

# HENNEPIN COUNTY AGING INITIATIVE

## Community Focus Group Project: Baby Boomers and Housing in Hennepin County

Submitted by:

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**Hennepin County**

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Research, Planning & Development Department

## **Focus Group Highlights: Baby Boomers and Housing in Hennepin County**

The purpose of this section is to summarize the data in seven focus group interviews with 42 Baby Boomer residents of Hennepin County. The purpose of the interviews was to describe the participants' housing and community concerns, expectations, and plans for aging. Based on literature suggesting that the youngest Boomers are not concerned with issues of aging, we focused the interviews on leading edge and middle Boomers; those between the ages of 55 and 65. These findings are intended to increase understanding of Boomers and inform Hennepin County planners in supporting the changing physical, emotional, and social needs of residents as they age within their neighborhoods and communities.

### **Key Themes from Focus Groups**

The primary themes expressed by 42 Hennepin County residents between the ages of 55 and 65 are presented below. Questions in the structured focus group interviews centered on housing concerns, plans for housing, perceptions of senior housing alternatives, access to housing information, and transportation. A discussion of the analysis and findings with select participant quotes follows.

- 1) The participants—Boomers residing in Hennepin County—varied in their expectations and plans for the future. The most frequently expressed concerns were about uncertainty concerning individual futures and community resources. It was difficult for participants to predict their financial and physical well-being, as well as how they would access services and options in housing. We intentionally recruited participants who had low-incomes, were immigrants, and individuals of color. The participants were heterogeneous in demographic characteristics, however several general concerns about aging emerged: affordability; access to public transportation, retail, and services; and isolation.
- 2) Participants in stable relationships or stable housing, including subsidized housing, assumed their lives and housing would remain stable. Single individuals and individuals of color were more likely to have thought about aging and how they will live. Singles were more likely than married individuals to have considered housing alternatives. Several individuals of color concluded that their lives would not extend 10 and 20 years in the future.
- 3) The majority of participants expected to remain in Hennepin County, generally in their current neighborhood. Some mentioned moving to warmer climates or to small, out-state communities. Those who considered a change in housing mentioned townhouse, condo, or apartment units. Concerns about changing residences included the need for help with maintenance, losing access to gardening and room for hobbies, needing to sort and discard possessions, and family responsibilities.

- 4) The term “senior housing” had negative connotations. Responses described housing that was dense with small living units, isolating, and expensive. Concerns were also expressed about the social environment in a concentration of older, failing residents and potential abuse. Alternatively several participants characterized “age-segregated” senior developments as communities with specialized services, activities, and an age-supportive culture.
- 5) Participants expressed that the complexity of searching for and evaluating housing options was often overwhelming. The Internet was the primary source of information about senior housing; additional information sources included word of mouth, libraries, and traditional media. Participants wished for more unbiased information and efficient coordinated access and intake processes to facilitate their own search for senior housing as well as to assist parents in finding housing and services.
- 6) Participants were influenced by their parents’ experiences regarding health and housing, often because they had been involved in their parents’ decisions. They were not aware of recent changes in senior housing options nor are current recipients of housing subsidies aware of potential changes to programs due to diminishing public funds.
- 7) Participants recognized the advantages to aging in a single-level home; several mentioned they might need to move or they were effectively living on a single floor in their current multi-story house. Many had helped modify their parents’ homes with grab bars. Most home modification concerns centered on mobility issues; there seemed to be little awareness of other safety and convenience options. Renters were not aware of rights to modify rental housing.
- 8) The majority of participants relied on their personal cars to meet the demands of work, family care giving, and shopping. Many mentioned using public transportation to get to or around downtown Minneapolis. Barriers to using public transportation included lack of service in suburbs, time required to make transfers, safety concerns, and reduced nighttime buses. Many recognized the health benefits of biking and walking, but weather made it difficult not to rely on other modes of transportation.
- 9) Participants had many ideas for Hennepin County regarding their future housing needs. The majority suggested that individuals from their age group and representatives from diverse backgrounds and neighborhoods serve on planning committees and participate in additional conversations about planning for Boomers.

## **Introduction and Overview**

Our goal was to understand how Baby Boomers residing in Hennepin County think about and plan for their impending needs for housing, transportation, and services. We wanted to describe their plans and expectations ten and twenty years in the future, perceptions of senior housing, and their sources of information. Because we identified a lack of literature on diverse and marginalized subgroups of Baby Boomers, we were especially interested in the attitudes of low-income individuals, immigrants, persons of color, and unmarried individuals.

The findings from seven focus groups with 42 participants should not be generalized to all Baby Boomers living in Hennepin County nor should they be interpreted as answering all questions around planning housing, service, and transportation in Hennepin County. The study provides insights into the expectations, needs, and perceptions of Boomers with critical needs, many who rely on County and other public programs to meet their needs as they age.

## **Procedures**

The data were the participants' own words in response to semi-structured interview questions (see the Appendix). Seven focus groups were conducted; 42 individuals participated. We held seven separate focus group sessions in Bloomington, Saint Louis Park (two sessions), Brooklyn Park, East Lake Street in Minneapolis, downtown Minneapolis and Cedar Riverside. Participants were personally invited by a church staff member at Brooklyn Park, the Skyway Center Director and a volunteer with Volunteers of America at Cedar Riverside. The number of participants in each focus group ranged from 3 to 13 individuals. Participants were recruited with flyers in the Oxford library in Bloomington and East Lake Street library in Minneapolis. The flyer explained the purpose of the focus group, the time and place, the incentive (a \$25 gift card), and a phone number to call to RSVP. The Institutional Review Board consent form from the University of Minnesota was reviewed with participants who signed the form and completed a short demographic questionnaire at the beginning of the focus group. Two researchers were present at each session, one to moderate the session and the other to take written field notes as a reference to the transcripts. The one hour focus groups were audio-taped with a digital recorder and transcribed.

Fifty-two percent of the participants were of color. The mean age was 57 years and ranged between 44 and 69 years of age. The mean length of residence in Hennepin County was 26 years and ranged from 2 months to 62 years. There were 29 (69%) females. Within each focus group, the participants were very similar by characteristics such as race, gender, and our perception of their income (income was not asked on the questionnaire). Housing arrangements were varied, 20 (48%) were renting, 18 (43%) owned, 2 lived rent free, 1 had a lease to own arrangement, and 1 did not provide information on housing type and tenure.

The data analyzed were the participants' own words in response to semi-structured interview questions (see Appendix). The analytic strategy utilized a systematic approach. First, transcripts were independently read several times by each of three researchers. Transcribed statements were then organized in a matrix by the interview questions that had been asked so that we could view responses to a question simultaneously across the focus groups. The matrix also was reviewed to

identify themes that emerged from the questions. Significant statements were highlighted and theoretical categories were identified (Bloomberg & Volpe, 2008). Using the theoretical category statements we developed a table to help identify formulated meanings. Formulated meanings were categorized into themes, themes and statements were then compared across focus groups. The themes were related to the concepts identified in the literature review. The approach was organized and flexible, the matrix and tables helped identify “big ideas” without overlooking themes related to demographic subgroups (Patton, 1997).

## **Findings: Top Housing Concerns**

### **Overview**

Participants easily articulated top housing concerns: a lack of financial resources, inability to predict future health problems, and a lack of access to unbiased information. They were trying to assess the issues and knew, as one participant indicated, that “*it’s best to prepare for the future today.*” They were familiar with the consequences of not planning. Another participant said, “*I think the experience comes from most of us have had parents that we’ve had to deal with or help or grandparents that we’ve had to assist with through their final stages, or even in illnesses or just age right now. And you’ve got to learn something from that. You can’t be involved in that and not learn something from [it].*” Our participants understood the ramifications of not planning, however they felt the tasks associated with planning could be overwhelming.

### **Most Important Housing Issues when Growing Older**

In every focus group, the concerns over affordability were evident. However, it was mentioned in varying degrees. For some groups with of lower incomes, it was evident that they had struggled with affordability before and felt the issue would continue. Housing affordability was related to their concerns about their security. One participant shared her situation,

*I always say money’s shrinking and everything’s going up all the time. So when I moved into my house it was \$800 for taxes, now it’s almost \$3,000. It’s just that I live in a house the size of a garage. It was built before electricity. It has a tiny, it’s from before electricity was invented, there’s a hole in the wall and a pot belly stove and a vent where the heat raise and they used to have an outhouse so I think those costs are high but I mean, we’re part of a community whether we like it or not and where I live half the people don’t work anymore but they are supporting the schools and I think for our ward it used to be half the federal and half but now the whole community actually has to support the school and I actually think it’s kinda a burden when you’re not working and you don’t have kids 20, 30 years later. I’ve talked to people who had to leave their house ‘cause they could not afford to live in it. . . . The water bill is high, I hardly use any water, it’s 100 bucks every two months.*

The issue of accessibility was emphasized and characterized in three ways. First, accessibility to affordable public transportation was important, i.e., one day passes allow individuals to run all of their errands on one day rather than in a two and one-half hour limit under a single fare. Second, accessibility to stores, cultural amenities, the library, the hospital, etc., was important as these

community attributes allow individuals to stay engaged and receive the services they need. And, third, physical accessibility of the housing unit was important. The participants were thinking about “aging in place” and mentioned single-level living with wider doorways and hallways. They also wanted to be sure that friends who used a wheelchair could visit. As one participant stated:

*You want to make that accessible so they can get around in your house. You know, you're a certain age, more than likely you're going to have some friends of a certain age so you want to make it accessible. You still want to have a good time.”*

Another participant was frustrated that wheelchairs often dominate accessibility issues; she has a brother who is deaf and has not been able to find an affordable phone so that she can call him. Other participants were concerned about declining eyesight and maneuvering within their environment.

Personal safety was mentioned frequently. Participants had a variety of safety issues including neighborhood safety, concerns about waiting for buses after dark, safety when around other housing complex residents, and the security of their individual unit.

Important concepts related to safety and security was peace and quiet. Participants wanted home to be a quiet space, where they did not hear their neighbors and where they did not worry about bothering their neighbors with noise. One participant clearly articulated the importance of both the housing and neighborhood environments,

*If you don't have peace you cannot leave the house or the apartment. If your neighbor is crazy you cannot live there. That's no life; if it's beautiful but the neighbor is no good. It's better to take an ugly house but the neighbor(hood) is peace. That is right. Peace is the life. Beautiful house is not enough. The house is not attached to my body but the peace makes me peace in the life. Beautiful is nothing. Peace is the life. You have to have security.*

Climate was mentioned several times. Many participants felt it would be easier to live in a warm climate, however family and friends were strong anchors keeping them in this area. They also wanted to live in a clean building. Desired design features in a home included natural light and direct access to outdoors, the connection to the out of doors was important to our participants.

Participants were concerned that they would not have anyone to help them with small and large tasks. They mentioned the possibility of need help with relatively small tasks such as changing a light bulb in the ceiling. Participants in multi-family housing shared that maintenance workers were slow to get to small jobs, and they are sometimes charged for services. Living in a facility in which they did not have to do their own outdoor maintenance was desired. More than one focus group, especially single female participants, mentioned that being in a community where members helped one another was desired. They often mentioned fear about being alone and isolated; most participants wanted to be part of a supportive community.



## Barriers to Living in Desired Housing in the Future

Participants also discussed what they thought could prevent them from attaining the type of housing and community they desired. The greatest concerns were lack of money and jobs as well as their future health. As one participant indicated: “*So I feel fairly comfortable financially, but I don’t know how my health is going to last.*” Another participant felt very strapped financially:

*No retirement. No retirement money. There's nothing left. I have used up all my savings that I had. I used up everything. For years I didn't have a job, period. I went to different states. I went to seven different states to find a job, and it just did not work, and I have all kinds of skill and education and things like that. Experience. Many years. Working in nonprofits. I was a change agent. I sat on [organization for confidentiality] for eight years. They set up programs because of my input, because I was advocating in the community, and I'd tell them what needs to be done. But it's really hard for seniors when they don't have either the money or the resources or the retirement. It's all gone.*

Many participants who were homeowners felt constrained from moving or altering their home because their homes had lost market value. One group discussed a community based program that remodeled her mother’s home to allow it to be accessible. Another brought up the option of reverse mortgages as a way to obtain funds; most were not in favor of reverse mortgages. As one participant explained, “*I would want that home to be left for my kids and stuff. So I wouldn’t give it to reverse mortgage because they take your home.*” Another participant expressed, “*I think it would be good to have somebody like, or some place or a hotline or something that’s real and has good intentions to really help people to understand what’s available . . . [not] to come into your house and to have you sign up for something that’s not really appropriate.*”

Some participants were responsible for family members, it was difficult for them to plan for the future, e.g., “*I took an early retirement to take care of my son who's mentally retarded. And I moved here because I was told that they had good programs for retarded citizens. And so that left me without my full benefit.*”

Some participants were confused about available resources to make change a home to make it more accessible, safe, or manageable as well as what senior housing alternatives were available in Hennepin County. Access to information was a barrier (see page **XX** for a discussion of how to help someone to find housing). Different focus groups developed solutions. A participant group mentioned creating a place where seniors could go:

*A clearinghouse, so to speak-- a hub where it would have familiarity with all of the services that are available for seniors, and that would include bus transportation, all-day passes or six-hour passes, which they actually have . . . and different housing options, or set-asides, which are available in all buildings under construction. But if you don't know about those things, then you're left thinking, ‘Well, it's just not available.’ So somebody goes over here and they'll give you a pile of papers, and you're overwhelmed with all these papers, rather than an individual who will advocate and say, ‘Well, you know, I can sort through these services better because I'm more knowledgeable about all these services because I represent the clearinghouse of services. So I know about the volunteers on college campuses. I know*

*about the volunteers in high schools. I know about the volunteers in churches. I know about all kinds of resources, because that's what I do. I'm the clearinghouse.' So if there was an organization or some kind of representation like that, I think that would go to a large extent to serving the senior citizens with perhaps resources that are there, but just not being utilized.*

## **Findings: Expectations of Future Housing**

### **Overview**

It appeared from the discussion, that the participants had thought about their future and could project a desired type of housing and location they would like in 10 years. They thought that they would still be living independently and either in the same dwelling or a smaller independent unit. Some participants, currently renting, were hoping to live in a single family home, either owned or rented, in 10 years. The participants were at various stages of their “housing careers.” Thinking of 20 years into the future was more difficult—some assumed they would no longer be living, others could not envision any changes. The majority of participants, whether in 10 or 20 years, felt they would still be living in Hennepin County, although others were contemplating a move to a warmer state especially if family members lived there.

### **Expectations of Housing in 10 Years**

Many of the participants in suburban communities lived in single family housing. There was tendency for the suburban single family dwellers and married couples to expect to continue to live in their current home for at least the next 10 years. However, many of the unmarried participants currently living in suburban single family houses expected to make a move to a townhome or apartment. In general, those considering a move saw themselves in a townhouse or condominium. Association fees were mentioned as a potential problem compared to continuing to live in their single family home. While some participants enjoyed gardening activities, others did not want to be responsible for yard work and snow removal in 10 years.

Many single participants were already living in a townhome or apartment and expected to stay there. However, some participants who were currently renting an apartment hoped to move to an owned condominium or even a single family house and saw it as a “move up”. Considerations of moving was influenced by resources. For one low income participant, there were not many options available for her:

*I don't know where I want to be, but I'm not happy where I'm at, because I live in a subsidized high-rise and it becoming kind of unsafe. Not only that, we have this restaurant that plays their music really loud, from eleven to two o'clock on--about three days a week they keep you awake. And so I'm in this group--we're trying to work to stop that. And we're trying to work, in my building, to stop-- to make it more safe. Because we don't have security there. And I really don't like high-rise, but when I first moved here, I had my own apartment, and I was hoping to keep my son, who's handicapped, with me. So that was two incomes: my retirement and his income. So I figured that I could eventually get a house. That didn't work.*



*Bad luck hit. So I don't like high-rise. I really don't. I'd rather have a place, like she said, where you can go out, have a garden. You can barbecue if you want to barbecue two o'clock in the morning. Whatever. I just--I hate it. I hate where I live. I do. Ten years from now, I don't know where I'm going to be. I'm trying to keep my right mind. I hope I don't be dead, but I might.*

[Facilitator asked: So you're definitely going to be moving?]

*I don't know. It's nowhere to move, when you're poor, you ain't got no money. Where can you move?*

Many of the participants assumed that their relationships and housing would continue for the next 10 years. A few still had young children at home or adult children with disabilities or financial hardships living with them. Others were considering living with other family members such as an elderly mother to be able to better care for her, or an adult child with or without children so that the participants could downsize their housing. Several single participants expressed hopes to be married and living with a new spouse.

### **Expectations of Housing in 20 Years**

When asked to think about their lives 20 years into the future, some participants assumed that they would have died. Among the urban group of African Americans, all eight participants replied that they would be dead. On the other hand, some participants expected they would still be working and did not anticipate that their 20 year plan would be any different from their 10 year plan. Other participants brought up their parents' experiences of longevity and health problems and were planning futures based on the parents' experiences. Two examples of variance in response:

*Both my parents are now deceased and I went through the last 5 years of their lives with both of them in and out of the nursing home and it was supposed to be one bedrooms but . . . you know just the quality of life, when I took my Dad there from the hospital I was like: well now what, he couldn't care for himself and there was just no, I mean sometimes you get a really nice aid and they'll take a little time and come talk to them but other than that, it's kinda like they're just dumped there*

*Actually I do [think about 20 years into the future], and if we're talking about expectations, what we'd like, I don't know, my Dad was pretty vibrant, except that he had Alzheimer's until he was in his mid 80s.*

Some participants imagined living in senior housing, others thought they would have moved to their retirement home mentioned examples include a small home in Minnesota, Hawaii, or a southern state. Senior housing, including assisted housing, was more frequently mentioned by low income participants. One participant commented:

*I could see possibly needing assisted living and I don't know if I'm going to be able to afford it. I mean even going back to the ten years I don't even know if I'll be able to afford to stay in the place that I'm in, I say that's what I want but the association fees are so high and my*

*income is so limited that I don't even know if that's feasible let alone paying for an assisted living, or over 55 with services.*

Other participants shared examples of desired housing situations from other places they had lived, for example:

*Before I came back here from California I met this gal in this class I was taking and she said that ideas [of cooperatives] was starting to really grab hold and there were starting to be these cooperative living communities and I don't know if that's even the right word, but that really appealed to me, too, and my feeling would be, I'm lucky cause I've got some really nice relatives, so I could possibly see maybe moving to where they are. I also have two sons and I don't know so I've sort of toyed with the idea of moving sort of closer by them. So in twenty years I could see maybe more of a need or desire to be closer to members of family or maybe in a cooperative living. I think it's great to have a group connection. That really appeals to me.*

### **Geographic Location in the Future**

Most participants indicated they enjoyed Minnesota, specifically Hennepin County, and its amenities and felt that they could continue to endure the cold, snow, and ice. Many wanted to remain close to family in Minnesota. Among participants who indicated that they would probably not live in Minnesota, the primary reasons were cold weather and strong family ties elsewhere. For example, a recent immigrant from Somali hoped to return to Somali. Others had lived elsewhere and/or still had family in warmer states and were considering a move to West Virginia, South Carolina, Florida, or Georgia be with to family,

Many of the groups discussed moving to a small town. For example, one participant shared:

*I'd like to live down south, in [place name to retain confidentiality of participant]. Because it's nice, it's quiet. It's a world so totally different from here. And I've lived basically in a city all my life, and I spent a little time down south a few years ago and it's just-- it's a different world. And you can plant a garden and you can have fruit trees. You can come outside. Where I was staying with a friend, we would go outside to the fig trees and eat our breakfast. And so, you know. She had a pear tree, an orange tree, a lemon tree. So we'd just go outside and get our fruit. And then they trade. Like if I got too many tomatoes, you'd give them to your neighbors, and that neighborly thing is still going on down there. And that's what I like. I was never one for the south. You couldn't push me to go to the south. My family would invite me and try to take me down, and I was like, 'No.' Now that I'm about to be an older adult and went down south, I didn't want to leave.*

## **Findings: Perceptions of Senior Housing and How to Find Information**

### **Overview**

Most participants, except for those that currently resided in subsidized senior housing, did not have a favorable perception of senior housing. They recognized that senior housing encompasses

a variety of options, but that also increased the complexity of their search. They realized that they may need it in the future, but most had not begun to explore their options. Many were not aware of the current regulations regarding senior housing and used past experiences of friends and families as their sources of information. They were confident in using the computer to conduct searches, but did not have efficient search methods or resources to find out about options available for them.

### **Perceptions of “Senior Housing” and its Residents**

The notion of “senior housing” evoked many strong and negative reactions from the participants. Phrases that were voiced immediately when asked how they would describe senior housing included:

- *high-rise*
- *tiny apartment*
- *expensive*
- *isolation*
- *a bunch of old people and it smells*
- *social security people*
- *depressing with a lot of people with walkers and wheelchairs*
- *fear, horrific experiences, abuse*

An interchange between two participants was poignant in their characterization of senior housing:

[first participant] *That's what I was talking about, the isolation, in those houses. My mother moved--she just moved out of one building in [community removed by authors to retain confidentiality of participant] to [state removed by authors to retain confidentiality of participant] because too many people were dying there. She said Death had an apartment up in there, because there was just--*  
[second participant] *We've had about 10 deaths.*  
[first participant] *It's too much. And it's hard to try to get to know somebody when you're older, and then all of the sudden you're talking to them today and then they're dead tomorrow. That's hard.*

For others, the term “assisted living” came to mind and some participants indicated that it meant to them that “*you had to do it,*” representing a loss of control and independence. The label, “assisted living,” was problematic for some because the participants interpreted it as defining who the residents rather than describing a housing alternative. A participant suggested, “*call it something else, I don't care what but I don't want to be around a bunch of old people and I have white hair.*”

There was a range of perceptions of senior housing. It was characterized as very expensive, “*they all have pretty names like Golden Pond or something . . . and it's like 3 to 4 thousand a month.*” In contrast, other participants described assisted as a facility that provides medical care for poor individuals, “*in senior houses, if the man or the woman is 55 . . . and sick, if he is mentally sick,*

*if his body is sick, and if he has no money to pay rent the government take care of him in adult houses, or public house; so I think they are very important.”* Participants eventually discussed that “senior housing” is “*a big umbrella and assisted living is one of the multiple options that falls under it.*”

Other participants described a social perspective of assisted living:

*A community where people come together and there are services like sometimes there is food but there is flexibility and they tend to provide activities and transportation and it depends on what the community needs.*

*When I think about senior living I think of like a community, like it can be either, you know, assisted where there's like someone there to help for health purposes. Or people that can live on their own but just in an environment. And then just time to be around people kind of your own and your own culture of aging and be able to do stuff.*

### **Perceptions of Age-segregated Housing Communities**

Participants, especially residents in suburban communities, knew of age-segregated communities. For example, one participant defined them as “*terrific places; they have buses that go everywhere, an exercise room, beauty shop, the banker comes, they all play cards, they're going off to movies, they're going off on bus trips.*” Another said, “*if you give everything you own you can live here. It's just some people will do that and they don't care but to me there's something wrong with that picture.*”

Participants also expressed problems with age-segregated communities and a loss of independence and self-determination. One female participant caring for a son with disabilities feels constrained by few options available to her family. Another participant helps out with her grandchildren and shared her experience:

*There'd be a group of us that have grandchildren that come there, and then there was always somebody complaining who just didn't like children period, and they didn't mind letting you know. So that made it feel very uncomfortable having them there. But a lot of seniors are connected with their grandchildren, for one reason or another. Because I help my son and daughter by babysitting because they have to leave early in the morning and they have to drop my granddaughter off, and I can get her ready for school, and the school bus stops right in front. But when you have somebody complaining or threatening that you're going to be evicted if you--if they catch you with the kids all the time. But I mean, I have to do that five days a week because I'm helping them out, and they're helping me out, giving me extra change. So I'd like to be in a place where that's not a big issue. But I'd like a building that has a playground or something close by too that I wouldn't have to worry about disturbing anybody. For the most part, they're very quiet, and I always take them to the park. But there's always that fear in the back of my mind that somebody's going to say or do something that will cause me to be put out of the building. And if it's the only affordable place around--I don't like it, but I know it's affordable. I can't afford to be anywhere else.*

## **How They Would Help Someone of 60 or 80 Years of Age to Find Housing Information**

To look for housing or recommend to a friend where to look for housing, participants immediately mentioned the internet and recommended visiting Craig's List, the Web site of the community in which they want to live, and other sites by "Googling" "senior housing." Traditional sources of information mentioned included word of mouth, the newspaper, the yellow pages, libraries, and AARP magazines. Participants who were of low income and of color mentioned the Housing Authority, reflecting their own housing provider. And others mentioned the Minnesota Board of Aging, "Senior Housing Minneapolis" and attending open houses.

Participants described a search process that frequently would begin with the community, then price, the type of structure and characteristics such as the number of floors, security, elevator, etc., and available services or activities. If helping someone much older, they felt they would need to provide more guidance. A participant, who had formerly been homeless, shared a frustrating story of help that consisted of a list of potential properties. She had to visit each one individually and fill out the same information at each site. Another characterized that type of incident as "*paper-pushing at seniors*" where the older person is given a lot of printed information without assistance to help sort through the options, nor anyone to explain the process or serve as their advocate.

Single female heads of households were frustrated that there were not more creative and cooperative housing options. For instance, examples were mentioned from California and France, where young adults are paired with older adults so that the young adult has affordable housing and the older adult has someone to help maintain the home (e.g., changing a light bulb in the ceiling).

Unless a participant was currently living in senior housing, they were not informed about where to begin to search efficiently for senior housing. Single female heads of households mentioned a resource fair focused on their particular needs would be very useful. Most of the groups discussed the need for a single source of information on the internet about housing options in Hennepin County; they were not aware that such a source currently exists.

## **Findings: Housing Modifications**

### **Overview**

Participants understood the features that would make it easier to get around in their houses as they age. But, those in apartments were reliant on the building owner to add features, and most believe the owner would make changes. Some of the participants had modified their parents' homes, but had not initiated any changes in their own homes. In part, that may be because they plan to move when they are older (see summary on future housing choices starting on page 25).

## **Current Features in Their Housing**

Participants recognized the advantages of one-level living. One participant who's daughter had moved out shared that except for laundry, she lives on the main floor. Individuals living in apartments felt that they could continue living there, even if they needed to use a wheelchair. However, some activities of daily living, e.g., cleaning the shower, would be difficult to do as they age.

## **Modifications Made to Current Housing**

Participants had experiences of making modifications for older relatives. A modification that was done for an uncle was to install handrails in the bathroom by the toilet and in the shower, but the participant now uses them as well. One participant had handrails installed for the apartment her mother lived in, and she was planning on installing them in her father's house as well which she would be inheriting. These modifications are minimal in terms of what could be done to the homes. Participants seemed more likely to move to housing that was more accessible than to make modifications to their current housing.

## **Features Desired in Housing**

One group's discussion focused more on what they identified as features in order to live in their dwelling as long as possible. The items they felt were most important primarily related to ambulatory accessibility, although a few items were mentioned about the kitchen and security:

- Grab bars
- A ramp
- Motion activated lights
- Less stairs
- First floor living
- One level living
- Laundry room on the same floor as the bedrooms
- Walk-in shower
- Walk-in bathtub
- Wider doors to the bathroom
- A hot tub and a shallow exercise pool(they also discussed using the walk-in bathtub) f
- Kitchen ranges with large numbers on the controls for low-sighted people
- Kitchen cabinets that are not too high or low; accessible without having to reach high or bend low
- Security system with a call alert
- Intercom system

## **Issues**

In discussing the topic of modifications, participants in some groups brought up issues or barriers that prevented them from making modifications where they are currently living. For those living



in apartments, it was noted that, while they had grab bars for the bathtub, other modifications were not possible, stating, “*Well, it's not up to us. It's up to the owners of the building.*”

The decision to make modifications to remain in their housing was complicated by the option to move. One participant was planning on making some modifications and funding it through an equity line of credit on the home and paying it off over the next 30 years, but this participant was also considering selling the house.

The discussions frequently focused on physical modifications to a home, and while, many participants reacted negatively to the term “senior housing” (see discussion on perceptions of senior housing, page 28), they were interested in simple modifications to allow them to stay independent in their homes. However, one participant shared a glimpse of the issues that complicate decisions about changes such as modifying housing or moving:

*Well for me if I could just get it cleaned up cause it's like an obstacle course in there (ha ha) and I laugh but I mean it's serious because when I get older and maybe more prone to falling I've got to get it, but I mean with my physical limitations I haven't been able to do the upkeep of it to keep it at the level it is let alone doing modifications so that's another concern.*

## **Findings: Transportation**

### **Overview**

The majority of participants in this study lived independently, owned a car, and enjoyed the flexibility of having a car. Because of their current lifestyles—working, caring for parents and/or grandchildren, and shopping—the car provided them with flexibility and independence. Alternatively a participant in Brooklyn Park felt that buses allowed her a level of independence she would not have if she relied on family and friends for transportation. She also commented, “*I appreciate being able to just sit back and let somebody else worry about traffic.*” Those who relied on public transportation tended to live in urban Minneapolis and had educated themselves on how to use it as efficiently as possible. The lack of service in suburban areas, the time required for additional transfers, safety concerns, and the limited nighttime schedule kept many from using public transportation. Many participants were interested in biking or walking to get to places because they recognized the health benefits of doing so, but considered it a secondary mode of transportation.

### **Types of Transportation Used**

The most frequent mode of transportation of participants was a car. However, many participants who had the option of a car did take public transportation, either the bus or the train, to work when their schedule and their place of employment coordinated with the availability of public transportation. When they did not have a car because it had been stolen or needed repairs, they commented on the convenience of public transportation.

The reasons for using a car, even when other forms of transportation were available, were because of the convenience, independence, and flexibility in scheduling needs. The

disadvantages of driving a car were paying for parking downtown and the cost of upkeep. Examples of the car importance in their lives were expressed by some participants:

*I've got two aging parents, I live with one and the other lives within, I think, three miles, and sometimes I need to sort of pick up and go over to the other's house.*

*When I worked downtown I used to bus rather than drive, but now I work part-time out in Apple Valley and I don't have any option. Except to drive, there's no way to get there by bus.*

*Where I live the bus service stops at like 6:00, and I'm working the night shift so unless I get creative and go like a mile, then I could maybe catch a bus.*

*I like to take [my] car cause when I need to take bus, need to take two bus[es], need to walk someplace for next bus. Go two time, maybe bus one hour, my car is 20 to 30 minutes.*

For those who lived downtown, public transportation was used frequently. For many it appeared to be the only form of transportation aside from walking or relying on someone else rides. Many others preferred to walk and felt it improved their physical and mental health, but it was not the primary mode of transportation for getting to work or shopping. More frequently, it appeared to be a recreational activity.

### **Alternatives to Driving a Car**

Suburban participants, who relied on their cars, indicated that if they were unable to drive, they might take the bus, but would prefer to get a ride from someone, although they also recognized the imposition on others. Participants were concerned about the service schedule and length of time to get to locations by public transportation. They hoped that bus service for seniors would be available to them in the future. Several participants complained about Metro Mobility; complaints included slow service and inconvenient schedules. For example, one participant shared that patients at the clinic where she works wait hours before and after appointments for Metro Mobility.

Participants thought that they might choose a bicycle in good weather if they had access to bike trails in their suburban community and bicycling would only be an option for them in the summer and in good weather. One participant thought that a motorbike could be an alternative, but there was a lot of confusion over how one obtains a license.

### **Use of Public Transportation**

A number of individuals owned cars but preferred to take the bus for a variety of reasons. For those who relied on public transportation or would like to, factors that made it difficult included inadequate service, lack of perceived safety, and their own physical stamina. Safety was a concern for many of the participants; females did not want to walk to and from a bus stop after

dark—five blocks was considered too far. Others had chronic health problems that made it painful for them to walk to a bus stop. Examples of comments included:

*If I want to go anywhere within the city, it's very accessible. But if I have to go out further, like if I have to be seen by a specialist, then it gets kind of complicated because buses that run out towards the suburbs don't always run out that frequently, and then you have to make sure you get the right letter bus.*

*When I was sharing a car with my Mother, when I was taking care of her and she had somewhere to go, I would [take the bus], but I have physical issues and it's real hard for me—jerking my neck and stuff.*

*Now that I live over south [Minneapolis], I like the bus system a lot better. When I was living up north [Minneapolis] and I'd ride the number 5 bus, it was kind of dangerous, kind of rowdy. It was noisy. And it's just very not safe. Now that they have more police on the number 5 route, it's gotten a little better. But I've watched it over the years get really bad.*

Another participant indicated that getting to and from the buses downtown was very safe because “there's [sic] cameras on every street downtown and the police [are] always patrolling.”

More than one group of participants mentioned problems of using public transportation in the winter, especially for their friends who use wheelchairs. The snow banks on the streets made it very difficult to board buses, and for many of the participants, there are not bus shelters at their closest stops. A participant who sometimes uses the bus was surprised to board a bus one day that did not require any steps up to the seats, adding, “it was just the strangest sensation and I thought if I was in a wheelchair this would be great.”

### **Walking and Biking**

Most participants expressed the desire to walk, and some to bike. Walking was perceived as a way to maintain their health, but for others, health problems restricted their ability to walk.

*I love walking, but I suffer with shortness of breath, and I don't know if it's the air here or what. Because I'm from the south, and we walk. Everybody in town walk from one part of town to the next. I got up here, I got shortness of breath. I don't know if this asthma's triggered it, or what it is.*

The investment in bike paths and trails was recognized by at least one participant as making it easier to ride a bike, and safer. Some female participants were afraid of bicycles and others were not comfortable to ride on busy roadways with motorized vehicles. And, an interesting comment from one participant was, “I am tired of the pressure on us to stay active; I am getting old and I wish others would just let me be old.”

## Findings: Participants' Ideas for Hennepin County

### Overview

Participants had many ideas for how the County could facilitate their future housing needs. They had some unique ideas that would not necessarily be possible under current funding rules and regulations, but many were receptive to changing current practices. They also wanted to be included when the County establishes planning committees. Our participants emphasized that seniors need opportunities to voice their opinions. And, that the members of planning committees or task forces should be from all diverse backgrounds and neighborhoods.

### Important Things Hennepin County Could Do

More than one group emphasized the continuing need for affordable housing, and that it affordable senior housing should not be in high-rises. One focus group did not want more age-segregated high-rises. One participant thoughtfully spoke about a program where subsidized apartments designated for older persons could be scattered among many different properties, including market rate buildings; there might be two to five units for seniors in a building. These would be units that the County “owned” and leased to qualified older residents. He felt this alternative to designated senior buildings could help to remove the stigma associated with large subsidized housing projects. Others would like to extend the concept to small homes where visiting family members and grandchildren are welcomed and accommodated without disturbing neighbors. A participant recommended finding a way for individuals to “buy into” a property now while they were still working so that they could manage the costs more easily when on a fixed income in the future.

Participants felt access to the out of doors was important; access to small gardens was suggested so seniors could remain physically and mentally engaged—active in individual pursuits, social activities, or doing something with their hands. Another participant was discouraged that when programs are planned, they are not scheduled to accommodate different lifestyles or routines, stating:

*I've noticed a lot of senior things are geared toward doing things in the morning and I'm a night owl. I'm actually nocturnal so I'd go to senior center there's actually some classes that I'd enjoy but they're all too early, I'd never get there until later, so if everything was great but it was all geared toward the morning I'd be just as isolated as if they didn't have them.*

Senior housing need to be developed as an integral part of a larger residential community; it should not be sited in commercial areas or among many high rises. Transportation needs to be available, either very near public transportation or specialized vans provided to take groups of seniors shopping or to the theater and other cultural activities. It is important to provide transportation for a variety of needs and limit specialized transportation for medical needs.

A low income group of participants tended to focus on resources they likely received from Hennepin County. They saw Hennepin County as the entity responsible for helping people; they

valued the medical services, food stamps, and public housing. They also understood that there were public funds that supported those services and they were allowed their rightful portion and not more. One participant characterized it was like stealing from other citizens if you were not truthful on the application and received more than an appropriate share. Healthcare was also brought up by other groups as well. Suggestions ranged from free healthcare to healthcare stipends or discounts.

### **Conclusion: Focus Group**

In many aspects our findings from focus group interviews with subgroups of Boomers in Hennepin County mirror the literature. In general, our participants want to age in their current home and community; they prefer a single-family unit with access to green space. They believe the neighborhood setting is an important determinant of appropriate housing. The majority rely on their own car for transportation. They are concerned about safety. With the exception of grab bars there is little awareness of home modifications that can support mobility and safety in independent living. Most of our participants agreed with the negative connotations of alternative senior housing. Although some participants thought benefits to alternative housing might include less responsibility for maintenance and recognized one-level living might make life easier as they age.

Similar to the literature on the general population of Boomers, many of our participants are not planning for their future needs. However we see a tendency for low-income participants, participants of color, unmarried participants, and participants who have been involved with aging parents to think about their future needs and consider moves to smaller units and/or senior retirement communities. Our participants describe how senior housing could be improved. Comments from our participants convince us that the process of seeking unbiased information and evaluating options is overwhelming.

Our participants made several salient suggestions. They think information should be available and identified as reliable. Furthermore, they want to be involved or their voices represented as plans are made for their future.

## **Appendix: Focus Group Interview Script**

**Date:** \_\_\_\_\_ **Moderator:** \_\_\_\_\_ **# of Participants:** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Time began:** \_\_\_\_\_ **Time concluded:** \_\_\_\_\_

### ***Introduction (5 MINUTES)***

Welcome and thank you for choosing to participate in this discussion. My name is \_\_\_\_\_ and I will be facilitating today's discussion. I also want to introduce Kelsey Imbertson, who will be helping me today. We are both in the housing studies program at the University of Minnesota.

We have been asked by Hennepin County to find out what residents think about where and how they plan to live as they get older and the services, such as transportation, they think they would need. The information you share with us today will help Hennepin County as they work to meet the needs of residents in the future. We are having discussions like this with several groups around the county. You were recruited to participate because you represent a (single female head of a) household that lives in Hennepin County and you voluntarily responded to the advertisement we posted.

Our discussion will last approximately 60 minutes. We will be recording the discussion because we don't want to miss any of your comments and we want to be sure that our recording is accurate. People often say very helpful things in these discussions and we can't write fast enough to get them all down. We will be on a first name basis tonight, but we won't use any names in our report. You may be assured of complete confidentiality. Our written report will go to Hennepin County, but the audio tape will be destroyed after our report is written.

Before we begin, I want to give a few guidelines.

- We are looking for your honest thoughts and opinions. There are no wrong answers, only different points of view. Your opinions are important so don't worry if you are the only one who thinks a certain way, just be sure to listen and respond respectfully as others share their views.
- We ask that you turn off or silence your phones. If you must respond to a call, please step out and rejoin us as quickly as you can.
- My role as moderator will be to guide the discussion. I will try to be sure that only one person is speaking at a time and, in order for us to cover all of the questions, I may need to interrupt at times to move the conversation along.
- Finally, we ask that you do not discuss with others outside this room what others have shared tonight.



Okay, let's begin.

**Turn on tape recorder.**

We have placed name cards on the table in front of you to help us remember each other's names. Let's find out some more about each other by going around the table. Tell us your name and one thing that you like most about living in Hennepin County.

**CUE TRANSITION:** Now, I'd like to touch on a topic related to housing and talk a little bit about transportation and getting from home to where you go every day.

1. Thinking about how you typically get to the places you go, what is the main type of transportation for the majority of trips you make? What do you enjoy about that type of transportation?

1a. *Follow-up:* If you were to choose to stop driving or were unable to drive for any period of time, describe how you would get to the places you need to go?

1b. *Follow-up if not mentioned in previous responses:* Do you have access to public transportation – bus or light rail – where you currently live? What makes you choose or not choose to use it?

1c. *Follow-up if not mentioned in previous responses:* Do you walk or bike to get to the places you want to go now? If so, what makes you choose to walk or bike?

**CUE TRANSITION:** Now, for the next few questions, I want you to think about you and your household, **10 years** from now. Picture in your mind where you might be living and who is living with you.

2. Describe the kind of housing you expect to be living in.  
(*Prompt if necessary:* By kind of housing I mean a single family home, townhome, condo, apartment, that kind of thing.)
3. Describe where, 10 years from now, the geographic location you expect to be living.  
(*Prompt if necessary:* Here in Minnesota? Somewhere else in the U.S.? An international location? In a suburb, a small city/town, a rural community?)

4. Again, 10 years from now, describe who would be living with you in that housing and place.

**CUE TRANSITION:** Now, for the next few questions, I want you to think about you and your household, **20 years** from now. Picture in your mind where you might be living and who is living with you.

5. Describe the kind of housing do you expect to be living in.  
(*Prompt if necessary:* By kind of housing I mean single family home, townhome, condo, apartment, that kind of thing.)

6. 20 years from now, where, in terms of your geographic location, do you expect to be living?  
(*Prompt if necessary:* Here in Minnesota? Somewhere else in the U.S.? An international location? In a suburb, a small city/town, or a rural community)

7. Again, 20 years from now, describe who would be living with you in that housing and place.

**CUE TRANSITION:** Having thought about your future living situation, whether 10 or 20 years in the future, the next few questions ask about changes that might be made (*or other prompt if they indicate they would still be in the same home/place*).

8. What types of modifications to your current living space would be useful to make it possible for you to stay there as you age? *Or*, Describe modifications you have made or features in your housing that you feel will allow you to stay in your home long-term.

9. When you think about growing older, what are the top three things related to housing that are important to you?

10. What might prevent you from living in the situation you desire in the future?  
(*Prompt if necessary:* savings; retirement; equity in owned home; family; etc.)

**CUE TRANSITION:** Thank you for helping me to understand your housing opinions so far. Now, I'd like to talk about a particular type of housing.

11. When I say, "senior housing," what does that mean to you? How do you describe it?

12. Describe who lives in “senior housing.” What are they like?
13. What do you think about “age-segregated housing communities” – communities or buildings in which you need to be a certain age to purchase or rent a residence?
14. If you had a friend in their 60s who was looking for housing, where would you suggest they go for information?
15. If you had a friend in their 80s, where would you suggest they go for information about housing?

**CUE TRANSITION:** Since we are doing this project for Hennepin County, I have one more request of you.

16. Suppose that you had one minute to talk to the Hennepin County Board on planning for housing and services in the future. What would you say is the most important thing that they should plan for?

**CUE TRANSITION:** Before we end tonight, we want to summarize what we have heard to be sure that we understand your main thoughts.

*Provide brief summary, using their words and main points.*

Have we missed anything?

Thank you for your participation and for all of the comments you have shared with us today. Be sure to get your gift card before you leave.