

APPENDIX A – Notes from Kick-off Meeting

Notes from the Raleigh Senior Center Feasibility Study July 13 Kick-off meeting

- Vic Lebsock made an introduction of the project and the presenters for the meeting pointing out that this is a Feasibility Study not the planning for an actual specific building.
- A presentation was then made to the attendees by the Taylor Wiseman and Taylor design team – see the Powerpoint presentation and meeting outline for details from this presentation. This was followed by a question and answer period.

The following questions were posed individuals in the group to the team:

Q: Why could Raleigh not buy and use the YWCA?

A: This is a Feasibility Study and, while the possibility of using existing facilities does exist, part of the purpose of this study is to determine whether that is a good route to use in accomplishing the goal of providing a Senior Center. It was pointed out by several staff members from the City and TWT that the YWCA facility itself has already been sold and is no longer available.

Q: What about Dorthea Dix as an option?

A: This is again a potentially viable choice. Again, the attendees were reminded that this is a Feasibility Study and part of the process is to consider multiple options.

Q: Why are we not using information from other City Senior facilities?

A: We are obtaining input from other area Senior facilities. This input will be incorporated into the study.

Q: Have you studied the Senior Center at Morehead City?

A: No, that center has not been studied at this time.

D: At this point, other Senior centers were also queried as possible templates for a Senior center for Raleigh.

Q: Why are you not just using the information taken from the Whitaker Mill focus group?

A: This information is valuable input and will be considered. However, it is not the only input to be considered. Whitaker Mill is utilized by a small part of the total number of Seniors in Raleigh, and the input of the rest of the Senior population is also very valuable.

Q: Why not consider a phased approach? Why not do something temporarily for the immediate need and then something more permanent during a future phase?

A: This might also be a possible conclusion resulting from this study.

Q: Have you considered how long it takes to get something up and running? What will the Seniors use in the interim?

A: This is also something that might be answered through the input from this study.

Q: Have you considered Millbrook Exchange Park?

A: City owned property as well as other possible properties will be considered as possible sites, based on the direction provided through the input of the Seniors in general and of the focus groups specifically.

Q: What are you doing to ensure diversity?

A: The questionnaire is available to everyone at this meeting and will be made available to the general populace through the parks and recreation department. Every attempt will be made to contact people of diverse backgrounds.

Q: What are you doing to obtain input from the 45-55 year old group?

A: Again, the questionnaire is available to everyone at this meeting and will be made available to the general populace through the parks and recreation department. Every attempt will be made to contact people of diverse backgrounds.

At this point, the need from input from the attendees was stressed. Questionnaires were handed out and Jim Jatko then proceeded to explain what was being asked by each question.

The attendees were reminded that this is a Feasibility Study that will be used to help guide the City in their future pursuit of an actual center. This process will not producing a specific structure immediately, it is only an information-gathering mission at this time.

A final question period was initiated. The questions of cultural and age diversity were again brought up along with the query about other specific centers that could be used as a template for a center for Raleigh. Attendees were reminded that the questionnaire was the key to the input for this study at this time, and that they could help best by getting the word out to others to participate in the questionnaire. They were also reminded that information and the questionnaire were available on the City website and that the site address was on the bottom of the agenda. They were thanked for attending and for being a part of the process.

APPENDIX B – Kickoff Questionnaire



FEASIBILITY STUDY FOR A NEW RALEIGH SENIOR CENTER

KICKOFF MEETING - QUESTIONNAIRE

6:30pm - July 13, 2006
McKimmon Center, NCSU



1. What is the Zip Code of your residence: _____
2. How often do you participate in activities or programs for Seniors or with other Seniors?
a. ____ times per week. b. ____ times per month. c. ____ times per year
3. At which Senior Center, Club, Community Center, Church, YMCA, University or Parks and Recreation Facility do you participate in these activities the most?

4. Which three (3) services or activities do you participate in the most at these locations?
a. _____
b. _____
c. _____
5. What three services or activities do you think are most important to include at a Raleigh Senior Center?
a. _____ b. _____ c. _____
6. How do you travel to obtain or participate in senior services or programs?

7. In which age group are you?
a. 40 to 50 _____ b. 51 to 60 _____
c. 61 to 70 _____ d. 71 to 80 _____
e. 81 to 90 _____ f. 91 and above _____
8. Of the following, which would encourage you to participate more in the services, activities and programs at a Raleigh Senior Center?
a. Other friends who participate _____
b. Services/Programs that interest me _____
c. Easy Transportation _____
d. If the center was closer to me _____
9. Would you care to participate in a Focus Group? ____ Yes ____ No
If "Yes," which group interests you the most?
a. Programs, Activities and Services _____
b. Transportation and Accessibility _____
c. Senior Centers for Now and the Future _____

If interested in participating in a Focus Group, please provide your name and phone number here (your name will be kept confidential): _____

APPENDIX C - Raleigh Senior Center Feasibility Study

Focus Group Discussion Topics

All topics will be generally covered at each meeting, with more discussion centered on the particular focus topics as appropriate. Key points and issues in discussions will be recorded on easel pads and consensus developed between priorities and importance on each topic in each meeting.

General:

- When you hear the term “senior” or “senior citizen,” what do you think?
 - Is each term a “positive” term (+) or a “negative” term (-)
- What do you think is the largest issue facing the aging population in Raleigh?
- What do you think is the second largest issue?
- What are your main sources of news and information?
 - **About the community?**
 - **About activities that may interest you?**
 - **About health, healthcare issues?**
- What do you feel about participating in activities with other seniors, or obtaining services or information at locations that are open to the general public?
- How far in time or distance do you feel you should have to go to participate in activities that interest you or to obtain information or services that you need?
- How did you get to this meeting?

Programs:

(Repeat of Questionnaire)

- What single program do you most appreciate at a senior activity or center where you participate?
- What are the elements of that program or service that make it important to you?
- Do you think your program or service interests have changed over the last 5 years?
- What program or service that you do not use now do you think may be important to you in the next 5 years? 10 years?
- What activity or program offering do you think would attract more **men** to participate in what a senior center has to provide?
- What activity or program offering do you think would attract people in their 50's?
- Multi-vote on which of the following Programs or Activities should be in a Senior Center (Vote for 7):

Music	TV/Sports
Card & Board Games	Art & Crafts
Swimming	Educational Offerings / Speakers
Exercise	Trips
Speakers / Classes	Computers / Internet
Line Dancing	Library / Reading Room
Pool Tables	Meals
Golf	Health and Wellness Information
Racket / Hand Ball	
- Of the current programs offered by Raleigh Parks and Recreation, what program do you think it would be easy for them to add at one or more of their activity locations?

- What role do you think the City of Raleigh has in providing these programs or services?
- What role do you think Wake County has in providing these programs or services?
- What role do you think the state has in providing these programs or services?
- How much would you be willing to pay a year to participate in the activities and programs at a senior center?
- All architectural issues (size, appearance, accessibility, etc.) aside, what do think a senior center of the future contains (what would it have in it and outside of it)?
- If you had to prioritize the following spaces for new senior center, how would you vote (Vote for 5):
 - Eating Area
 - Outdoor Activity Area
 - Kitchen
 - Racket Ball/Hand Ball Court
 - Golf Course
 - Indoor Walking Track
 - Arts & Crafts Room
 - Multi-Purpose Room
 - Reception & Information Area
 - First Aid/Health Screening Room
 - TV Room
 - Reading Room
 - Library
 - Computer Lab
 - General Class Room
 - Fitness Equipment Room
 - Swimming Pool
 - Game (cards) Room
 - Music Room
- Should a senior center be called a SENIOR center? If not, what then?
- What Senior Groups or Clubs are represented here?

Transportation and Accessibility:

(Repeat of Questionnaire)

- How did you get to this meeting?
- What could change to not have that mode of travel available to you?
- What do you think you would do at that time?
- If you don't already, would you ever use public transit?
- If you don't already, would you ever use public para-transit (door-to-door vans)?
- What do you like or dislike about public transportation?
- Do you have accessibility issues at some places you go?
 - What are they?
- All architectural issues (size, appearance, accessibility, etc.) aside, what do think a senior center of the future contains (what would it have in it and outside of it)?
- What would a senior center have that could attract more men?
- Should a senior center be called a SENIOR center? If not, what then?
- What Senior Groups or Clubs are represented here?

Senior Centers for Now and into the Future:

- What is your earliest recollection of a "senior center?"
- What has changed since then?
- What do you think is the most important service provided by a senior center?
- What do you think that will be in 5 years, 10 years, 20 years?
- Could that service be provided by a center that is not strictly oriented to seniors?
- Have you visited a senior center somewhere in America that you really like?
 - Where was it?
 - What two things did you like best about it?
- Would the senior population of Raleigh be better served by a single comprehensive senior center or multiple center locations offering different comprehensive services?

- Multi-vote on which of the following Programs or Activities should be in a Senior Center (Vote for 6):

Music	TV/Sports
Card & Board Games	Art & Crafts
Swimming	Educational Offerings/Speakers
Exercise	Trips
Speakers/Classes	Computers/Internet
Line Dancing	Library/Reading Room
Pool Tables	Meals
Golf	Health and Wellness Information
Racket/Hand Ball	
- All architectural issues (size, appearance, accessibility, etc.) aside, what do think a senior center of the future contains (what would it have in it and outside of it)?
- If you had to prioritize the following spaces for new senior center, how would you vote (Vote for 5)

Eating Area	TV Room
Outdoor Activity Area	Reading Room
Kitchen	Library
Racket Ball/Hand Ball Court	Computer Lab
Golf Course	General Class Room
Indoor Walking Track	Fitness Equipment Room
Arts & Crafts Room	Swimming Pool
Multi-Purpose Room	Game (cards) Room
Reception & Information Area	Music Room
First Aid/Health Screening Room	
- What would a senior center have that could attract more men?
- Should a senior center be called a SENIOR center? If not, what then?
- What Senior Groups or Clubs are represented here?

APPENDIX D – Summary of Focus Group Discussions

Focus Group 1 - August 14, 2006 Transportation and Accessibility

In attendance: Edward Chauvaux, Mary Ruth Chauvaux, Roberta W. Howard, Karen Pharr, Marguerite Brailsford, Rose Simmons, Virginia R. Hinton, Margaret J. Wright and Gene McCabe. This group had 9 people total. Of these seven were women and two were men, seven were minority and two white.

The attendees were asked to define the term 'senior' and indicate whether this was a positive or negative term. Their response was: maturity (+), another phase of life (+), getting older (+/-), 65 and over (+/-), retirement (++) , living longer (+), changing life style (+/-), and 55 and over (+).

They were asked to list the greatest issues facing seniors in Raleigh. Number one in importance on the list was Transportation – due to the following factors: seniors not being able to drive, having a difficult time getting around, having failing eye sight and needing handicap access. They also indicated that seniors were not able to travel alone and were not aware of transportation services that might be available to them. Number two was affordable and accessible housing. Also on the list were limited social interaction and loneliness, meals and nutrition, health because they have difficulty getting to the doctor, have limited information available, and living alone.

The major sources of news and information concerning services and programs for this group are (in order of importance): television, churches, radio, word of mouth, senior expos, the newspaper, health fairs, parks and recreation mailers, the internet and City Hall.

The participants were asked if they would be willing to share facilities with other generations of people or if they felt that a senior center should be strictly for seniors. Their answers varied. Some felt that unless children are there for specific structured activities that they would be a hazard to the seniors because of potentially running into and knocking them down. For this reason they felt that a separate area set aside for the seniors needed to be provided. Others felt that interaction with other generations would be beneficial to both the seniors and the younger generations. They also felt that animals could be allowed into the center for the same reason. They expressed a desire to be able to teach children and pass on their knowledge and skills.

When asked how far or how long the seniors might be willing to travel, the following responses were provided. The seniors felt that they would not be willing to travel for longer than 30 min. with an ideal travel time of 15 to 20 min. They would be willing to walk up to a half mile if the way had good sidewalks and was fairly level. Otherwise they felt that any center that would be of use to them should be located within the area in which they live. They also expressed an interest in para-transit or bus if the ride were less than 30 min. Rides or bus stop waits that required them to be out for an hour or longer seemed to be a problem from the standpoint that they felt that they would need to have a bathroom provide. The attendees were asked how they had arrived at this meeting. All came by car with the drive being between 5 and 20 min.

The group was then directed into their specific topic of transportation. They were asked to consider their situation if their current method of transportation were to change. Answers included that they would take the bus, stay at home more, call on family and others for assistance, call a cab if they could afford it, look for specific transportation services geared to

seniors and take the City of Raleigh ART transit. They indicated that they felt they would be much more depressed and isolated and that getting out is what kept them going. All agreed that their schedule would need to become much more flexible in order to work around their transportation needs. Eight of the group said that they would ride the bus and all indicated that they would be willing to take para-transit.

When asked for their impressions of public transportation they indicated the following. They disliked waiting – especially if it involved waiting in weather. They felt that generally the schedules for the busses were not very reliable. All indicated that they could not stand for long and would not take the bus if benches were not available at the bus stop.

The group was asked if they had accessibility or building issues that needed to be addressed should a center be provided. They stated that quite often it was difficult to get into a building. Bathrooms were a major issue – both in terms of the number of stalls and in terms of getting into and out of a stall. Parking needs to be close to the building. Doors need to be selected such that they are not heavy and hard to open. They categorically indicated that if the building was to be used for seniors that the ‘music needs to be turned down and the lights turned up.’ They would be willing to use an elevator if the building had multiple levels.

The participants indicated a broad range of senior groups in which they were currently affiliated. These included the Roberts Park Senior club, First Cosmopolitan Church, Mt Peace Church, SouthEast Sparkling Seniors, SouthEast Wake Adult Day Health Center, Catholic Golden Agers from Our Lady of Lourdes, and Poplar Springs Church. They were asked if they had ever participated in SAAG and the attendees responded that they had never heard of SAAG.

Focus Group 2 - August 15, 2006 Programs # 1

In attendance: Margie Lucas, Dolores Schnaidt, Patsy Chenny, Susan Adams, Gail Holden, John Markey, Betty Odham, Bill Cunningham, Betty Fitzgerald. This group had 9 people total. Of these seven were women and two were men, none were minority.

The attendees were asked to define the term 'senior' and indicate whether this was a positive (+) or negative (-) term. Their response was: close to dying (-), age as a label - 55 + (-), knowledge / wisdom (+), senior discounts (+), loss of physical and/or cognitive abilities (-), taking life in a new direction (+ but can be scary), respecting elders (+), retirement (+/-), will happen to 'me' in the future (-), busier than ever (+/-), like waiting at a grand train station (+), able to have a avocation rather than a vocation (+), a matter of perception (+).

They were asked to list the greatest issues facing seniors in Raleigh. Number one in importance on the list was Health and Health Care because the health care system is perceived as 'broken'. Number two on the list is isolation. They also indicated that seniors had issues concerning mobility, mental acuity, limited choices of places to go in Raleigh, transportation, security and the possibility of being victimized and the need for information / communication.

The major sources of news and information concerning services and programs for this group are: the internet, the newspaper, television, radio, the Raleigh parks and department, the health department, hospital newsletters, church, word of mouth. Of this group, four felt that they got enough information to stay current and four felt that they needed to get additional information.

The participants were asked if they would be willing to share facilities with other generations of people or if they felt that a senior center should be strictly for seniors. Their answers varied. Some felt that a center for seniors only would have a stigma. Others felt that multi-generations would create a problem if younger people were allowed to keep the seniors from using the facility. They felt that organization of the programs within the facility would be the key and that the City needed to ensure that non-seniors did not push out seniors. They did feel that youth interchange could be a bonus, but they felt that the seniors should take the lead with youth being invited to join in. One suggestion was that the Center could be programmed for senior use during the day when Seniors are more willing and able to be out and available to other generations during evening and night hours.

When asked how far or how long the seniors might be willing to travel, the following responses were provided. The seniors felt that they would not be willing to travel for longer than 20 min. with an ideal travel time of 7 to 8 min. The entire group is still driving. They indicated that they would be willing to drive for a longer period of time if there was a specific program that they were greatly interested.

They were asked to consider their situation if their current method of transportation were to change. Answers covered a wide range. One person indicated that they would move into a senior 'warehouse facility'. Several stated that they would take the bus if it was available. Others would resort to mobility by cab. Some indicated that they would simply stay home. A couple indicated that they would cycle regardless of situation if the traffic was light. Some would walk a short distance if the way was not hilly; others stated that they would not be willing to walk under any circumstances.

The group was then directed into their specific topic of Programs. They were asked to list programs that greatly interested. Those listed were as follows: bridge / cognitive games, a

therapeutic pool, aquatics, an exercise room with equipment and weights, speakers and special programs, line dancing, aerobics, separate facilities for men and women, an indoor padded walking track, and educational classes such as computer and general educational classes.

The attendees were asked to indicate what elements of these programs make them attractive. Bridge and games in general were favored due to their function of socialization, because they help to keep the brain sharp, they are fun to play and they provide competition. Pools were favored by the entire group because of their influence on general health, their function of socialization and the provision of low-impact exercise. An exercise room was favored due to its health benefits and aerobic exercise and due to the benefit of socialization. Programs and trips provide a social and an educational function. Line dancing provides great exercise and is fun. A walking track would provide healthy exercise and a social function.

The participants were asked if they thought that these program interests would change in the next five to ten years. They suggested that there would possibly be more demand for a computer lab and computer related classes and programs. Health screening might become more important. There might be more requests for programs to help supplement incomes; and also possibly more of a desire to pursue employment opportunities. Job fairs might be a future program need. Generally, they perceived that seniors in the next five to ten years will be more active than seniors today.

The next question posed addressed the issue of how to attract more men to a Senior Center. Possible programs included a golf course, a pool / billiards table, racquetball, a more masculine environment, a large screen television, a place to view sports, a wood shop and/or work shop, car repair classes and an associated facility, reading classes, male oriented trips such as fishing and hunting, meals and music.

They were then asked to consider what would attract more women to a facility. Possible programs included a book club, a sewing room, a place to come and converse with friends, a cooking club, exercise classes based on physical levels of the individual participants, and a book swap.

When asked to consider what role the City should take in providing these programs, the group provided the following responses. They pointed out that surrounding areas have programs paid for by the individual towns. The City has a greater expertise to run programs and for programs in which they have no expertise, the City could easily take on the role as a coordinator. At a minimum, the City should provide the space. It should also provide the funds to build, equip and operate a center.

The state also should have a role in providing a senior center, according to the group. The State has the expertise in areas of insurance, building codes and accessibility. It also should be providing a part of the funding - if only as a one time grant - and it could assist with the purchase of the land.

The participants were then asked to indicate how much they personally would be willing to pay out of pocket for senior center activities. Four of the group felt that the activities should be free except for special programs and trips. Two felt that an appropriate amount would be \$350 per year, one said \$480 and one said \$500. The final member of the group said that depended entirely on the offering of the center. All felt that there would be opposition to a 'membership' to a center that was available for general public use, and that they do not want to see large numbers of people.

When asked what kinds of spaces should go into the center they responded with the following list: a kitchen for cooking classes and for catering, multi-purpose rooms that can be large or small as per the need (this to include: movable furniture, folding tables, storage space for tables and chairs, mats for exercise, a stage - possibly moveable, and dividers), a computer lab (with a projector), art rooms (with sinks), an exercise equipment room, a pool for therapy and for water aerobics, an office, a nice reception area, a lounge / social area with sitting room (possibly with a commercial entity of a coffee shop), comfortable furniture, a specific room for games, a music room with a piano, and accessible bathrooms.

They felt that such a center could be called the 'enrichment center' or the 'active living center'. No one expressed any strong feelings or objections concerning labeling the center a senior center.

The attendees were then asked to consider what steps could be taken to attract younger 'seniors' - age 50 and older. They suggested providing more afternoon and evening activities, classes of interest to a younger group of people, exercise, educational activities, an area to watch sports and socialize, a place where they could learn about and obtain support concerning the care of aging parents, and possibly a place to provide sitting services for said parents.

The group represented a diverse group of programs. These included the Oberlin YWCA, the respite center - Shepherd Center of Raleigh, SAAG - Senior Adult Action Group, the Raleigh Bridge Club, the Quail Hollow Club at Eastgate, the Third Agers church group, the Pullen Park club, Wake Human Services, and the Grand Age club church group.

Beyond the recreation programs indicated by the group, they felt that the following services should also be offered: health screening, care for care givers to give them some time to themselves and program space for seniors with special needs with trained personnel.

Focus Group 3 - August 16 Programs # 2

In attendance: Mona Keech, Lauren Llewellen, Dottie Scott, Emily Walls, Ann McQuoid, Alice Jones and JoLina Glenn. This group had 7 people total in attendance. Of these all were women; one was a minority.

The attendees were asked to define the term 'senior' and indicate whether this was a positive or negative term. Their response was: grey heads (-), interesting (+), experienced (+), old people / "not me" (+/-), better than 'elderly (+), looking to enjoy life (+), active (+), time to travel (+), can enjoy things / have time to enjoy what is around you (+), time to make new friends (+), no fixed schedule but much to do (+/-), learning new things (+), more active (+).

They were asked to list the greatest issues facing seniors in Raleigh. Number one in importance on the list was health care - six of the seven participants felt that this was their greatest concern. Second in importance was transportation and the need to be with people. Other issues were the problem of a fixed income, loneliness and isolation.

The major sources of news and information concerning services and programs for this group are: the newspaper, the internet, television, radio, word of mouth, and bulletin boards at the grocery store and / or drug store.

The participants were asked if they would be willing to share facilities with other generations of people or if they felt that a senior center should be strictly for seniors. They felt that for some activities like meals and programs should be provided for seniors only. Multi-generational activities are desired in some instances because it exposes the seniors to more people but this should be controlled. They also indicated that it would be nice to have the ability for grandparents who are responsible for caring for grandchildren to use the facility. A childcare area would be desirable. This should be in the same facility but separated from the senior activity areas.

When asked how far or how long the seniors might be willing to travel, the following responses were provided. The seniors felt that they would not be willing to travel for longer than thirty minutes. They generally preferred to travel for less than twenty minutes, and several indicated that fifteen minutes would be more desirable. When asked how long it had taken to get to this focus group, six indicated that they traveled 10-15 minutes; one traveled 20 minutes. All drove to the meeting.

They were asked to consider their situation if their current method of transportation were to change. Responses varied. Some said that they would simply stay home; others said that they would take the CAT bus. They did express a need for the bus scheduling to be better listed and available and for the bus routes to include places where they would like to go. Some would use ART. They also indicated that they would be willing to walk up to twenty minutes to get to a center if the way were flat.

When asked what single program of the current programs that are available they most appreciated, the attendees indicated that travel was the most favored. Other programs that they listed were senior clubs, speakers and informational meetings, the 'fun golfers', book clubs, and a computer learning center.

They were then asked to identify what elements of these programs make them important to them. The group indicated that social interaction was a main element. Other elements

included: mental activity, learning new things, making new friends, being involved, active sports, and that the activities were fun.

The participants were asked how they felt that programs and activities have changed in the past five years. They felt that the attitude both of the people around them and of themselves toward seniors and senior activities has improved. There is a sense of more active senior people who are coming into the area.

When asked what they feel would change in the next five to ten years, they indicated better transportation, more programs for Seniors only, grocery delivery, fitness coaches and personal trainers, exercise geared to individual needs and offered at different levels, message therapy and more spiritual programs.

They were asked to identify what types of programs would attract more men. The group indicated computer based programs, exercise, food, male oriented crafts and a wood shop and travel. They also suggested that men be invited to give informational sessions - that men are more inclined to attend events that are given by men.

The participants were also asked to identify what programs would attract more young Seniors (persons in their 50's). They suggested dance classes - couples, line dancing and dancing that required no partners. They also suggested exercise classes, self-help and study classes. Possible topics for these classes that they suggested were car repair, decorating and home repair.

The group was then asked to identify potential programs that could be offered in a senior center. The top programs were health / wellness activities, exercise and fitness and trips. These were followed in order of importance by swimming / aquatics, educational offerings and speakers, a library with a reading room and book exchange, computers and internet access, arts and crafts, outdoor low impact exercise, cards and board games, billiards, golf, line dancing, music, meals, racquetball / handball, and finally television and sports viewing. Other programs that they suggested that the City offer were water aerobics, crafts, course work and university level classes, Tia chi, yoga and pilates.

The attendees were asked to identify what role that they believed that the City should take in providing these programs. It was suggested that the City should provide multiple facilities that are close to the users so that no one has to travel more than thirty minutes to get to the center. The City could possibly provide specialized centers and should definitely provide the financing.

When asked what the participants would be willing to pay for programs answers varied. One suggested \$29 per month plus special fees for specific materials that might be required for specific activities. Another suggested \$10 per month plus special fees. Others stated that \$10-\$20 per month as a membership fee. They do not want to have to pay for every activity, but they would be willing to pay for special activities such as golf or art. Funding for extra senior activities could possibly come from taxes.

The group was asked to identify specific facilities both indoor and outdoor that they felt would be important to a senior center. They listed the following: swimming pool, Jacuzzi and sauna, a kitchen for food classes, an exercise equipment room, an exercise multi-purpose room, a games room, a room for small groups, a dining room, restrooms, locker rooms with showers and a change room, and comfortable seating.

Combining this group's suggestions with those of the previous groups, the participants were asked to identify by vote their first group of choices and then their second group of choices. The following is a listing of these choices with the number of votes each time listed as (first/second): aerobics exercise room (5/7), a large multi-purpose room (2/7), swimming pool and showers (6/6), an arts and crafts room (3/6), a lounge and social area (2/5), a general classroom (3/4), a computer lab (3/4), an indoor walking trail (2/4), Jacuzzi or sauna with showers (1/3), an eating area (1/3), fitness equipment with showers (2/2), a first aid and health room (1/2), a kitchen (1/2), a coffee or tea room (0/2), music room (0/1), bridge / cards and game room (0/1), billiards (0/1), a library and reading room (0/1), a reception and information area (1/1), a television or movie viewing area (0/0), racquetball / handball (0/0), outdoor activity area (0/0), a golf course (0/0), vending machines (0/0).

When asked to identify a name for the center the attendees suggested the Raleigh adult center or community center, senior center or the Adult Activity Center.

Participants in this focus group were asked to identify where they are currently attending senior programs. These included: YMCA, YWCA, White Memorial First Presbyterian, the senior club leader, Lions Senior Citizens Club, Senior Net, Heddingham Raleigh Fun Golfers, Parks and Recreation travel opportunities, Encore for Recreation, a book club, Lawnview water aerobics and the Western Preservation Society. They were asked if they had ever participated in SAAG and the attendees responded that they had never heard of SAAG.

Focus Group 4 - August 21 Now and Future Needs

In attendance – Mary Katherine Grubbs, Norma Alexieff, Jilma Shackelford, Carol Kennison, Mary Horn Odom, Terri Conti, Manis Strickland, Derrick Boissiere.

This group had 8 people total in attendance. Of these 6 were women, 2 were men, one was a minority.

The participants were asked to identify themselves and to indicate if they represented a senior group or programs. Groups represented were: Young at Heart, Lyons Club, SAAG, Millbrook, Quail Hollow and Senior Net.

The attendees were asked to define the term 'senior' and indicate whether this was a positive or negative term. Their response was: a recycled teenager (+), retirement (+), grandparents (+), part of the senior family (+), it is an appropriate identification for our 'class' of people (+), maturity and wisdom (+).

They were asked to list the greatest issues facing seniors in Raleigh. Tied for number one on the list were health and finances. Other issues included transportation, space and money, isolation, depression, companionship, staying active and viable in the community, and loneliness.

The major sources of news and information concerning services and programs for this group are word of mouth – especially at church, the internet, senior literature, senior clubs, television, radio and newspaper.

The participants were asked if they would be willing to share facilities with other generations of people or if they felt that a senior center should be strictly for seniors. They responded that exercise classes should be for seniors only, and that they did not want to be in the position of having to compete for space during the day with children who were off from school. Also for seniors only were crafts and games – they expressed embarrassment at the prospect of comparison with younger people concerning skills and abilities. When a facility is for seniors only, they felt that some people would be more encouraged to participate and be more able to bring out their hidden talents. Some educational opportunities should be for seniors only as well because it would only be relevant to seniors. They did not want other generations displacing senior activities. They did feel that on a limited basis younger people could be invited in for dancing and conversation.

When asked how far or how long the seniors might be willing to travel, the following responses were provided. They said that they felt that they did not want to travel longer than 30 minutes and that 20 minutes would be preferable. Ten miles seemed to be the maximum distance. They were willing to travel up to an hour for a specific program on occasion. Everyone in this group came by car, although one person required a driver to provide her with transport.

They were asked to consider their situation if their current method of transportation were to change. Several stated that they would get a ride with friends and family. Some stated that they would be willing to walk if the way were flat and the weather good. When asked how far they would walk the answers ranged from 3 blocks to 2 miles. One person stated that they would get a cab. Some of the group answered that they would take the public bus if they were on the bus line and the bus had handicap access. They strongly suggested that the senior center provide a van / shuttle.

At this point the group was led into their specific topic of now and future programs for a senior center. They were asked to describe their early memories of what a 'senior center' might be – what had been their first exposure to a senior activity (either as a participant or as a younger person looking in). They stated that initially their reaction was that they were 'too young' to be a part of anything Senior. That centers needed more variety of things to do and that they were dismal and seemingly temporary. They did like the opportunity that they had to meet other people of similar interests that occurred in these centers. When asked how they felt that this had changed – if it had changed, they responded that there seemed to be more grandparent / kid relationships in the centers today than in the past.

The group was then asked to discuss what first attracted them to a senior center or activity. They described sing-a-longs, meeting to work on genealogy, card games and classes that included ceramics, drama, foreign languages, quilting, line dancing and computers. They also talked about meeting that allowed them to meet other seniors in the area and day trips.

The attendees were then asked to discuss what they felt were the most important aspects and services that were provided by a senior center. They felt that a center was a source of advocacy for seniors. It was a place for people to get together to play games and socialize. Fitness and exercise were of prime importance. They stated that it allowed them the opportunity to participate in a variety of activities that they would not otherwise have available to them. It felt like a safe haven. Also of importance to several was the fact that they got meals at the center.

The participants were asked to consider how this might change in the next five to ten years. They stated that they felt future centers would have more space and more up-to-date equipment and that the people operating the centers would better be able to instruct the seniors in how to use the equipment. They thought that there would eventually be a shuttle service or some better way to address transportation needs and a health and wellness center as part of a senior center. In the future, the furniture might become more comfortable and better address the issue of providing seating for people with walkers or who require assistance. They felt that communication might improve than that they would have better and more available information concerning events of interest to them. The group expected that there would be interesting speakers that they could readily relate to and that they would continue to have nutritious meals. Future centers would most probably have activities geared for younger and possibly still working seniors. They thought that there would be more sports activities such as a putting green, golf lessons, croquet, and shuffleboard. They felt that there would be more organized travel with day trips and longer trips and that possibly they would in the near future have space travel available to them. As a group, they expected that their center would provide them with enrichment, togetherness, the opportunity to enjoy shared interests and the opportunity for some competition. Future centers will most probably provide career and employment services and volunteer services as well as social services.

The group was then asked to consider the issue of whether the future center should be for seniors only. They again responded that most of the activities of the center should be for seniors only. These activities included games, senior clubs, trips, educational activities that needed to be geared to the sight, hearing and mental facilities of seniors with a greater tolerance of their specific areas of need, a coffee clutch place and a reading room. They did concede that younger people could be allowed to participate in games and to be brought in for special occasions.

The participants were then asked to identify what activities and programs they would like to see in their future center. They stated sewing, woodworking, hobbies, therapeutic pools, aquatics,

health services with referrals, a meeting space, a fix-it person and possibly a help fair, a gift shop and possible a fair, activities for the evenings and weekends, movies, and a commercial &/or classroom kitchen.

The programs list that was developed as a result of the previous focus groups was combined with the one produced by this group and the participants were allowed to select those programs that most interested them they were as follows: health and wellness (7), computers and internet access (7), trips and travel (6), swimming (6), indoor exercise and fitness (5), cards and board games (5), cultural activities (5), educational offerings (4), library / reading room / book exchange (3), arts and crafts, a shop and sewing room (3), music (3), a walking trail (3), a shuttle service and transportation assistance (3), ballroom dancing (3), cooking classes (3), meals (2), outdoor low impact exercise (2), pool / billiards (2), career and employment opportunities (2), resources services (2), special event celebrations (2), a putting green (1), croquet (1), shuffleboard (1), evening and weekend activities (1), choral groups (1), television and sports viewing (0), racquetball / handball (0), golf (0), line dancing (0), volunteer services (0), movies (0).

The group was then asked to list specific facilities that they believed would be needed in a Senior center. They listed the following: an all purpose or multi-purpose room, a computer lab, a book exchange, a hobby room for crafts and sewing, a woodworking shop, a gym and a meeting room.

Combining their answers with those of previous groups, the participants were asked to vote for those facilities that most interested them. They selected as follows: a computer lab (8), swimming pool with showers (5), a library and reading room (5), a coffee shop (5), a music room (4), bridge / cards / game room (3), an indoor walking track (3), a lounge and social area (3), a large multi-purpose room (3), an arts and crafts room (2), a fitness and equipment room with showers (2), a general classroom (2), an outdoor activity area (2), a pool or billiards room (2), aerobic exercise room (2), a full kitchen (2), an eating area (1), a gym (1), a woodworking shop (1), a television / movie viewing area (1), a first aid or health room (1), a limited kitchen (1), racquet / handball courts (0), Jacuzzi and sauna with showers (0), a reception or information area (0), and a golf course (0).

Finally, the participants were asked if they felt that there was a specific name that the place should be given. They stated that the Senior Center or Raleigh Senior Center was fine. It gave them a sense of being the senior's own place.

Focus Group 5 - August 22 SAAG / Whittaker Mill Focus Group

At the request of a special interest group known as SAAG (Senior Adult Action Group) a fifth focus group was added to the agenda. This was to be held at Whittaker Mill where the SAAG members currently participate and the persons invited were to be from a list of people that SAAG provided.

It should be noted that in each of the four previous focus groups the attendees were asked if they were familiar with SAAG and only three people indicated that they had ever heard of the group. SAAG provided the study team with eighteen names of people to include in this meeting. Of those, ten agreed to attend – one later withdrawing when she realized that the program would basically be the same as the one she attended the previous day. Four additional people showed up the day of the meeting. This group was asked to identify themselves as to SAAG membership. Five indicated that they were actually members of SAAG.

In attendance – Adelaide Staton, Meegan McDavid, Jim McDavid, Richard Cheves, Peggy Cheves, Jackie Bass, Kathy Cunningham, Brenda Hall, Keith Haslip, Jean Pope, Evelyn Zobel, Erin Bass, and Estella Clark.

This group had 13 people total in attendance. Of these 9 were women, 4 were men, two were a minority.

The attendees were asked to define the term 'senior' and indicate whether this was a positive or negative term. Their response was: opportunity (+), integrity (++), worker / doers (+), volunteers (+), experienced (+), informed (+), uninformed (-), wise (+), survivors (+), needy and poor (-), rich in spirit (+), veterans and heroes (+), fixed incomes (+/-), and involved (+).

They were asked to list the greatest issues facing seniors in Raleigh. Their number one responses were issues dealing with health and wellness – including healthcare, access to healthcare, it's quality and it's cost – and finances. They stated that the health care system was broken and no longer served their needs. Financial issues were related to social security, taxes, real estate and income. They stated that they felt that the current system of taxation and services was grossly unfair. Second in importance were housing, diet and nutrition, and transportation. Also listed were neglect and abuse of the elderly, isolation and problems being the 'sandwich generation' – grandparents needing to care for grandchildren or adult children needing to care for aging parents.

The major sources of news and information concerning services and programs for this group are television, newspaper, word of mouth, church, the library, the Senior Center, the internet, flyers – posted at places like the grocery store or drug store, organization newsletters, state government, retirement newsletters, and the AARP.

The participants were asked if they would be willing to share facilities with other generations of people or if they felt that a senior center should be strictly for seniors. They responded that some activities needed to be for seniors only. These included exercise geared for senior ability and energy levels, and singing groups. They stated that seniors tend to be vulnerable and unsteady, that they need to have parking that is wider and more geared to their driving ability. They also stated that they had different values and a different sense of ownership than younger generations and that they felt that young people would not take care of their equipment and facilities in an acceptable manner. They suggested that if young people wanted to attend a facility, they should be allowed only if they are bringing a senior. They were willing to have

younger (ages 50 – 70) seniors using the building at night and even renting out parts of the building at night and on weekends for other groups as a means of revenue.

When asked how far or how long the seniors might be willing to travel, the following responses were provided. They said that they felt that thirty minutes was the longest that they would be willing to go – four of the group were willing to travel this far. One said twenty five minutes and the rest stated that they were only willing to travel ten to fifteen minutes. They were then asked how they had gotten to the meeting. One took a cab, one walked – approximately a mile, and the rest drove.

They were asked to consider their situation if their current method of transportation were to change. They stated that they would use public transportation – the CAT bus, some would simply stay home, others would use a door-to-door or neighborhood-to-neighborhood service if it were available. The group suggested that the Center should provide a multiple drop-off shuttle service. They also mentioned that the City has a program that provides transportation vouchers that allow them to use a cab. Several mentioned that they would apply for this service if they could no longer drive themselves.

The participants were asked to list programs that they would like to see incorporated into a new center. They listed: exercise classes, aerobics, art, computers, educational classes, Pilates, low impact aerobics, gardening, genealogy, piano, chimes, chorus, strength bearing, speakers, ceramics, crafts, cooking classes, bingo, games, cards, volunteerism, knitting, sewing, meals, memory class, creative writing, outside walking trails, horseshoes, basketball, bocci ball, croquet, ping pong, and wildlife programs.

The programs list that was developed as a result of the previous focus groups was combined with the one produced by this group and the participants were allowed to select those programs that most interested them they were as follows: health and wellness (8), walking trail (6), indoor exercise and fitness (5), genealogy (5), trips and travel (4), educational offerings (4), line dancing (4), resources and/or volunteer services (4), computers and internet access (3), arts, crafts and a wood shop (3), outdoor low impact exercise (3), aquatics (3), pool / billiards (3), transportation service (3), a putting green, croquet and shuffle board (3), evening and weekend activities (3), music (2), ballroom dancing (2), cultural activities (2), gardening (2), wildlife programs (2), meals (1), library / reading room / book exchange (1), television, sports viewing and movies (1), career and employment (1), cooking classes (1), racquetball and handball (0), golf (0), cards and board games (0), and choral (0).

The group was asked to consider what programs and activities would bring more men into a center. They suggested slot machines, outdoor activities, hunting and fishing, a sports viewing area, a room dedicated to men, speakers of male interest, trips just for men, letting men do the planning and bird watching.

When asked what they felt was the City's responsibility in providing these services, they responded that the City should provide the funding in some portion. They also stated that their taxes were going to pay for schools but that they did not have children in schools. They felt that their taxes should be diverted toward providing their center. The participants felt that the City should finance the operation of the center, but that the State should be providing some assistance in financing of both the operation and in possibly in a building grant. The County should also aid in building and operational funding.

The attendees felt that operating costs, staffing and building operations should be determined by the City. Activities and programs provided need to be defined by the seniors. They would be

willing to pay only if all other methods of funding are exhausted and only if those unable to pay were provided with some form of scholarship. They would not be willing to pay for the general use of the facilities.

The group was then asked to identify spaces that they felt needed to be incorporated into a facility. They listed: a swimming pool, several exercise rooms, a canteen, a commercial kitchen, a catering kitchen with a classroom, a 'men only' room, adequate bathroom facilities, game rooms, meeting space, a multi-purpose room with dividers, a stage or platform that could be used as a stage, adequate storage space, eating spaces, a computer lab, a library with a reading room, an art room with a sink, a sewing room, an area for crafts and hobbies.

Combining their answers with those of previous groups, the participants were asked to vote for those facilities that most interested them. They selected as follows: aerobic exercise room (8), a large multi-purpose room with dividers (6), indoor walking track (5), a large storage area (4), kitchen – full (4), bridge / cards / game room (3), a swimming pool with showers (3), a computer lab (3), a lounge / social area / coffee shop (3), arts and crafts room with sink (3), a library and reading room (3), men's social room (3), general classrooms (2), a television / sports viewing / movie room (2), wood shop (2), eating area (2), outdoor walking trail (2), stage (1), gym (1), outdoor activity area (1), pool / billiards (1), first aid and health room (1), music room (1), Jacuzzi / sauna and showers (0), reception area (0), golf course (0), kitchen – limited (0), racquet ball / handball courts (0), and putting green (0).

When asked what they would name a new senior center, they stated that 'senior' had a bad connotation. They suggested the 'Raleigh Activity Center' or 'Something Else.'