



**Multnomah County Aging, Disability,  
and Veterans Services Division  
2017-2020 Area Plan  
Planning & Development**

MCADVSD, Rebecca Miller, January 2016

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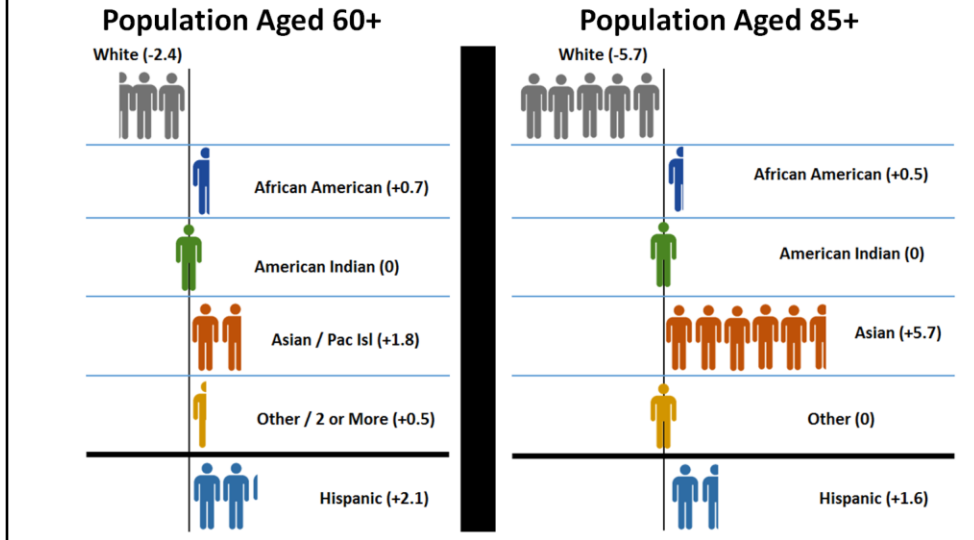
## Area Agency on Aging Core Services

- Information & Assistance (ADRC)
- Access to Public Benefits (SNAP, Medicaid)
- Medicare Counseling
- Case Management & Options Counseling
- Transportation & Coordination
- Nutrition Services (congregate & home-delivered meals)
- Health Promotion & Disease Prevention
- Family Caregiver Support
- Legal Services
- Elder Abuse Prevention

## Five District Senior Centers Eight Enhancing Equity Partners

- N/NE– Hollywood Senior Center (Urban League)
- East– YWCA/Impact NW
- Mid – IRCO
- Southeast– Impact NW
- West – Neighborhood House (Elm Court & Friendly House)
- Urban League of Portland (NE Multicultural SC)
- African American Health Coalition (Charles Jordan & Dishman)
- Asian Health & Service Center
- El Programa Hispano Católico
- NAYA Family Center
- SAGE Metro Portland/Friendly House

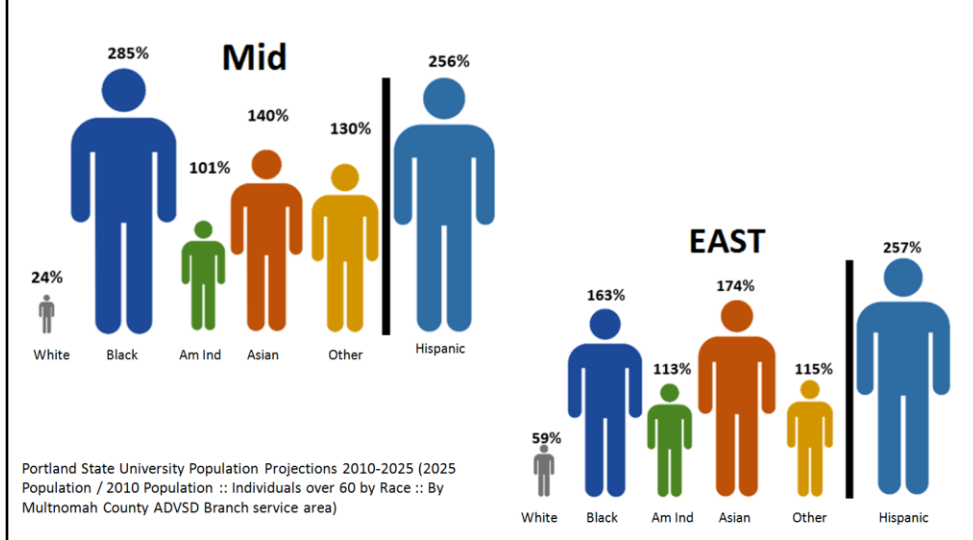
# Changes aging population (2010-2025) Percent of total population



Portland State University Population Projections 2010-2025 (2025 Population / 2010 Population :: Individuals over 60 by Race (Left) :: Individuals over 85 by Race (Right) :: Change in relative racial composition of Multnomah County Population

The above graphic highlights the projected change of racial and ethnic composition in Multnomah County from 2010 to 2025, and the growing racial diversity of our aging population.

## 60+ Population Change By Region (Large Movers)



### MID:

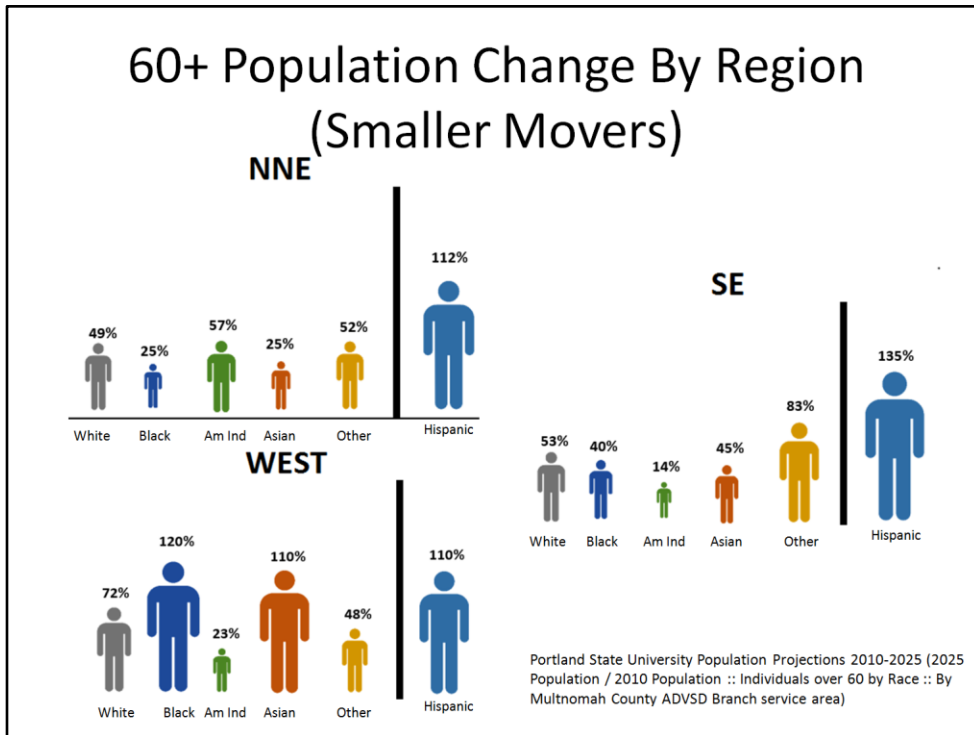
The above graphic represents the estimated population increase by race and ethnicity from 2010 to 2025. The size of the person graphic represents the relative changes between these groups (approx.). Hispanic is separated by a dividing line to bring awareness to the observer that they represent different population figures.

This figure highlights the growing population of Hispanic, African-American, and other non-white populations into the MID service area

### EAST:

The above graphic represents the estimated population increase by race and ethnicity from 2010 to 2025. The size of the person graphic represents the relative changes between these groups (approx.). Hispanic is separated by a dividing line to bring awareness to the observer that they represent different population figures.

This figure highlights the growing population of Hispanic, Asian, African-American, and other non-white populations into the EAST service area



**NNE:**

The above graphic represents the estimated population increase by race and ethnicity from 2010 to 2025. The size of the person graphic represents the relative changes between these groups (approx.). Hispanic is separated by a dividing line to bring awareness to the observer that they represent different population figures.

This figure highlights the growing population of Hispanic persons to the NNE Service area, it also shows a more equally distributed population growth projection (race) than our other branches.

**WEST:**

The above graphic represents the estimated population increase by race and ethnicity from 2010 to 2025. The size of the person graphic represents the relative changes between these groups (approx.). Hispanic is separated by a dividing line to bring awareness to the observer that they represent different population figures.

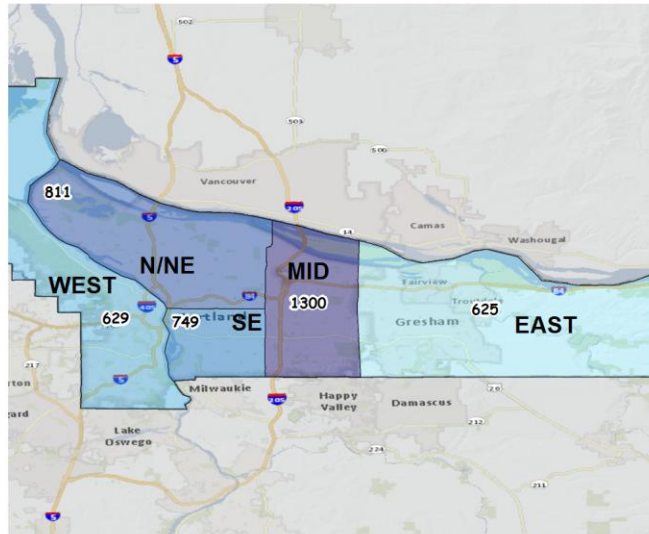
This figure highlights the growing population of Hispanic, Asian, African-American populations into the WEST service area

**SE:**

The above graphic represents the estimated population increase by race and ethnicity from 2010 to 2025. The size of the person graphic represents the relative changes between these groups (approx.). Hispanic is separated by a dividing line to bring awareness to the observer that they represent different population figures.

This figure highlights the growing population of Hispanic, and other non-recorded non-white populations into the SE service area

## # of Clients living within Service Area



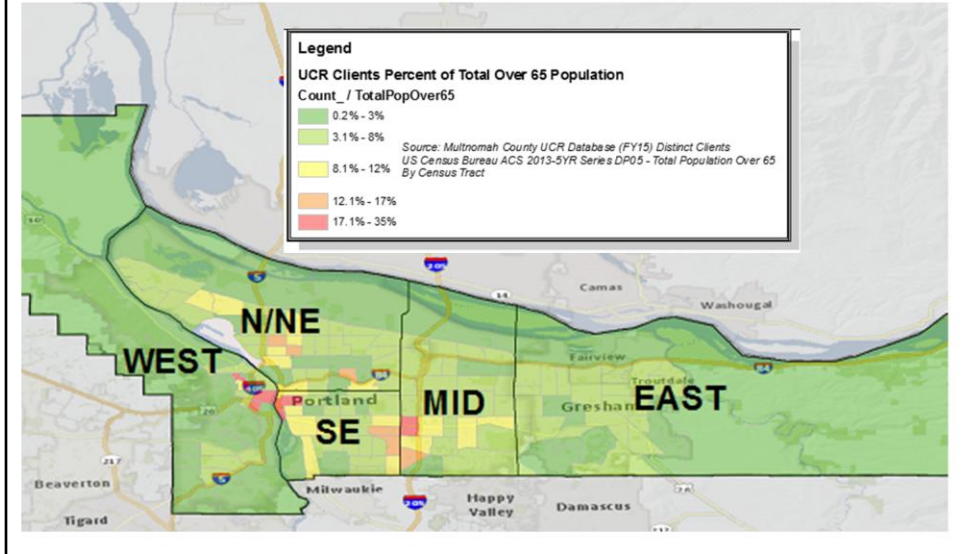
### Sources:

Distinct Multnomah County UCR Clients who accessed services July 1 2014 - June 30 2015 (FY15) - GeoAddress Matched Clients (93% of total) :: Multnomah County GIS Services District Area Map

### Description:

The above graphic shows the number of clients who used services within each designated district service area, based on their home address.

# Client Distribution Hot Spots

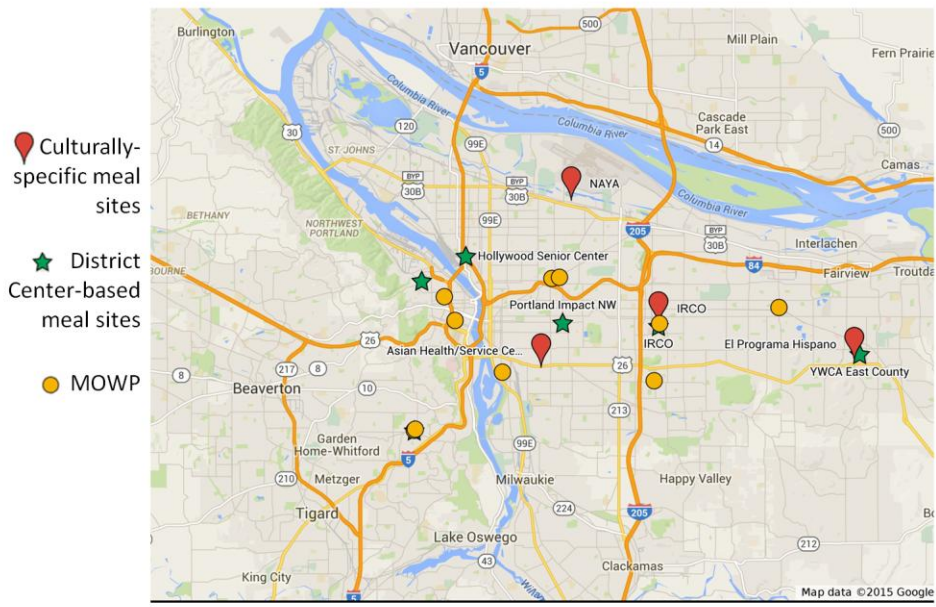


## Description:

This graphic shows the population density of our clients relative to the overall population of persons aged 65 and over in Multnomah County. You will note the high concentration between Mid and SE, as well as in the downtown area.



# Senior Nutrition Sites



# Food Program

15% of our 65+ population identifies themselves as Non-White or Hispanic  
**44% of our 65+ client population identifies themselves as Non-White or Hispanic**

**30% of our clients request non-english text**

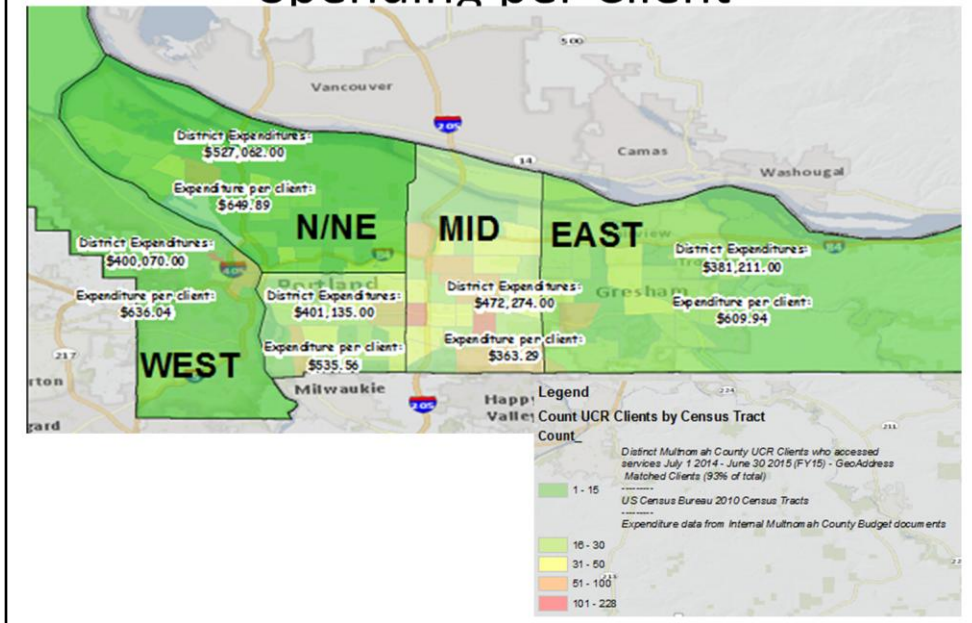
14% of our population is foreign born

**10.2% of allocation is to culturally specific meals.**

Source: UCR Database of distinct clients :: Bureau of Labor Statistics 2013 5-YR Estimates - DP05 Population Statistics By Census Tract :: Bureau of Labor Statistics 2013 5-YR Estimates - B05003 Nativity by Sex and Age By Census Tract

The above graphic identifies that our client population is more racially/ethnically diverse than that of the county as a whole, and highlights the relatively small allocation of culturally specific meals to client population who are more likely to prefer them.

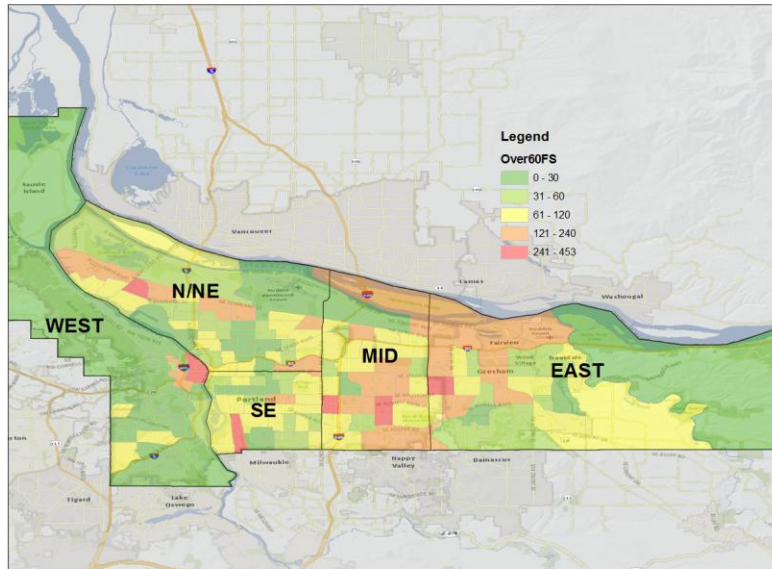
# Spending per Client



## Description:

The above graphic has two figures, the funds that were spend in for each district center, and that figure divided by the number of clients who live within that geographic area to get an expenditure per client measurement. These figures and heatmap are overlaid with the client distribution map.

# SNAP Distribution



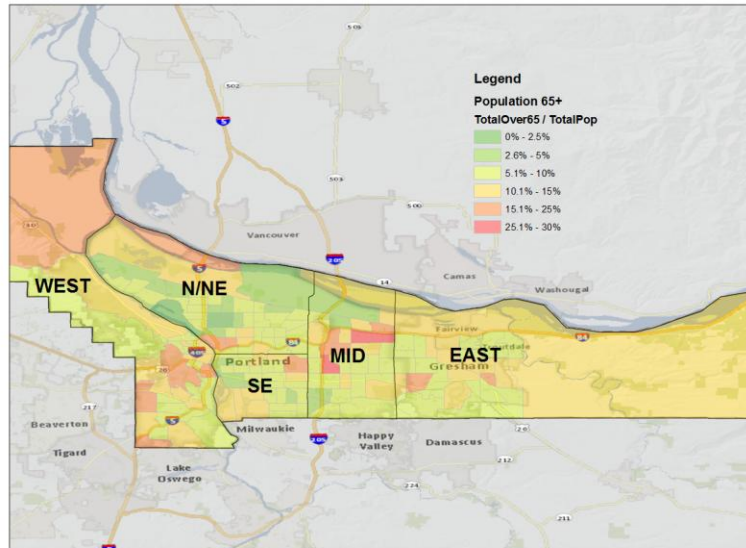
Source:

Census Bureau 2013 ACS 5YR B22001 - # of Households receiving Food Stamp Benefits by Census Tract - With at least one member of household over 60 Years of Age

Description:

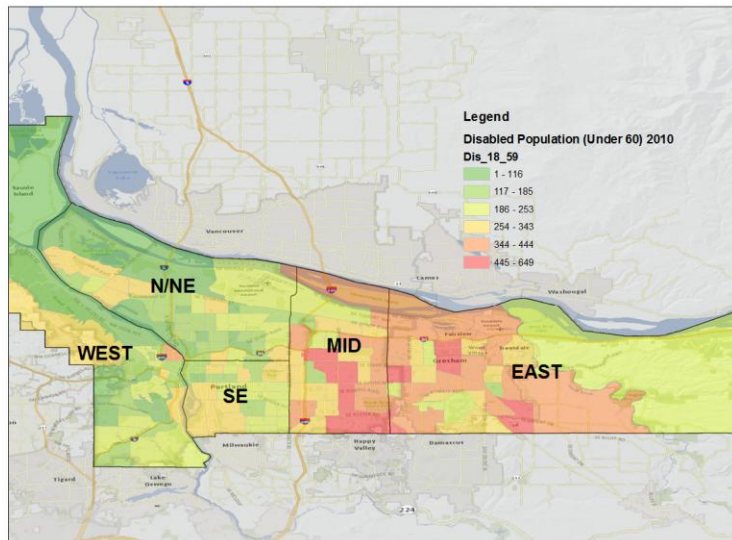
The above graphic shows the number of individuals per census tract area who receive SNAP benefits.

## Elderly Population (65+)



Source: Census Bureau ACS2013 5YR - B01001A-I - Population by Race and Ethnicity by Age and Sex --- DP05 Population Statistics

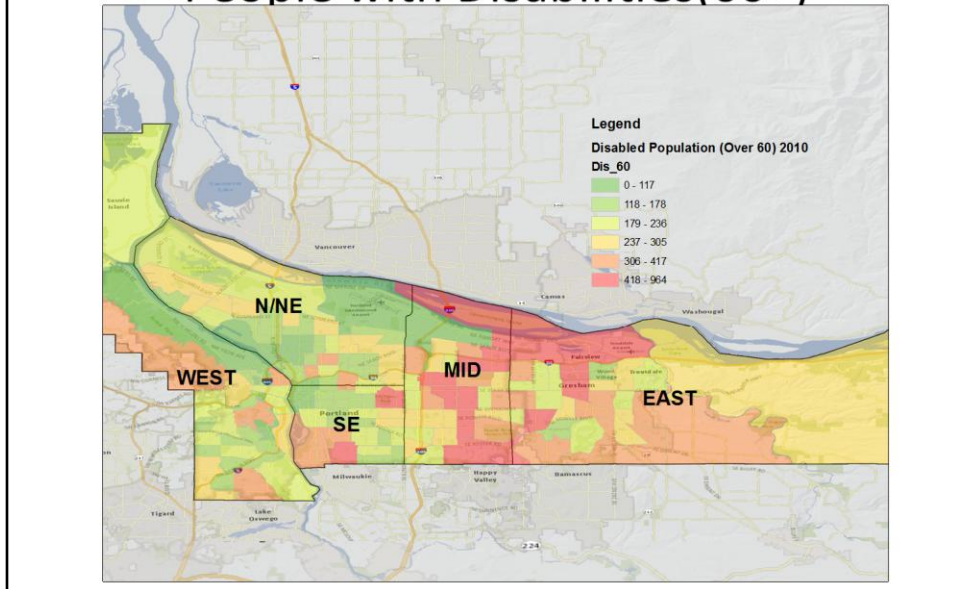
## People with Disabilities (18-59)



Source: PSU Population projection 2010

Description: The above graphic shows geographic hotspots by census tract for disabled persons between the ages of 18 and 59, analysis uses natural breaks to determine brackets.

## People with Disabilities(60+)



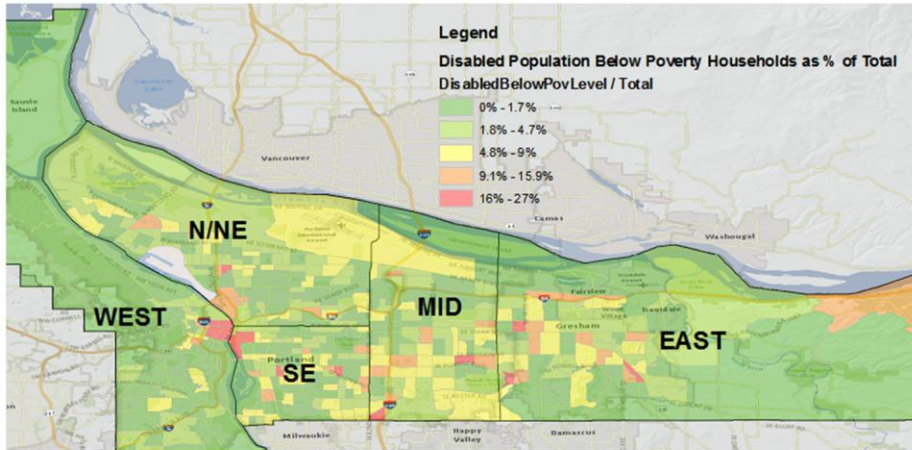
Source: PSU Population projection 2010

Description: The above graphic shows geographic hotspots by census tract for disabled persons over the age of 65, analysis uses natural breaks to determine brackets.



# Demographics

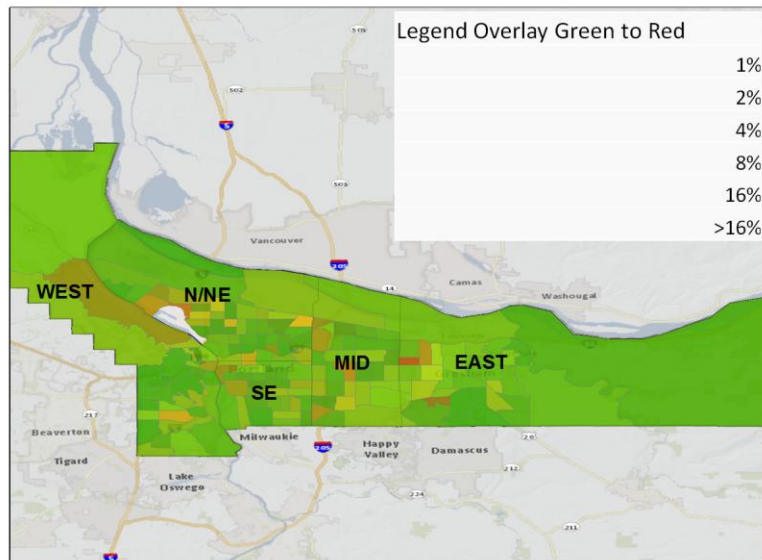
## Impoverished Disabled Population



Source: Census Bureau ACS2013 5YR – B23024 – Poverty Statistics by Disability Status by Census Block Group



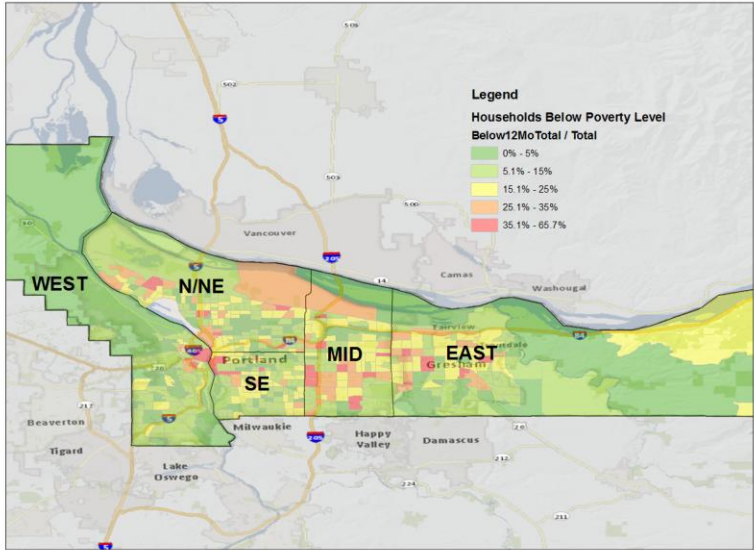
# Demographic Distribution All non-white overlay



Source: Census Bureau ACS2013 5YR - B01001A-I - Population by Race and Ethnicity by Age and Sex --- DP05 Population Statistics

# Economics

## % of Households below Poverty Level

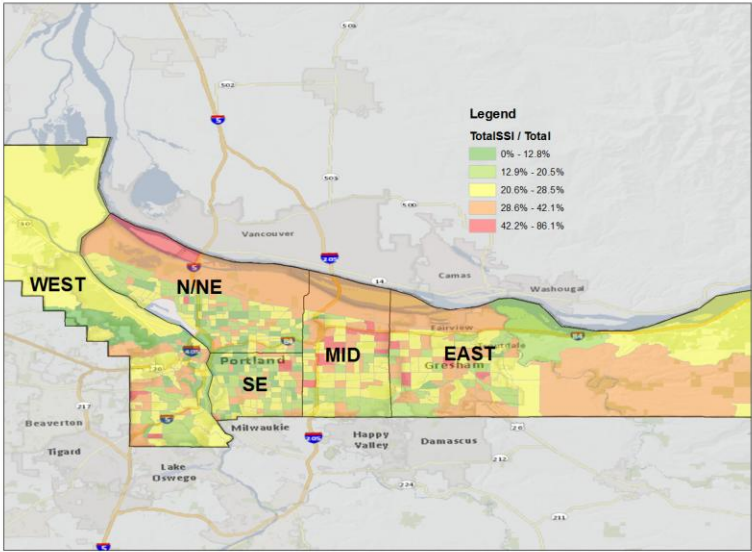


Census Bureau ACS13 5-yr, B17017

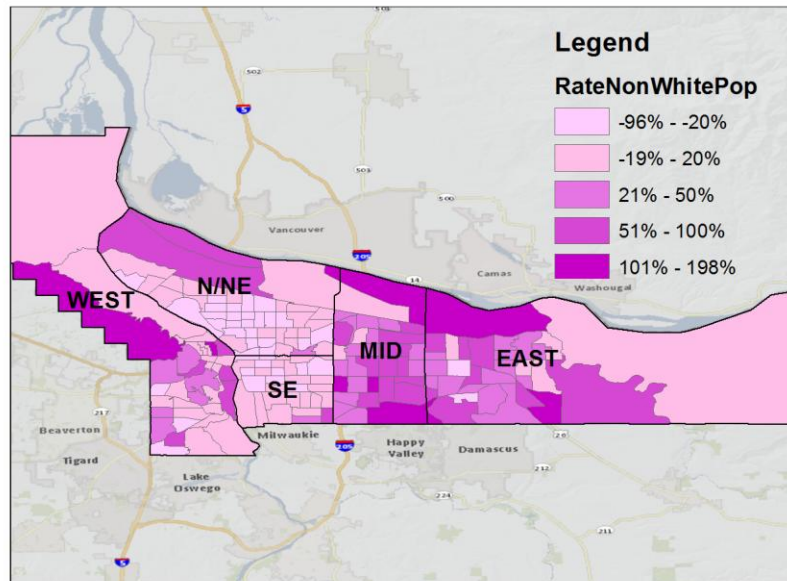
% of households below poverty level (Households below poverty level / total # of households)

# Economics

## % of Households receiving SSI



## 2000-2010 Migration (Non-White)



### Description:

The above graphic highlights the move east of that non-white population in the last 10 years.

The Percent Change in Populations of Color indicator shows the rate of change between 2000 and 2010 for the population identifying as anything except “white, non-Hispanic” by census tract.

This “populations of color” category was derived by subtracting the white, non-Hispanic population from the total population of each census tract.

The rate of change was then calculated by subtracting the 2000 populations of color from the 2010 populations of color and then dividing this number by the 2000 populations of color.

**Source: Coalition for a Livable Future - Regional Equity Atlas**

Let's take a moment . . .#1



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Question #1

# Discussion #1

Was this information useful? Can you think of additional information the community needs? Suggestions for ways to visually represent info? What does this data tell us about outreach?

## About the Area Plan

- Area Agency on Aging (AAA) requirement
- Comprehensive and coordinated service delivery system
- Online at Research & Evaluation – it's 110 pages!



## **Issue Areas**

- **Family Caregivers**
- **Information & Assistance (I&A) and Aging & Disability Resource Connection (ADRC)**
- **Elder Rights & Legal Assistance**
- **Health Promotion**
- **Older Native Americans**
- **Nutrition Services**
- **Additional – determined by community feedback**



## **2013-2016 Family Caregivers Goal**

**Family caregivers will be informed about and have access to resources that can assist them in caring for older adults.**

### Objectives

1. FCSP will sponsor three (3) public events yearly to provide information to family caregivers.
2. The FCSP Coordinator will meet six (6) times per year with community partners to promote I & A services provided by the ADRC Helpline.
3. District Center case managers and community agencies will provide a minimum of 3,500 hours of Options Counseling to family caregivers annually.



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# **The Planning Process (2013-2016)**

## **Information and data-gathering**

- **Consumer Satisfaction Survey**
- **ADRC – reports, unmet needs**
- **Open Houses, Listening Sessions**
- **Focus Area/Integration Workgroup**

## **Resources**

- **2014 (5-year estimate) - U.S. Census**
- **“Communities of Color in Multnomah County: An Unsettling Profile” – Population Specific**
- **PSU Population Projections**
- **Multnomah County Age-Friendly Action Plan & supporting documents**

## What's Next?

- **2013-2016 Data collection and research**
- **Jan-Feb: ADVSD staff draft goals, determine workgroup needs, “Tool for Collecting Community Feedback” finalized.**
- **Mar: Focus area statements & draft goals finalized. Public process schedule finalized. Materials developed for public event.**

## And Then . . .

- **Apr-Jun: Public process. Budget development. Drafting other areas of plan.**
- **Jun-Jul: Integrating community feedback into plan.**
- **Jul-Aug: Draft completed.**
- **Sep: Public hearings & approval by BCC & advisory councils.**
- **October 3: 2017-2020 Area Plan Due**

## **Relationship to RFP, Age-Friendly**

- **Goal of service equity embedded in Area Plan. RFP will reflect this goal.**
- **DC/EE/Nutrition contracts carry out objectives outlined in the Area Plan. RFP drafting begins in Jan 2017.**
- **Data gathered for Age-Friendly baseline assessment informs Area Plan & RFP.**
- **Age-Friendly Plan informed by goals identified in Area Plan.**
- **Annual updates to Area Plan and future RFPs involving identified Focus Areas necessarily inform and reflect one another.**

## Public Process

- **Listening Sessions/Open Houses**
  - Provide demographics for service area
  - Easy to read document outlining focus areas, draft goal statements
  - Interactive
- **Public Hearings (one required, goal of four)**
  - Mid, East, N/NE, Downtown

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Who have we left out? How do we reach them?

# Targeted Outreach

African American	LGBT	Latino/Hispanic
Asian American	Immigrant/Refugee	Houseless
Hearing/Vision Impaired	People with Disabilities	Family Caregivers
Resident Communities	Native American	Veterans

Gresham Fairview/Troutdale Mid county Downtown West North/NE

## Let's Think About It . . . #2



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Who have we left out? How might we conduct outreach?



## Discussion #2

Who have we left out? How might we conduct outreach? Possible host sites? Partners? What number of events or participants will feel like success?

# Open House Format



Goal: Reach 600 people (10 events  
– 60 people each)

# Data that Tells a Story

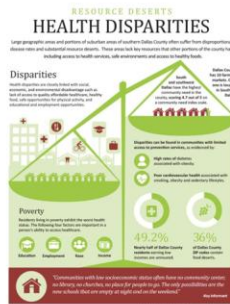
- Accessible to non-English speakers
- Uses equity lens
- Cites sources
- Interesting and compelling
- Easy for lay people to understand

## Demographic Information (5-8 slides)

- Race/Ethnicity
- Age (55, 65, 85+)
- Disability (18-65)
- Poverty (X% below FPL)
- Language

## Service Information (2 -3 slides)

- Client counts and demographics
- Service areas and counts



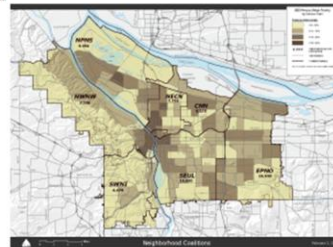
## FREEDOM NETWORK Member Report 2014



A human trafficking case can last as long as seven years and may include identification, criminal justice advocacy, social service provision and case management, counseling, immigration-related, family reunification, civil litigation, and adjustment to legal permanent residency and applications for citizenship. In some cases, Freedom Network members have become involved in the criminal defense of trafficked individuals or assisted survivors with seeking justice.

This report is available at [www.freedomnetworkusa.org](http://www.freedomnetworkusa.org)

#FNReport



## Focus Areas

- Outreach/Information/Referral
- Nutrition Services
- Health Promotion
- Case Management, Options Counseling
- Emergency services/gap programs
- Caregiver Respite and Education
- Safety & Abuse Prevention
- Older Adult Behavioral Health
- Transportation Coordination & Voucher Program

## DEFINE THE SCOPE

What ADVSD **can** do:

What's Important to You?



Other Thoughts?



Focus Area

What ADVSD **cannot** do:



What Do You Need More Of?

What Would Solve This?

# Part I – Poster Board Process

What's Important to You?



Other Thoughts?



Focus Area



What Do You Need More Of?

What Would Solve This?

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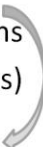
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# Part II – Table Process

## What Do We Know?

Previous Area Plan goals with results and lessons (static, printed, #s, graphs)

Current draft goals & objectives (open ended, images, interactive)



## Possible Strategies?



***Family caregivers will be informed about and have access to resources that can assist them in caring for older adults.***

**Objective:**

District Center case managers and community agencies will provide a minimum of 3,500 hours of Options Counseling to family caregivers annually.

**Result:**

Average of 2,400 hours provided annually

Did not meet target

**Analysis:**

What we learned.  
Barriers .  
Reason for success.  
What changed?



## Possible Strategies



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Small group. Last 40 minutes of session. Two 20 minute sessions world café style. Facilitated conversation to organize and prioritize/group these ideas. Go to focus area that most intrigues you. Stay or move to 2<sup>nd</sup> location. Come together at the end to debrief process.

## Interviews or Surveys

- Same questions
- Reach home bound individuals
- Reach people in facilities
- Training needed for interviewers

## Let's Think About It . . .#3 & #4



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How do we analyze community feedback? Can the community do this and how? On site – on that day?

What info do people need to navigate the room?

What needs to be translated? What might we need for interpretation?

## Discussion #3 & #4

How do we analyze community feedback? How can the community do this on site? How do we help people navigate the room and interact with the material? What size of group is best?

How can we make materials and graphics inclusive of language, culture, education/system knowledge and ability?

Who have we left out? How might we conduct outreach? Possible host sites? Partners? What number of events or participants will feel like success

# Writing the Area Plan



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## **Advisory Council Role(s) in Area Plan Development**

- Guide community engagement plan
- Convene, attend, participate, and facilitate community sessions (April-June)
- Educate public about ADVSD services as related to Area Plan
- Advise on integration of community feedback into plan (June-August)
- Host/promote Public Hearings in September
- Approve Area Plan and Area Plan budget
- Advise on annual updates to Area Plan

## Let's Think About It . . .#5



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How do you want to be involved? How might your current priorities need to shift to make this happen?

## Discussion #5

What are some possible committees or workgroups needed? What is AC role and commitment? How might your current AC priorities need to shift to make this happen?