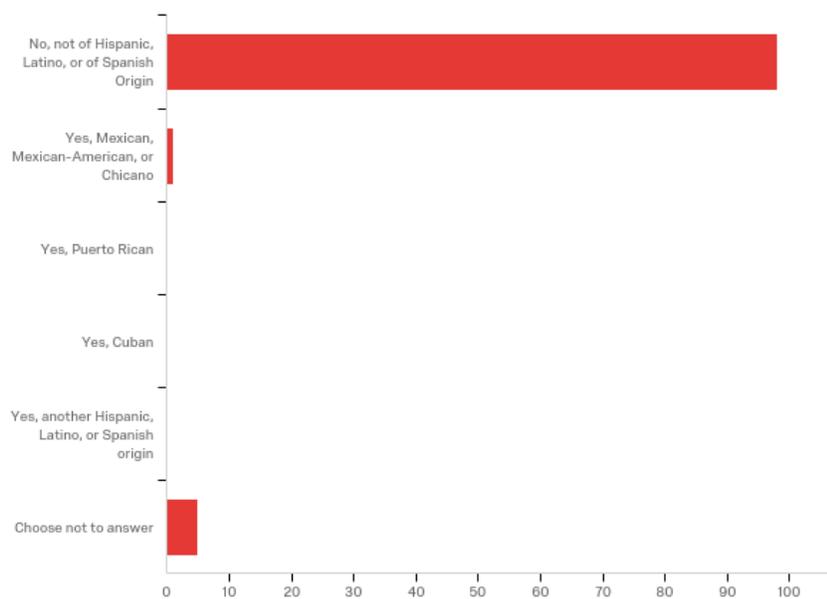
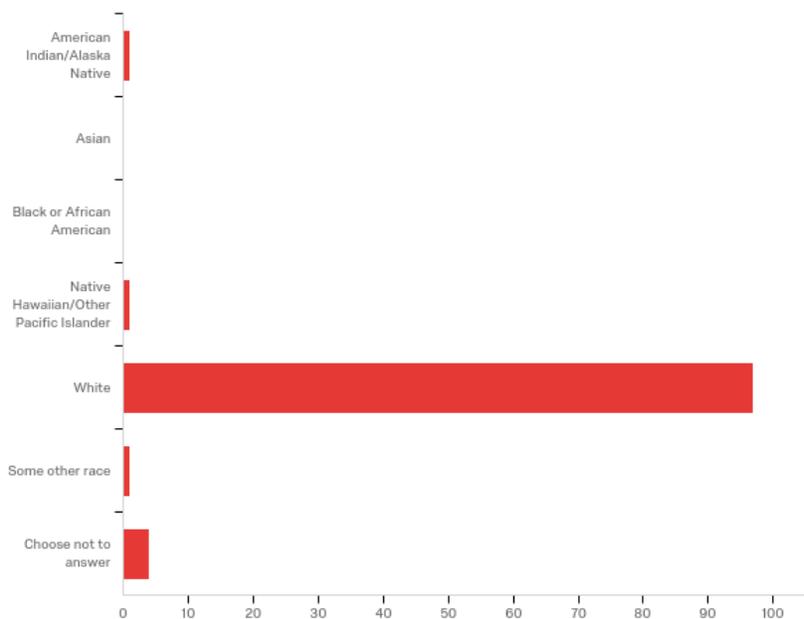


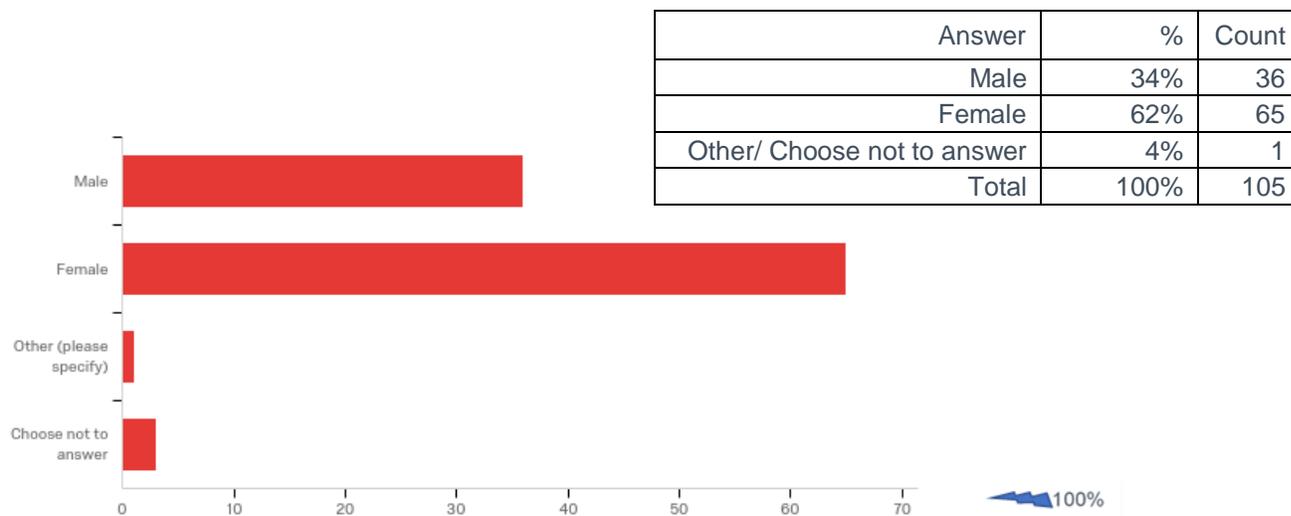
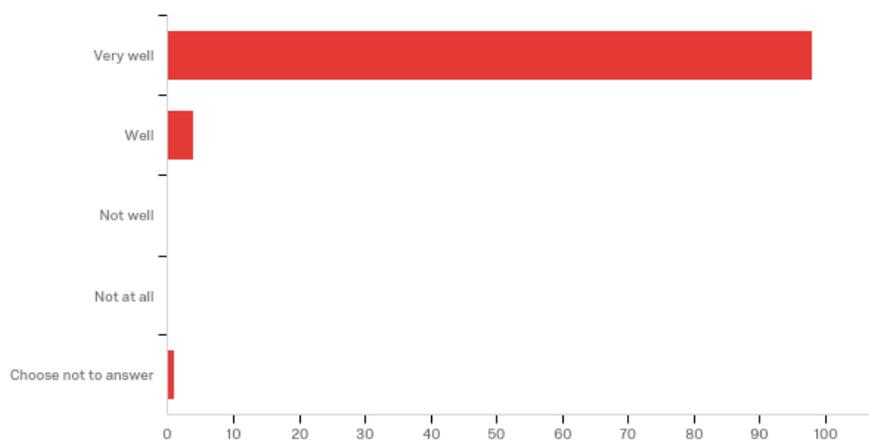
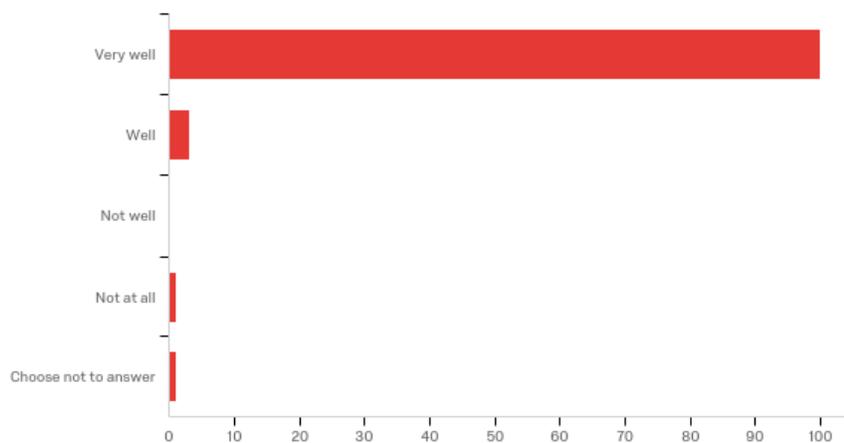
**Q20 - # hours a month volunteering or providing service work ( unpaid)**



**Q21 - What is your annual household income?**



**Q22 - Are you Hispanic, Latino, or of Spanish origin?****Q23 - How would you identify your race? (Choose all that apply.)**

**Q24. Respondents' description of gender:****Q25. Understanding written English:****Q26. Speaking English:**

## 4.0 FOCUS GROUP FINDINGS

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### 4.1 Introduction

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Focus groups were designed to gain insight into the preferences of individuals 55 and older who might want to choose Dayton for retirement. Three individual focus groups, also referred to as “community discussions” throughout this report, were conducted in August 2018 after a preliminary analysis was conducted on survey data. These preliminary survey findings helped shape the question guide used for the focus groups.

The meeting held at the beginning of the project brought together community leaders, key opinion leaders, and “connectors” from Dayton. Although the meeting was billed as a kickoff to the project, the facilitated discussion brought valuable information about the community’s history and ways of building a successful project. Key themes of the project arose from this meeting, matching the information from the literature review and questions that City staff wanted to have answered. To a large extent, the data collection instruments were informed by this first quasi-focus group.

A total of thirty-four participants was counted across all groups. All groups were facilitated by the project’s coordinator, Doug Moon, trained and experienced in activities of this sort.

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### 4.2 Findings

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#### A. Living in Dayton

Most of the participants across all groups were natives and long-time residents (15 years or more) of Dayton. The latter came to Dayton for a variety of reasons, but in general, people enjoyed the rural atmosphere of Dayton but also the nearby conveniences of larger towns (and in some cases, Minneapolis). Many vividly discussed the changes brought by an expanding metropolitan population and housing development.

Asked about what they like about Dayton and/or what was missing compared to other places where they previously lived, many commented about the lack of a “central” or “downtown” area. Many are used to driving to nearby towns for certain amenities; such a routine makes visualizing a “fix” for this missing construct difficult.

## **B. Transportation**

Most participants in focus groups asserted that transportation was a key, if not critical, needing to be addressed in the City of Dayton. All groups discussed the issue of changing traffic patterns occurring near their residences because of increased population, location of new housing development, and road construction inside and outside of Dayton.

Many felt that driving (for them) was a convenience, if not a necessity. Current drivers considered the option of someday not driving as somewhat of an abstract concept—that might be more appropriate for others as they aged, especially for safety reasons. The lack of reliable public transportation was mentioned as a significant barrier that stands in the way of many giving up or reducing their driving. Some had experiences related to them about “spending hours on a bus trying to get to the doctor.” While some mentioned the idea of a pool of volunteers that could drive seniors to medical appointments, etc., others viewed this as an imposition.

A compelling issue that was noted during focus groups was the lack of information about services that are publicly available and provide transportation. While Uber and taxicabs might be an option for some, many focus group participants named other companies that provide ride services for a flat fee. Names of transportation services were referred to (e.g., MetroMobility” and “Dial-a-Ride), but but few knew whether these were correct, or indeed practical and available locally.

## **C. Housing**

### **Housing Availability/Affordability:**

Focus group participants raised the issue that much of the housing stock (and much of the new development) in Dayton is skewed toward family type homes that are multi-level. Comments were made that these types of home are not attractive to a 55+ buyer who is either wanting to downsize in the community or move to the community.

There was general agreement that older adults, for example, wanting to move to a one-level, *elder-friendly* home might not be able to afford the cost of a newer or newly purchased home, regardless of their current home ownership status. It was emphasized across the groups that this housing has to be “mid-range in pricing to attract middle-income type older people.”

#### Senior Housing:

Survey findings suggested that senior housing was a need or at least an interest especially among those 65-79. Focus group participants were split on whether specially designated “senior housing” was needed, considering there was a number of such places in surrounding communities. Others were quick to reply that “those places have two-year waiting lists” and suggested the need for more *elder-friendly* types of housing.

Also, many in the focus groups were very clear that “senior housing” might not necessarily be “affordable.” Group members described *ideal* senior housing as residential development specially designed for aging adults wanting support services, shopping, activities, and other amenities centrally located and nearby.

### **D. Medical/Health Issues**

#### Healthcare Targeted to Seniors

Focus group participants were not necessarily critical of their access to care in the community but were likely to say they drive to health care providers and/or specialists outside of Dayton. As well, participants registered concerns about transportation needs as they age, especially upon losing a spouse or their ability to drive. As mentioned, participants had low opinions about sharing rides on a bus to get to medical appointments.

#### In-Home Services

When discussing health and wellness issues, participants agreed that issues such as home health care and assisted living/nursing care were perhaps a future need for themselves and others. However, many identified a range of in-home services that they currently need because of generally declining health—but not because of frailty or incapacitation. Such examples that went beyond traditional “health needs” identified by seniors included snow removal, lawn care, home maintenance services, and the like.

## Wellness Resources

Focus groups consistently identified that the community could benefit from having more choices of and more affordability of health and wellness facilities.

## E. Dayton Activity Center

Comments across all focus groups generally mirrored the responses from the survey, but many were familiar with individuals who had previously staffed or coordinated activities for the Center. There was a notable variation among respondents reporting knowledge about the history of the Center, decisions made about policies, personnel, and activities held there, and its potential future. To a large extent, focus group participants connected the Center with “playing cards” and “not having lunch anymore.”

As in the survey, many suggestions were made about the Center’s potential, but many agreed that there was a need for renovation, both in the physical space and how it’s use is promoted to the community. There was an acknowledgement that Dayton’s comparably smaller population made a difference in the Center’s potential. For example, while many consider the provision of low-cost meals is an important service the Center can provide for seniors, it might not be needed every day of the week. Among the many suggestions for other events and activities (more game nights, speaker events, craft fairs, etc.), some cautioned against too many events. Finally, many were open to the Center being used for other community needs (e.g., farmers’ markets, wedding receptions) and events that included other generations of Dayton residents.

## 5.0 DISCUSSION/RECOMMENDATIONS

### 5.1 For Further Discussion:

#### Finding information on needs and services

The question of where seniors and older adults looked for information on a variety of needs, services, and amenities is important because such knowledge can improve formal communication and social networking practices for city staff and policy makers.

Findings for this question are somewhat complicated because multiple answers could be chosen (e.g., a respondent may seek information about their needs via the Internet, among family and friends, and from their health care provider. Some variables in this table have been modified to indicate the most meaningful aspects of this question—and to have them understood. For example, the “under age 55” variable and the narrative responses have been removed from this table’s analysis, leaving a subtotal of 98 respondents for this question’s crosstab analysis.

The following table shows the type of information source crossed by the survey’s primary age groups (55-64, 65-79, 80+). The sources sought for information are listed in order of their frequency. One can read the table in the following manner:

- *Of the choices offered, **most (83%)** respondents seeking information (for their needs, amenities, or services) do so with friends and family.*
- *No one over 80 looked to the Internet for such information, but this age group was more likely (43%) to call the City than other age groups (11%, 24%). However, the small number of **total** respondents (7, 7%) for this question were 80+, making analysis for this age group less powerful.*
- *Overall, respondents aged 65-79 seek this information from a larger variety of sources. This group, however, were more likely (63%) to seek information from health care providers than other age groups (38%, 29%).*
- *Clearly, respondents 55-64 sought this information through primarily two sources: The Internet (79%) and friends and family (79%).*

SOURCE SOUGHT FOR INFORMATION	AGE OF RESPONDENT			Total N=98
	55-64 YEARS (n=53)	65-79 YEARS (n=38)	80 + YEARS (n=7)	
FRIENDS AND FAMILY	79%	87%	86%	81 (83%)
INTERNET SEARCH	79%	63%	0%	66 (67%)
HEALTH CARE PROVIDERS	38%	63%	29%	46 (47%)
COMMUNITY ORGANIZATIONS	28%	34%	0%	28 (29%)
CITY OF DAYTON WEBSITE	26%	37%	0%	28 (29%)
CALLING CITY OF DAYTON	11%	24%	43%	18 (18%)
NEWSPAPER	9%	16%	0%	11 (11%)
I DON'T KNOW OR WOULDN'T LOOK FOR INFORMATION	4%	8%	0%	5 (5%)
Total	53	38	7	98
	54%	39%	7%	100%
	100%	100%	100%	100%

### Satisfaction with Dayton

Important questions are often quite complex. In this survey, we asked about the “extent [to which respondents] are satisfied with the direction that Dayton is headed.” This was an attempt to engage the survey taker on “big-picture” and more specific questions. We asked several other questions that could elicit *proxy* information about satisfaction as well. These included items about ***planning to retire in Dayton*** or ***recommending living in Dayton to others***.

Fifty-six percent of survey respondents reported that they would recommend living in Dayton to older adults and almost as many said they would retire here. This may be an indication that Dayton is doing a nice job with its current residents. Of course, there is room for improvement because at least one out of four residents feel differently. Across survey data and focus group findings are reasons that may explain this desire for improvements.

However, these responses do not seem to differ across age groups or neighborhoods. A deeper analysis can be done with data from this study regarding satisfaction with Dayton, its amenities and access to support services, and longer-term decisions made by policy makers. The prospect of affordable or elder-friendly housing

and mitigation of traffic concerns are among the list of these longer-term planning issues.

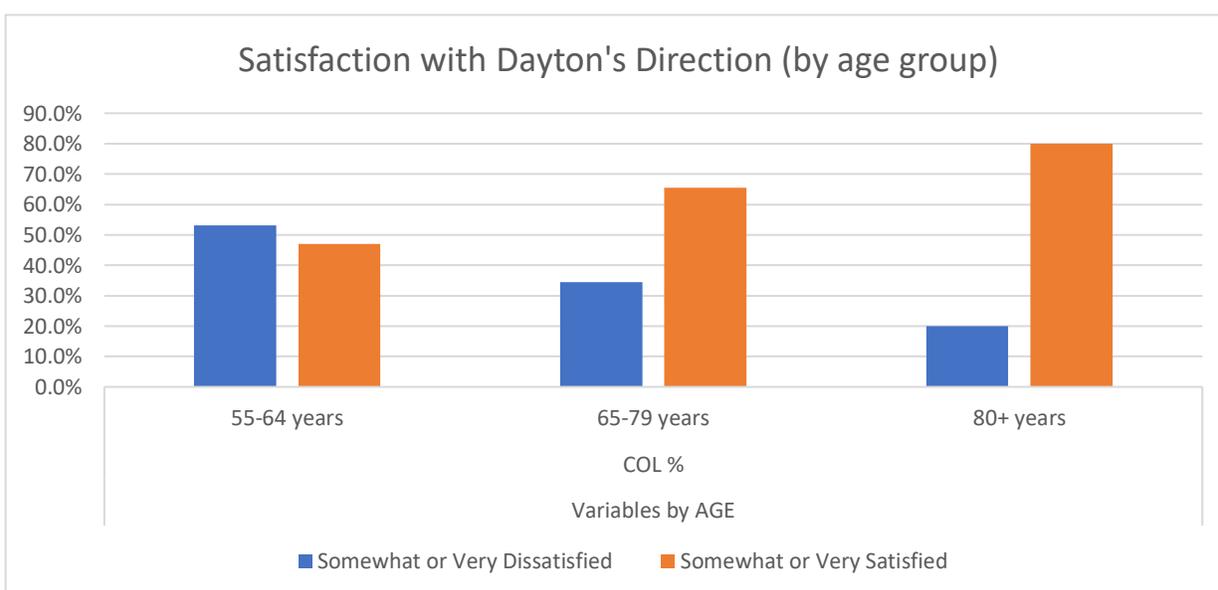
There is no true consensus across all age groups or within age groups about the “extent [to which respondents] are satisfied with the direction that Dayton is headed.” While nearly half of all respondents are *somewhat* or *very* **satisfied**, 40% are *somewhat* or *very* **dissatisfied**, and 1 out of 9 are not sure (Table 4.3 A). Grouping respondents more simply into two indices (satisfaction/dissatisfaction) reveals that **those 55-64 are more likely dissatisfied** to some extent than are older residents of Dayton regarding this question (Table 4.3 B; graph below).

Table 4.3 A. Respondent satisfaction with “direction of Dayton”

	55-64 years	65-79 years	80+ years	Total ALL %
VERY DISSATISFIED	7.5%	8.6%	0.0%	16.1%
SOMEWHAT DISSATISFIED	20.4%	2.2%	1.1%	23.7%
VERY SATISFIED	4.3%	6.5%	0.0%	10.8%
SOMEWHAT SATISFIED	20.4%	14.0%	4.3%	38.7%
I AM NOT SURE	2.2%	7.5%	1.1%	10.8%
	54.8%	38.7%	6.5%	100.0%

Table 4.3 B. [Simplified] Respondent satisfaction with “direction of Dayton”

	55-64 years	65-79 years	80+ years
Somewhat or Very <b>DISSATISFIED</b>	53.1%	34.5%	20.0%
Somewhat or Very <b>SATISFIED</b>	46.9%	65.5%	80.0%
	100.0%	100.0%	100.0%



Another interesting correlation that might be observed with further analysis is one's satisfaction with Dayton services/availability and their plan to retire in Dayton. It is suggested in the literature that satisfaction with services (and their availability) and retirement plans are indeed related. In a study of North Dakota seniors, a correlation shows that as satisfaction with local services increases, so too does the likelihood of a decision to retire in that community. Of course, while this may be expected, it was not the case that a North Dakota senior's age, employment, race or how many years they lived there have much of a relationship with their level of satisfaction.

In a similar study, a person's opinion of whether they are safe or have protective measures in place from burglary and robbery (and other threats to safety) was correlated with one's likeliness to be satisfied. Further studies should explore the correlation with one's consideration for safety with a person's willingness to recommend Dayton to older adults.

The term "needs assessment" implies for many an invitation to list missing parts and create wish lists. Our methods attempted to elicit discussion about needs and to detect patterns and underlying information that might provide further description. We also tried to balance the identification of needs and problems with the generation of community assets and solutions.

Determining the extent to which one is "satisfied" with Dayton is a lofty goal. While we may observe *dissatisfaction* in one area, we might note the same group of respondents planning to stay and invite others to do the same. The new tag line for Dayton, "Live the difference" points to a beautiful complexity of its residents. Long-time residents remember more farmland but wouldn't mind more shopping options. They love the ruralness and being close to larger cities. Current homeowners are concerned about affordable housing. One might dislike the traffic, but drive themselves, and recommend transit options for others.

Exploring these apparent contradictions is an important process in fleshing out the initial findings conveniently illustrated by numbers and graphs. Further analysis is always among the researcher's first recommendations. For now, however, we have summarized what we found and humbly offer our insights and recommendations.

### **Limitations of these data**

All in all, the needs assessment has generated a large amount of statistical and narrative, quantitative and qualitative data. However, no survey can perfectly capture a community and focus groups, while rich with context, cannot reach or include everyone. Efforts were made in earnest to collect data from certain segments of the community, namely aging Latino/Hispanic adults, seniors with relatively lower income, and residents from SW (and to some extent SE) Dayton. Continued activities and programs that engage elder residents of Dayton, however, can build upon these efforts and especially those community-minded champions sprinkled around town.

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### ***5.2 Specific recommendations***

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**Make a Plan** – Governmental and civic leaders should be intentional about building and implementing a realizable plan that addresses the community design needs of seniors currently living in Dayton and to entice current and future residents to age in place here. These needs include an increase of housing stock suitable for aging individuals, but also the development and integration of community resources, services, and amenities that bring comfort and convenience, but also improve the health and wellness of an aging community. Dayton’s city administrators and planners, with support from the Council, should capitalize on its current ability to conduct long-term planning through meaningful community involvement processes to implement a plan for an “elder-friendly” community through zoning, partnering with developers, and motivating community boosters.

**Create Opportunities for Seniors to Voice Their Opinions and Assist with Community Planning** – If nothing else, focus group participants demonstrated a keen historical perspective and offered a strong and articulate voice in defining what seniors need and want. Strategies to engage seniors as partners in development planning would assure that their views are heard and would act to build champions across the community to support change efforts.

**Development of Senior Transportation** – There was strong emphasis by focus group participants to address the need for assuring transportation resources are available for people. Although many reflected on the need for more “neighborhood shopping” and a preference for a “downtown” or “village concept” development focus, they were also aware of the current challenges of Dayton’s large expanse and current configuration of businesses and new housing. The development of a centralized area of senior housing replete with a dense business zone raises incredibly complex issues, but ironically would be a long-term plan that lessens the need for people to have to have high cost transportation services.

**Neighborhood Shopping** – Focus groups were clear that Dayton 1) does not have enough variety of shopping and virtually none for purchasing groceries; 2) relies upon surrounding towns to provide shopping areas and complexes for its citizens; and 3) that widespread housing development seems to indicate that any future shopping area will be to the fringes of town making it less accessible; but also that 3) it is difficult to provide a clear recommendation that maintains Dayton’s “small town feel,” or neighborhood shopping that makes sense.

**Enhancing Safety** – Although focus groups lifted up safety as a strength of our community, the need for continued diligence to increase safety of citizens was very clear in their priorities. They did mention the need to look at neighborhoods where safety is a concern but provided no direct recommendations for what to do to build a more safe community.

**Further measurement and gaps analysis**— After a final analysis there may be several unmet needs that present a point of departure for the city of Dayton to engage in a more formal *gaps analysis*. The unmet needs create both an opportunity to develop the Dayton community as an attractive place for seniors over the next 10-20 years and a threat to the community if not addressed in the near future.

Moreover, the findings reflect a shift among traditionally regarded senior needs, perhaps related to technological and medical advances. Economic factors may also influence the presence of multi-generational housing and the desire (and ability) to age

*in place*. Respondents in this study appear to be articulate about their current and future needs, and what the city can do to stay ahead of the demand curve.

Dayton (perhaps with surrounding communities) should invest in the creation of a reliable measure of satisfaction that indexes the availability of each of the categories of Dayton services. Each of the service areas studied can be included in the new variable measuring overall satisfaction, which can then be used to explore the factors that correlate with general feelings of satisfaction and, later, as a predictor (independent variable) to examine what goes into a person's willingness to recommend Dayton to older adults, stay in Dayton through retirement, and more fully participate in Dayton's economic and social infrastructures.

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### **5.3 Conclusion**

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Using the data obtained in the community survey and focus group discussions identified (to a certain degree) aspirational community standards for seniors in Dayton.

Amid the top of the list of concerns for city staff and leaders going forward include the availability of quality, affordable, and single-floor senior housing. Related to affordable housing is the expressed desire for a configuration of “senior, independent living” housing that places individual homes, apartment units, or condos proximal to each other with services and amenities nearby. Accessibility to adequate assisted living and nursing home facilities may be an issue, but surrounding cities appear to presently address this need.

In both the survey and focus group data, the need to address the lack of a public transportation system was emphasized, if only to provide affordable and reliable intra-city transportation (such as trips to common medical facilities or shopping centers). The consideration for or development of some level of public transportation infrastructure might especially benefit seniors of varied socioeconomic status. Related to these transportation concerns was the issue of traffic, in that respondents expressed high levels of dissatisfaction with the amount of traffic delays during ongoing construction periods, the increased traffic driven by housing development and a growing population, and finally the need for traffic controls to limit speeding on rural and residential roads.

Having more reliable measures, and regular engagement, periodic assessments, and follow-up communication with Dayton seniors can help determine the extent to which the City is “heading in the right direction” for this community and all of Dayton’s residents. Knowing what correlates with one’s overall satisfaction with Dayton is an important factor in making Dayton a destination community for seniors or one in which they can age in place.

## REFERENCES

- Alley, D., Liebig, P., Pynoos, J., Banerjee, T., & Choi, I. (2007). Creating elder-friendly communities: Preparation for an aging society. *Journal of Gerontological Social Work*, 49(1/2), 1-18.
- American Community Survey (2013-2017, 2017). Retrieved from <https://stats.metc.state.mn.us> on 15 November 2018.
- Bedney, B., Goldberg, R., & Josephson, K. (2010). Aging in place in naturally occurring retirement communities: Transforming aging through supportive service programs. *Journal of Housing for the Elderly*, 24, 304-321.
- Bookman, A. (2008). Innovative models of aging in place: Transforming our communities for an aging population. *Community, Work & Family*, 11(4), 419-438.
- Cantor, M. (1989). Family and community support systems. *Annals of the American Academy of Political and Social Sciences*, *The Quality of Aging: Strategies for Interventions*, 503, 99-112.
- Cutler, N. (2011). The fear and the preference: Financial planning for aging in place. *Journal of Financial Services Professionals*, 23-26.
- Feldman, P., & Oberlink, M. (2003). The AdvantAge initiative: Developing community indicators to promote the health and well-being of older people. *Fam Community Health*, 26(4), 268-274.
- Kennedy, C. (2010). The city of 2050- An age-friendly, vibrant, intergenerational community. *Journal of American Society on Aging*, 34(3), 70-75.
- Kristel, O., Snyder, K., & Scott, A. (2006). Report to the city of Upper Arlington: Results of the 2005 older adults needs assessment. Columbus, OH: The Strategy Team, Inc.
- McDonough, K., & Davitt, J. (2011). It takes a village: community practice, social work, and aging-in-place. *Journal of Gerontological Social Work*, 54, 528-541.

- Metropolitan Council (2018). Retrieved from <https://metro council.org> on 15 November 2018.
- Minnesota Department of Economic Development (2018). Retrieved from <http://mn.gov> on 1 October 2018.
- Nelms, L., Johnson, V., Teshuva, K., Foreman, P., & Stanley, J. (2009). Social and health factors affecting community service use by vulnerable older people. *Australian Social Work*, 507-524.
- Ristau, S. (2011). People do need people: Social interaction boosts brain health in older age. *Journal of the American Society of Aging*, 35(2), 70-76.
- Sierakowska, M., Doroszkiewicz, H., Markowska, A., Lewko, J., and Krajewska-Kulak, E. (2014). Factors determining satisfaction of elderly people's caregivers with the home care they provide. *Progress in Health Sciences*, 4(2), 82-87.
- Tang, F., & Pickard, J. (2008). Aging in place or relocation: perceived awareness of community-based long-term care and services. *Journal of Housing for the Elderly*, 22(4), 404-422.
- US Census Bureau (2016-2018). Retrieved from <https://census.gov> on 1 October 2018, 15 November 2018, and 2 December 2018.

## APPENDIX

### Appendix A –Survey Instrument



## OLDER ADULT & SENIOR NEEDS 2018 SURVEY

### Welcome! We hope you will participate in this survey.

The City of Dayton wants to better understand the current and future needs of Dayton residents who are 55 or older.

The findings will be shared with the City Council and community leaders. The information will help improve services and activities for your community and identify which needs are currently unmet.

Participation is voluntary. We are not requesting your name; thus, your responses will be confidential. The survey should take 10-15 minutes to complete.

## THANK YOU!!

### RETURNING THE SURVEY:

1. Seal inside envelope.
2. Mail it back to City Hall.

OR

- Drop it off at City Hall.
- Drop off in event box.
- Give to event staff.
- Call [City Hall?]

### 1. Would you like to take this survey?

- YES, I will continue with survey.  NO, I will not take the survey.

### 2. How old are you?

- Under age 55
- Between 55 & 64 years of age
- Between 65 & 79 years of age
- 80 plus years of age

IF YES (TO 55 OR OLDER),  
**SKIP** TO QUESTION #4.

### 3. Do you have a close friend or family member who lives in Dayton, MN, and is aged 55 or older?

- Yes  No  I don't know

If "YES"

If "NO" or "I DON'T KNOW."

### Thank you for your help with this survey!

You have indicated that you are willing to help your close friend or family member (55 or older) who lives in Dayton.

**Please answer the following questions regarding your friend or family member.**

Use your best judgment to respond from this person's perspective.

This survey is for residents of Dayton who are 55 or older.

**Please return this survey**

OR

Give this survey to a Dayton resident who is 55 or older.

**Thank you!**

Concerns about this survey?

Contact Tina Goodroad, City Administrator, at: (763) 421-3487 or [tgoodroad@cityofdaytonmn.com](mailto:tgoodroad@cityofdaytonmn.com).

## Section 1. You and the City of Dayton

1. How long have you lived in Dayton, MN?

- Less than 5 years
- Between 5 and 10 years
- Over 10, but less than 20 years
- 20 years or more

IF "20 YEARS OR MORE"

4a. Have you lived in Dayton all your life?

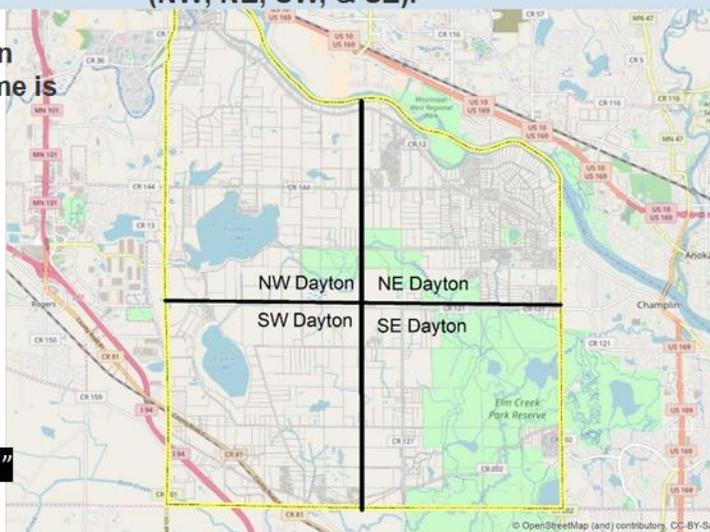
- Yes
- No, but almost!
- No, just more than 20 years

Here is a map of Dayton that roughly divides the town into 4 basic sections: (NW, NE, SW, & SE).

2. Please identify which part of Dayton that best describes where your home is located.

- I live in Zone 1, NW Dayton
- I live in Zone 2, NE Dayton
- I live in Zone 3, SW Dayton
- I live in Zone 4, SE Dayton
- I choose not to answer
- I do not have a home in Dayton

If "No home in Dayton,"



5a. Are you completing this survey for a Dayton resident?

- Yes. Continue with survey.
- No. If "NO," Please return this survey, OR Give this survey to a Dayton resident.

3. What is your current living situation? Do you live:

- With a spouse or partner
- With a professional caregiver
- Alone
- With adult children
- With another adult (not spouse or partner)
- Other

4. Do you provide caregiving for an older or disabled adult?

- No
- Yes, a spouse or partner
- Yes, an adult child
- Yes, another adult (not spouse or partner)
- Yes, another situation.

5. Which of the following describes your housing situation?

- House or condo that you own
- Rent a house, apartment, or condo
- Trailer site
- Homeless
- Other (Please explain.)

## Section 2. Safety and Comfort

Please state how much you agree or disagree with the following statements.

	STRONGLY DISAGREE	SOMEWHAT DISAGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT AGREE	STRONGLY AGREE
9. I would recommend living in the City of Dayton to older adults.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I will remain in Dayton throughout my retirement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I feel protected--safe from robbery or burglary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I feel safe from frauds, identify theft, or other scams.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I feel safe from physical and emotional abuse.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Most of the services and activities I need are close to where I live.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. In general, <i>how safe</i> do you feel where you live?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Section 3. Identifying Needs

Below is a list of various services for older adults (55+) that are available in some communities in Minnesota. These may be needs that YOU have now--or might sometime in the future.

<b>16. PLEASE INDICATE WHETHER EACH ITEM IS (OR WILL BE) A MAJOR OR MINOR NEED FOR YOU OR NOT AT ALL.</b>	<b>MAJOR NEED FOR ME</b>	<b>MINOR NEED FOR ME</b>	<b>NOT A NEED FOR ME</b>	<b>NOT SURE</b>
a) Access to a healthcare specialist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Affordable housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Assisted living or nursing home facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Employment counseling or training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Help with the cost of health insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Help with the cost of prescriptions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Help or counseling with financial matters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Home-delivered meals or lunch program for Seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Help with home maintenance (e.g., roofing, painting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Home care services (e.g., cleaning, shopping)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Legal assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Nutrition/food information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m) Recreation activities or fitness center	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n) Senior (independent living) housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o) Telephone helpline for info or referrals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p) Transportation for medical needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q) Transportation for shopping or recreation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Nutrition/food information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m) Recreation activities or fitness center	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n) Other (please specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. If you needed help finding one of these services in the question above, where would you turn for information? Check all that apply.

<input type="radio"/> Friends and family	<input type="radio"/> Health care providers	<input type="radio"/> Newspaper
<input type="radio"/> Community organizations	<input type="radio"/> City of Dayton website	<input type="radio"/> Internet search
<input type="radio"/> Calling City of Dayton	<input type="radio"/> I don't know or wouldn't look for information	
<input type="radio"/> Other (please list)	_____	

## Section 4. Dayton Activity Center

The Dayton Activity Center has also been known as the "Senior Citizen Center."

It is located at 18461 Dayton Street in NW Dayton, adjacent to the city's Firehouse #1.



17. In the past year, how many times have you been to the Dayton Activity Center?

- 0 times
- 1-2 times
- 3-5 times
- More than 5 times

**At least once in past year?  
Continue to Question 19.**

*We're curious if you would visit this Center more often if there were new and/or different services or activities.*

**18a. Have you ever been to the Dayton Activity Center?**

Yes       No       Maybe  
 I don't know or can't remember.

*You indicated that you have not been here in the past year.*

**18b. Which of the following reasons apply to you?**

- I did not know that such a place existed.
- I did not know location of Dayton Activity Center.
- I don't have transportation to get to the place.
- I have no interest in going to such a place.
- Other reason: \_\_\_\_\_

**(CONTINUE TO QUESTION 19)**

**19. Please tell us your likelihood of visiting the Dayton Activity Center if any of the following items were there.**

	WOULD LIKELY INCREASE MY USE	WOULD LIKELY NOT INCREASE MY USE	NOT SURE
a) Have more and different kinds of social activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Free or low-cost meals were provided	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Upgraded kitchen facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Wi-Fi was free and accessible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Hired employee to plan events for older adults and seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Free or low-cost classes or skill-building workshops	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) "Healthy" activities like exercise, yoga, or meditation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Flea market, holiday or craft fair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Other ideas (please list)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Section 5. About You

These next questions might seem personal, but they will help the City of Dayton better understand what is needed and by what groups of people. This survey is confidential—and we don't ask for your name.

**The choice to answer any of these questions is up to you.**

20. How many hours a week do you work (for pay)?

<input type="radio"/> 1-10 hours a week	<input type="radio"/> 11-25 hours a week
<input type="radio"/> 26-40 hours a week	<input type="radio"/> More than 40 hours a week
<input type="radio"/> Not currently employed (for pay)	<input type="radio"/> Choose not to answer

21. How many hours a month do you volunteer or provide service work that is unpaid?

<input type="radio"/> 1-3 hours a month	<input type="radio"/> 11-20 hours a month	<input type="radio"/> Choose not to answer
<input type="radio"/> 4-10 hours a month	<input type="radio"/> More than 20 hours a month	
<input type="radio"/> I don't know.	<input type="radio"/> I don't volunteer.	

22. Are you Hispanic, Latino, or of Spanish origin?

<input type="radio"/> No, not of Hispanic, Latino, or of Spanish Origin	<input type="radio"/> Yes, Puerto Rican
<input type="radio"/> Yes, Mexican, Mexican-American, or Chicano	<input type="radio"/> Yes, Cuban
<input type="radio"/> Yes, another Hispanic, Latino, or Spanish origin	<input type="radio"/> I don't know
	<input type="radio"/> Choose not to answer

23. How would you identify your race? (Choose all that apply.)

<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Asian
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Some other race
<input type="checkbox"/> I don't know	<input type="checkbox"/> Choose not to answer

24. How do you describe your gender?

<input type="radio"/> Male	<input type="radio"/> Female	<input type="radio"/> Choose not to answer	<input type="radio"/> Other:
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25. How well do you understand written English?

<input type="radio"/> Very well	<input type="radio"/> Well	<input type="radio"/> Not well	<input type="radio"/> Not at all	<input type="radio"/> Choose not to answer
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26. How well do you speak English?

<input type="radio"/> Very well	<input type="radio"/> Well	<input type="radio"/> Not well	<input type="radio"/> Not at all	<input type="radio"/> Choose not to answer
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27. To what extent are you satisfied with the direction that the City of Dayton is headed?

<input type="radio"/> Very dissatisfied	<input type="radio"/> Somewhat dissatisfied	<input type="radio"/> Somewhat satisfied	<input type="radio"/> Very satisfied	<input type="radio"/> I am not sure
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28. What is the most beneficial improvement that the City of Dayton could make to improve the lives of seniors over the next 5-10 years?

29. Is there anything else you would like to add about the needs of older adults and seniors in Dayton?

**THANK YOU FOR YOUR TIME AND CONSIDERATION!**

**BE SURE TO RETURN THE SURVEY!**

## Appendix B – Focus Group Protocol

### (Focus Group Protocol): About the Study

The purpose of this study, *Older Adult & Senior Needs Assessment (City of Dayton)*, is to support the City of Dayton's (MN) effort to better assess, plan for, and meet the needs of its residents aged 55 or older.

Interviews will be conducted of individuals meeting this demographic criterion in individual and small group settings. Interviews include questions about respondents' housing, transportation, and social activities in which they might participate.

All responses during interviews will be **confidential**; this means identities will not be linked with comments, nor will names appear in published reports. However, permission will be necessary to record the interview, so that information conveyed can be accurately transcribed.

Participation in the study is voluntary. A signed, written consent to participate in this study will be obtained from each participant (who will also receive a copy). Respondents may end the interview or withdraw from the study at any time without consequence.

This study and the protocol used for data collection meets the standards of the IRB of the University of Minnesota.

**(Focus Group Protocol): Agreement to Participate in Research**

**Principal Investigator:** Mike Greco, Director, Resilient Communities Project

**Responsible Investigator:** Doug Moon, PhD Candidate, University of Minnesota, OLPD

**Title of Protocol:** Interview for Dayton Senior Needs Assessment

1. You have been asked to participate in a needs assessment to learn about the needs of seniors (55+) living in the city of Dayton, MN.
2. If you agree to participate, you will be asked to complete a 60-minute face-to-face, tape-recorded interview (individual or group) between **1 July and 31 August 2018**. The investigator will provide all forms and materials needed for completion of this study. You are also being asked for your permission to digitally audiotape this interview. Having access to audio notes gives me the opportunity to accurately record and transcribe what is being said in the interview. My notes, whether written or audiotaped, will never be shared with anyone. However, **if you wish not to be recorded** (or have *only* certain segments of the interview recorded), only handwritten notes will be taken.
3. This study involves minimal risk and discomfort. The probability of harm and discomfort will not be greater than your daily life encounters—especially in a professional setting. However unlikely, risks may include emotional discomfort from thinking about or responding to interview questions.
4. You will not necessarily directly benefit from participating in this study. Indirect benefits will include contributing to the City of Dayton’s capacity to plan for the needs of senior residents of the community.
6. Although the findings of this study may be published, no information that can identify you will be included.
7. Questions concerning this research may be addressed to Doug Moon, at [moonx219@umn.edu](mailto:moonx219@umn.edu) or (651) 330-6078. Concerns or complaints about this research may be presented to Mike Greco, Director of the Resilient Communities Project at the University of Minnesota’s Center for Urban and Regional Affairs, [mgreco@umn.edu](mailto:mgreco@umn.edu) or (612) 625-7501.
8. No service of any kind, to which you are otherwise entitled, will be lost or jeopardized if you choose not to participate in the study.
9. Your consent is being given voluntarily. You may refuse to participate in the entire study or any part of the study. If you choose to participate in the study, you are free to withdraw at any time without any negative effect on your relations with the University of Minnesota, the City of Dayton, or any other participating individuals, institutions, or agencies.
10. At the time that you sign this consent form, you will receive a copy of it for your records, signed and dated by the student investigator.

\_\_\_\_\_  
Interviewee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Investigator’s Signature

\_\_\_\_\_  
Date

**(Focus Group Protocol): Interview Protocol Script***Script*

Thank you for participating in this interview today. As you know, my name is Doug Moon, and I am a graduate student at the University of Minnesota working on a project here for the City of Dayton. I estimate that the interview will take about 30 minutes.

The interview focuses on Dayton's senior residents (aged 55+). I will ask questions about your needs and perspectives regarding housing, social activities, transportation, and access to services in Dayton. I want you to be comfortable sharing your candid insights and experiences.

Your responses are confidential; this means your name or identity will **not** appear in any report about this project. You may discontinue the interview at any time; feel free to let me know if you need a break. I would like your permission to record this interview, so I may accurately document the information you convey.

***Stop. Ask participant for permission. Ask for permission again while recording.***

A reminder of your written consent to participate in this study. I am the responsible investigator for this needs assessment titled: *City of Dayton Senior Needs Assessment*. You and I have both signed and dated each copy, indicating our agreement to continue this interview. You will receive one copy and I will keep the other and secure it, separate from your reported responses. Thank you again for taking part.

Do you have any questions or concerns before we begin?

***Start interview.***

---

## **(Focus Group Protocol): Interview Questions**

### **Part I. Demographic questions**

1. How long have folks lived in the City of Dayton?
2. In broad terms, what would you say you like best about living here in Dayton?
3. Have you lived elsewhere? If so, where? What did you enjoy about that place that you feel is lacking in Dayton?

### **Part II. Transportation**

1. [*Think of a typical week.*] Where do you go? How do you get there?
2. Are there any issues or barriers that keep you from getting from point a to point b?
3. Describe your travel needs within Dayton and going outside of Dayton?

### **Part III. Housing**

1. In our survey, most older adults owned their own house or condo. Yet, many suggested that affordable housing was an issue. How would you explain this?
2. Have you considered living in a “seniors only” type housing (independent living community, assisted living)? Why or why not?
3. What are barriers to your moving to such a facility (geographic, cost, etc.)?
4. Have you considered moving from Dayton? Why or why not?

### **Part IV. Medical/Health**

1. In our survey, many said that “access to a healthcare specialist” was a relatively significant issue. Would you agree with that? Why or why not?
2. Are there issues with health insurance that concern you?

### **Part V. Social events**

1. What social events/activities *are you a part of* or *do you go to* in Dayton?
2. Do you use the parks or trails in Dayton?
3. Are there other types of recreation or fitness activities that you wish were available?
4. Do you know there is an activity center specifically for seniors in the City of Dayton?
  - a. *If so, have you used it (been there) in the last few months or so [since “Easter” or “in the Spring or Summer of this year”]?*
  - b. *Why do/don’t you use the activity center?*
  - c. *What kinds of activities/events would you like to see there (and would you attend)?*
5. [*Explore lacking social events, group types, how City might be helpful.*]

### **Part VI. Wrapping up**

1. [*We’ve discussed housing, transportation, and opportunities for meeting with others and being involved.*] Thinking about living here in Dayton, are there other needs that come to mind now that you feel are not being met, either for you or for your friends of similar age?
  2. Do you have any questions about this interview—or is there anything else you would like me to know about the City of Dayton or your friends who are 55 or older?
-