




**A Chesapeake Thrives Conference**

# The Power of Partnerships

Building community connections to improve resident outcomes

**Breakout Session:  
Aging in the Community**




## CHESAPEAKE THRIVES

### *A Plan for Community Well-Being*

Priority Area:  
**Aging in the Community**

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# Older Adults & Our Community

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## DISCUSSION POINTS

- 1. SENIOR SERVICES
- 2. VALUE OF OUR OLDER ADULTS
- 3. TRENDS AND IMPLICATIONS
- 4. HEALTH EQUITY



## Value

- Economy
- Community & Family
- Workforce
- Volunteer Force



## The Trends

- Population
- Diversity
- Health
- Vulnerability
- Exponential Need

# Health Equity

Affordable Senior Housing

Homelessness

Transportation

Social Isolation

Food Scarcity

Inflation (shelter/meds/food)

Unintentional Ageism

The Greatest Forgotten Generation



## AGING IN THE COMMUNITY

### Aging in the Community

**Definition:** "Aging-friendly" communities are communities that provide affordable, accessible housing, multiple modes of transportation, access to community services, and opportunities for engagement for all residents, regardless of age or ability.

DATA	STRENGTHS	WEAKNESSES
<p>According to data obtained by the Senior Services of Southeastern Virginia:</p> <p><b>1,956</b> FY20 CLIENTS SERVED IN CHESAPEAKE: 1,956 (THESE ARE INDIVIDUALS WHO RECEIVED SERVICES FROM SENIOR SERVICES)</p> <p><b>60+</b> IS THE FASTESTS GROWING</p> <p>Seniors hold the greatest disposable income</p> <p>Seniors are essential to the family structure</p> <p>Seniors are the greatest contributors to volunteer time (valued at \$9.2 million in the City of Chesapeake in 2018)</p> <p>According to American Community Survey most renters spending 30% or more of Household Income or Rent are seniors</p>	<ul style="list-style-type: none"> <li>Strong Sense of Community to support seniors</li> <li>Existence of a committed 55+ group</li> <li>Strong non profits supported by a Area Agency on Aging with a vision</li> <li>Strong faith community</li> <li>Healthy Chesapeake has a program in the community for chronic disease management</li> <li>Commitment to aging in place with supports from libraries, recreation, Area Agency on Aging, DHS, others</li> </ul>	<ul style="list-style-type: none"> <li>Seniors are housing burdened</li> <li>Transportation challenges for residents</li> <li>Seniors often don't know how to access available resources</li> <li>Resources are scarce</li> <li>Seniors are technologically challenged</li> </ul>
	OPPORTUNITIES	THREATS
	<ul style="list-style-type: none"> <li>Strong collaborative vision for Healthy Aging</li> <li>Adequate primary care</li> <li>Investments across sectors</li> </ul>	<ul style="list-style-type: none"> <li>Funding challenges</li> <li>Failure to address housing and transportation needs</li> <li>Failure to nuance outreach and communication to the elderly and the frail and homebound</li> </ul>



## AGING IN THE COMMUNITY

The following Objectives and Strategies are from the Aging in the community dashboard, offered to introduce you to Chesapeake Thrives and to begin the conversation about the role all of us have in helping families and individuals in Chesapeake.

1. Increase supports to ensure that seniors are living their best lives
2. Increase supports for Grandparents and caregivers
3. Expand safe, affordable housing for seniors (Cross walk with strategies in Housing dashboard)
4. Increase supports to enable seniors to live financially secure and independent lives
5. Increase access to somatic health and behavioral health resources and services (Cross walk with Somatic Health and Behavioral Health)



## AGING IN THE COMMUNITY

- **Objective:** Increase supports to ensure seniors are living their best lives
- **Strategies:**
  - Provide community outreach to build awareness of resources and how to access them
  - Provide community outreach to isolated seniors
  - Expand public education around safety and signs of abuse and neglect





## AGING IN THE COMMUNITY



- **Objective:** Expand safe, affordable housing for seniors (Cross walk with Housing dashboard)
- **Strategies:**
  - Utilize best practices to expand affordable and low-income housing opportunities
  - Use resident referral/entry process for prevention, intervention, follow up, mitigate barriers
  - Expand SRO network and other income-contingent housing



## AGING IN THE COMMUNITY

- **Objective:** Increase supports to enable seniors to live financially secure and independent lives
- **Strategies:**
  - Establish ways for seniors to easily apply for eligible Income supports-SSA/SSI; Community and LTCMA; SNAP; LIHEAP; Rental Assistance, other
  - Address food insecurity for seniors by expanding volunteers and mobile feeding programs
  - Offer home-based support to ensure seniors can live in the least restrictive home of their choice



## AGING IN THE COMMUNITY

### OUTCOMES

- Improved quality of life outcomes
- Increased stable and affordable housing for seniors
- Increase pool of specialty providers and Medicaid and Medicare enrollment
- Increased food distribution to seniors
- Increased number of referrals
- Increased encounters by partners with seniors
- Foster Safety
- Increase access to health, mental health, and home health care



## Community Partners

Senior Services of Southeastern VA

Department of Human Services

Meals on Wheels

Faith Based Community

CIBH Mobile Integrated Healthcare

Chesapeake Public Communication

Chesapeake Regional Medical Center, Healthy

Chesapeake Parks and Recreation

Chesapeake Redevelopment and Housing Authority

Buffalow Family and Friends and other community partners



## DISCUSSION

GOAL of the Discussion:

How do these goals and objectives connect  
with the work you're doing now?

How do you see connecting with these in  
the future?



NEXT STEPS?





## Participant discussion

### Seniors add value to our communities.

**Disposable Income:** Adults aged 65+ control 70% of Disposable Income, therefore, positively impacting our economy.

**Community and Family:** Older adults are the stabilizing factor in the family, with some now raising their grandchildren/younger family member.

**Workforce:** Some older adults want to stay in their community and in the workforce. Some need the extra income. They bring qualified skills and expertise to the workforce.

**Volunteer Force:** In Chesapeake, older adults contributed over 350,000 volunteer hours, which was approximately \$9 million dollars saved (or "gifted") to the city.

### Trends in our senior community

**Population growth:** 65+ makes up 23% of the population in Chesapeake, increasing to 30% in 2030. For the first time, our 65+ community exceeds our under 18 age range.

**Health:** Seniors are healthier and living longer.

**Vulnerability:** COVID showed us the vulnerability of seniors. But this is not COVID-related only, this is with any crisis. For example, when evacuation is required - seniors are the hardest to move, especially when they have no transportation or medication access.

**Exponential Need** - When a senior aged 60-65 calls for services, they average 2-3 services needed. When a senior aged 65-70 calls for services, they average 60% more services needed than the age range below it.

**Very limited housing:** There is no housing or affordable housing for the older adult population and it will only get worse. Discussion for was to encourage decision makers to work with builders, to make requirements to offer some affordable housing options. Another suggestion was to use money from rent/mortgage assistance program and use the funds to rebuild homes by a contractor or partner with Serve the City.

**Economics:** Inflation is making it more difficult for our seniors. Many now are having a hard time affording utility, food, medications, and food after paying their rent/mortgage. Many are now suffering from food insecurity and relying on services such as Meals on Wheels and food pantries. Senior Services served over 300,000 last year with the Meals on Wheels program.

**Adult abuse** (physical and mental) and neglect is on the rise. We need to educate our seniors on safety to decrease abuse and neglect. Most abuse and neglect are by their own family members. Self-neglect makes up 54% of cases reported to Adult Protective Services. This is due to isolation and no connection to resources.

**Next Steps:** Building partnerships and collective efforts to help our older adult community. Work to have isolated seniors get connected to needed supports. Building relationships, collaborations, and referrals to learn about other organizations and the services that they provide. Examples are NAMI receiving a grant to support senior mental health and who are partnering with the libraries to get the support to the community. Chesapeake Public Schools is working with grandfamilies programs to help those seniors raising their grandchildren or to get supports to help young students learn.

