Public participation at Committee meetings is encouraged. We request that individuals limit their comments on any single item on the agenda to three minutes. The chosen spokesperson for a group may speak for five minutes.

1. Call to Order/Welcome 1:30
2. Consent Calendar 1:32 – 1:35
3. Public Comment for items not on the Agenda 1:35 – 1:45
4. Alameda County Food Bank Presentation 1:45 – 2:15
6. Consumer Survey 2:45 – 3:50
7. Next Steps 3:50 – 4:00
VISION FOR OLDER ADULTS IN ALAMEDA COUNTY

- respected
- valued
- safe
- affordable
- engaged
- access
- healthcare
- wellness
- housing
- intergenerational
- sense
- useful
- place
- need
- make
- know
- live
- resources
- one number to call
- entire
- important
- involved
- feel
- needs
- emotional
- protect
- occupational
- easy
- active
- age
- model
- physical
- environmental
- health
- support
- community
- dimensions
- activities via
- single payer
- something remaining
- independent
- met
- future
- multidisciplinary
- cognitive
- social
- dignity
- model
- health
- care
 ISSUES FACING OLDER ADULTS IN ALAMEDA COUNTY

- isolation
- access
- cultural barriers
- role change
- housing
- stigma
- transportation
- medical money
- environment
- support
- maintenance coordination
- sidewalks
- financial
- self-advocacy
- health system
- family
- language
- economic
- food cultural barrier
- duplication
- cultural barrier
- financial
- recognition
- health
- finance
- resources security
- psychologicalernet
- treatment
- family
- near poor
- individual health status quo
- options
- anxiety
- near poor
- indivual health status quo
- ssi
- debt
- empowerment
- limits
- financial
- self-advocacy
- income
- affordability
- connection
- limited income
- cost of living
- trust
- public system
- safety
- planning
- connection
- limited income
- cost of living
- trust
- public system
- barriers
- depression
- psychiatric
- limit
- bad experience
- healthy
- children
- vulnerability
- prepared
- role change
- systems
- functional changes
- fear
- professional
- change
- risk
- maintenance coordination
- sidewalks
INTRODUCTION

Please only fill out this survey if you are a resident of Alameda County, age 60 or older. Thank you!

Please complete this 10 – 15 minute survey to help us learn about how Alameda County can be a better place for older adults to live. All information you provide will be confidential and responses will be shared in aggregate. We will be using these results to inform the 2017 - 2020 Alameda County Plan for Older Adults.

I have received consent to answer this survey on behalf of someone else. □ Yes □ No
If YES, what is your relationship to the survey respondent?

1. My age is: ____________________________ □ Decline to state
(Please write in number here, i.e. 65)

2. What city do you live in?
   □ Alameda  □ Fairview
   □ Albany   □ Fremont
   □ Ashland  □ Hayward
   □ Berkeley □ Livermore
   □ Castro Valley  □ Newark
   □ Cherryland □ Oakland
   □ Dublin    □ Piedmont
   □ Emeryville □ Pleasanton
   □ San Leandro
   □ Sunol
   □ Union City
   □ Other ____________________________
   (If not in Alameda County, please do not complete the survey)

Please proceed to the next page.
### AVAILABILITY OF RESOURCES AND SERVICES

#### 3. Are the following resources and services available to you?

<table>
<thead>
<tr>
<th>Resource</th>
<th>Available</th>
<th>Not Available</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Places to socialize that are welcoming (i.e. community centers, community organizations, religious organizations)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Places to socialize that are affordable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fitness and exercise activities that are appropriate for you</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Free or affordable opportunities to learn (i.e. about computers, internet, health, politics)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job opportunities for people my age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opportunities to volunteer in the community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opportunities for participation in local or community decisions (i.e. political events and meetings, town hall meetings, commissions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information about news and events in a language you understand</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A computer that you feel comfortable using</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A trusted source to go to when you have a need (i.e. a service, translation, emotional need)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A trusted source to go to when you can't understand something (i.e. a service, translation, emotional need)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health services that are culturally appropriate and in a language you understand (i.e. primary care, specialty care)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional health services that are culturally appropriate and in a language you understand (i.e. for depression, anxiety)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affordable fresh vegetables and fruit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources that help you to feel safe in the community (i.e. community watch networks or police presence)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clean and maintained sidewalks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safe, well-lit streets and intersections</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A form of transportation that is affordable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A form of transportation that is easy to use</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affordable housing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing that is suited to my needs</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Please proceed to the next page.*
NOW AND IN THE FUTURE

4. Are you concerned about any of the following?
   (If you are answering on behalf of someone else, please answer to the best of your knowledge or leave blank.)

<table>
<thead>
<tr>
<th>&quot;I AM CONCERNED ABOUT...&quot;</th>
<th>Not concerned, feeling confident</th>
<th>Now a concern</th>
<th>May be a concern for the future</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being valued by my community for past and present contributions</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Being included in decision making that affects my lifestyle</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Ability to be a caregiver for someone else</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Ability to financially support the dependents in my life</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Being able to prepare healthy, nutritious food</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Falling (being at risk for falls)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Being able to afford housing as I age</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Being able to stay in my current home as I age</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Having the ability to maintain my home</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Having enough income to meet all my basic needs (i.e. food, medical care, housing, transportation, caregiving, etc.)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Having enough income to save and plan for the future</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Confusion or memory loss that is happening more often or is getting worse</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Feeling anxious or stressed</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Being isolated from others</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

5. Are you interested in volunteering in your community?  ☐ Yes  ☐ No
   If yes, what volunteer opportunities would interest you? ____________________________
   ____________________________
   ____________________________

Thank you, your answers are very helpful! Please proceed to the next page.
### A LITTLE BIT MORE ABOUT YOU...

6. The zip code of my residence is: ____________________________
   (Please write zip code here, i.e. 94605)

7. I am a veteran.  
   □ Yes  □ No
   I am a family member of a veteran.  
   □ Yes  □ No

8. My ethnicity / race is:
   □ Hispanic origin  □ Non-Hispanic origin
   If of Hispanic origin, please specify: □ Mexican □ Central American □ South American
   □ American Indian or Alaskan Native
   □ Asian Indian
   □ Laotian
   □ Black or African American
   □ Cambodian
   □ Chinese
   □ Filipino
   □ Other Asian (specify)
   □ Other Pacific Islander
   □ Multiple Races
   □ Decline to state
   □ Other Race: ____________________________

9. Gender: I identify as...
   □ Male  □ Female  □ Transgender
   □ Heterosexual  □ Homosexual  □ Bisexual

10. Sexuality: I identify as....

11. Please identify your current living arrangement. Check all that apply.
   “I currently live with...”
   □ Myself (Alone)
   □ Spouse/Significant Other
   □ Parents
   □ Child(ren)
   □ Extended family
   □ Friends/Acquaintances
   □ Other: ____________________________

12. What type of housing do you currently live in?
   □ House
   □ Condominium/Townhouse
   □ Apartment
   □ Mobile Home/Trailer
   □ Hotel/Boarding House
   □ Board and Care/Assisted Living
   □ Skilled Nursing Facility
   □ Independent Retirement Community
   □ No residence
   □ Shared
   □ Other: ____________________________

13. Do you have someone who you consider a caregiver? If yes, please indicate all that apply:
   □ No  □ Family/acquaintance  □ In-Home Supportive Services  □ Private paid caregiver
14. Are you a caregiver for someone else?
   - No
   - Yes, someone under age 18
   - Yes, someone age 18-60
   - Yes, someone over age 60

15. The form of transportation that I use is... (Check all that apply)
   - My own vehicle
   - Relatives
   - Friends
   - Public transportation
   - Taxi
   - Para-Transit
   - Volunteer Driver programs
   - Bicycle
   - Walking
   - Other: __________________________

16. How would you describe your current employment situation?
   - Full-time employed
   - Part-time employed
   - Retired
   - Unemployed - not looking for work
   - Unemployed - looking for work

17. Do you experience any of the following functional limitations? Please check all that apply.
   - Hearing
   - Vision
   - Mobility
   - Memory Loss
   - Other: __________________________

18. Do you experience any of the following chronic health issues? Please check all that apply.
   - Cancer
   - Diabetes
   - Heart Disease
   - Stroke
   - Arthritis
   - Obesity
   - Asthma
   - Other: __________________________

19. Do you have any of the following future planning documents?
   - Will
   - Power of Attorney
   - Advanced Health Care Directive
   - Burial Plan
   - Long term care insurance
   - None

20. For statistical purposes only, what is your total estimated yearly income?
   - $0 - $11,770
   - $11,771 - $17,500
   - $17,501 - $26,000
   - $26,001 - $35,000
   - $35,001 - $45,000
   - $45,001 - $60,000
   - $60,001 - $85,000
   - $85,001 and above

Is there anything else you’d like to share or explain? __________________________________________

________________________________________

Thank you for taking the time to share your perspective with us! We value your contribution and look forward to sharing the results. For more information, please visit the Alameda County Area Agency on Aging Planning website.