

COMMUNITY VOICES – A REPORT

INTRODUCTION

Our Purpose

In 2024 the Senior Services Coalition launched the Community Voices project to elevate consumer perspectives in order to inform and drive person-centered, age friendly reform in health and social service systems.

What We Set Out to Do

We interviewed 17 older adults in Alameda County from September 2024 through January 2025. The people we interviewed represented diverse demographics (geography, race and ethnicity, identity, income, language and age) and life experiences (housing situation, level of independence, health status, immigration status, and lived experience). The objective of these interviews was to capture community members perspectives on health and wellbeing, and to understand barriers that challenge their ability to thrive in their communities.

Themes and Insights that Emerged from Our Interviews

As we spoke with older adults from across the county, themes began to emerge. Housing cost and availability, Affordability, Nutrition, and Independence were common, pressing issues for project participants.

Next Steps

We are sharing our findings with our healthcare partners at Alameda County Health, Kaiser Permanente, and Alameda Alliance for Health; with other key stakeholders; and with policy makers.

COMMUNITY VOICES – A REPORT PARTNERS

Who We Spoke With

We thank the following community members for contributing to this project. (Their names are listed according to their preferences.) We are deeply grateful for their willingness to share their time, insights and life experiences.

Ethel R.	Barbara Sterrett	Ms. J.
Jean Toney	Keith Arivnwine	Bennie Whitfield
Gabriela A.	Sue	Marvin
Brenda Whitfield	Debra Hayman	Luis Fernandez
Nargis N.		

Thank you as well to the staff at the following organizations that assisted in making connections and providing places to meet.

- City Serve of the Tri-Valley
- City of Fremont, Aging & Family Services
- Fruitvale-San Antonio Senior Center, Unity Council
- Home Match, Front Porch Community Services
- Lavender Seniors, Oakland LGBTQ Community Center
- St. Mary’s Center

We would also like to thank the Stupski Foundation and the California Collaborative for Long Term Services and Supports for providing the funding for the Community Voices Project.



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OVERALL THEMES

What We Heard

As we spoke with older adults from across the county, themes began to emerge.

Key Themes:

- **HOUSING & ECONOMIC SECURITY** - Housing costs are high and displacement and homelessness are pressing concerns, for home owners and renters. Living on low or fixed income, or being burdened by excessive housing cost, challenges every aspect of life.
- **NUTRITION SECURITY** - Maintaining proper nutrition can be challenging due to limited funds, mobility limitations and transportation challenges.
- **INDEPENDENCE & COMMUNITY** - Older adults seek the ability to live life fully with minimal limitations. We heard participants express a desire for independence overlapping with a desire to be part of a community, and sometimes difficulty in asking for help.
- **RESPECT & STIGMA** - It is important that older people are seen, respected, and treated with care. We heard participants describe the impacts of ageism – both the compounding effects of ageism and other societal discrimination, and how easily ageism is internalized.
- **LONELINESS & ISOLATION** - Feelings of isolation and loneliness affect wellbeing, and give rise to practical concerns about safety and health.
- **INFORMATION & SUPPORTS** - Having access to the right information and knowing what questions to ask is crucial. Assistance with navigating bureaucracy, coordinating services, and help with instrumental activities of daily living are necessary to maintain stability.
- **HEALTHCARE** – Navigating health coverage options without a guide is difficult. Timely access to appointments is important, as is being able to have questions answered quickly.
- **TRANSPORTATION** - Both personal and public transportation are essential for accessing healthcare, engaging with community, and feeling independent, but costs and complexity are barriers.

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HOUSING, ECONOMIC, & NUTRITION SECURITY

Housing, Economic, & Nutrition Security

Housing costs are high and displacement and homelessness are pressing concerns, for home owners and renters. Living on low or fixed income, or being burdened by excessive housing cost, challenges every aspect of life. Maintaining proper nutrition can be challenging due to limited funds, mobility limitations and transportation challenges.

In Their Own Words

Ethel R., Oakland - *"That's just my whole focus. My whole reason for going back to work is so I can afford housing. It just so happens now I'm old enough to where me working won't effect my social security benefits because I'm retirement age. Before that you were only allowed to make so much because I took it early or they'll take part of it."*

Ethel R., Oakland - *"It's all the regular bills. You still have the same bills whether you're working or not... It was manageable at one time, but it's like one event can change everything. When you are living paycheck to paycheck. One slip up and everything falls apart and there's no safety net so I'm trying to pick myself up. And I'm on the road to recovery but it doesn't happen overnight"*

Ethel is on several waitlists for affordable senior housing, and her kids live far away.

Barbara Sterrett, Livermore - *"Housing, it was difficult for me. It took me four years to get where I am now, and this senior community. So, that was a challenge. You had to be a certain age. And then you had to wait to get on the list."*

Ms. J., Alameda - *"I got a sixty days eviction notification from my last place suddenly. I lived there six years.... So I look for the next place. It was very hard. I have a awful severe post-concussion syndrome and also depressed, badly. But I have to move out in sixty days."*

Ms. J. found stable, shared housing through Home Match.

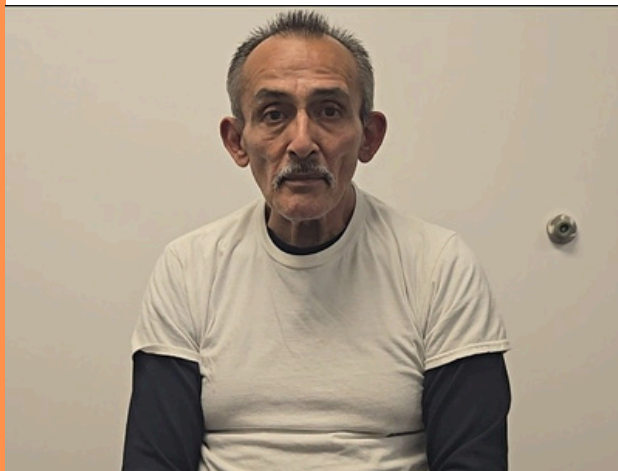
COMMUNITY VOICES – A REPORT

HOUSING, ECONOMIC, & NUTRITION SECURITY



Keith Arivnwine, Oakland - “[Food] it’s too expensive first of all. I get food stamps but I just try to make [it] work as best I can. It’s just not fair but it is what it is, right.”

Jean Toney, Oakland - *“Even to do volunteer work it’s costing. I have to pay to come and pay to go home. So I can’t be as involved as I would like to be because I can’t afford it.”*



Luis Fernandez, Oakland - *“The doctor says to stick to a diet, but unfortunately we can't because we don't have that option. And that's one of my problems right now [as a person who is unhoused].”*

Other participants described the challenge of searching for housing following a divorce; the stress of living in a low-income housing facility where airing a grievance feels risky; the challenges of maintaining a house when the costs for insurance and repairs increase every year; the reliance on food banks and senior meals programs; the impact when CalFresh benefits are reduced; and the implications of extreme housing cost burden.

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INDEPENDENCE & COMMUNITY

Independence & Community

Older adults seek the ability to live life fully with minimal limitations. We heard participants express a desire for independence overlapping with a desire to be part of a community, and sometimes difficulty in asking for help.

In Their Own Words



Barbara Sterrett, Livermore -
"I'm in a wheelchair so okay, it's being able to access non-ADA building and having a problem with the sidewalk being raised and uneven that creates a problem."

Sue, Alameda - *"I don't want to have to live with my kids. I mean, I love them dearly, but that would be a burden on them and their life... And I'm so thankful I live in a state that gives us rights to our own lives."*

Bennie Whitfield, Oakland - *"It means to live a life without assistance... to be independent."*

Gabriela A., Oakland - *"And, you know, [independence is] based on my ability to move around freely, physically, mentally, financially, able to sustain the lifestyle that I've worked so hard to enjoy."*

Sue, Alameda - *"So that independence of being able to get up and go and do things, to me, is huge. I'm very worried about, you know, getting... not being able to move around."*

Marvin, Pleasanton - *"Even basic stuff like cooking, shopping for groceries... becomes a challenge."*

"I know it's hard because... seniors need a lot of help themselves but I think they have a lot of experience to share. If they can contribute maybe in a way that's not [physically] challenging, I think they are willing to help just so they can chip in... so they feel needed."

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RESPECT & STIGMA

Respect & Stigma

It is important that older people are seen, respected, and treated with care. We heard participants describe the impacts of ageism – both the compounding effects of ageism and other societal discrimination, and how easily ageism is internalized.

In Their Own Words



Marvin, Pleasanton - *“As we age we are no longer needed in our jobs, we say goodbye to that. I don’t care if you are high up, once you retire, you’re a retiree... The more high up you are, you feel vacant because you are not needed anymore.”*

Ms. J., Alameda - *“So I've been fighting against a senior abuse issue for more than three years... And I know both in Japan and here... I learn a lot about child abuse and the laws and ... the child protection system, and it's [the]same [for] a senior.”*

“It's like a dream as a Japanese [person]. We don't have such a wonderful courage at all. We have no chance to learn and no chance to get the skills to cope with the depression or... trauma.”

Jean Toney, Oakland - *“[It is important to me that] people understanding who I am and that I have the same needs...same rights...same respect as they do.”*

“I do not expect to be addressed as less than. I do not expect to be thought of as not knowing anything. Not having any knowledge of anything. [I want to be] treated with respect. I’m not a child.”

“The dentist, I stopped going because they were totally discourteous.”

Others spoke about the stigma of homelessness that makes them feel like second class citizens; and about fleeing their home countries where their LGBTQ status was a liability.

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LONELINESS & ISOLATION

Loneliness & Isolation

Feelings of isolation and loneliness affect wellbeing, and give rise to practical concerns about safety and health.

In Their Own Words

Gabriela A., Oakland - *"I'm solo and having someone, if I'm in need of care, to take care of me, I don't have any family members to do that. And I definitely know I don't have the financial resources to afford to pay someone to come in and, and help me"*

"I don't talk to anybody every day. Sometimes I'll be here in my home and I won't talk to anybody at all. You know, phone doesn't ring. I don't get no text messages. And you kind of feel like, wow, I'm the only one in the whole world that nobody's, you know, even worried about. "

"And that's really important. I think that community has got to be person-driven. And I think it has to be... like-minded. I don't mean that in any kind of race or creed, but just the fact that we're all trying to be healthy, all trying to be better."



Bennie Whitfield, Oakland - *"And then to have a place like St Mary's center to come to. That's part of my well being. Been coming here for twenty years."*

Marvin, Pleasanton - *"For people that live alone, I think this is the biggest fear... My mom lived alone after my dad died but her neighbor, she lived in senior housing - basically you need to be 65 and older to live there; her neighbor died and no one knew about it until 3-4 days later."*

Others spoke about the terror of waiting alone for the ambulance to arrive, and the fear that living alone will mean that they could suffer a health crisis and "no one might even know."

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INFORMATION & SUPPORTS

Information & Supports

Having access to the right information and knowing what questions to ask is crucial. Assistance with navigating bureaucracy, coordinating services, and help with instrumental activities of daily living are necessary to maintain stability.

In Their Own Words

Brenda Whitfield, Oakland – *“[I need] someone like Janey,”* says Brenda, referring to a St. Mary’s Center staffer who helps her process her thoughts and answers questions.

Bennie Whitfield, Oakland – *“Sometimes we have concerns when we go to the city or, county, or state office, you know. [We don’t] have the right answers or even know how to ask the right questions to get the [information we need]... Because a lot of time you can say the wrong thing and mess up everything.”*

Marvin, Pleasanton – *“As we age, your ability to analyze things diminish. For instance, the gentleman I was talking about, he was a doctor. But he says when he receives a long legal document, he has a hard time understanding it now. That has nothing to do with your education.”* Marvin wishes there were people that could help with things like that, perhaps a social worker. Someone you feel comfortable coming to your home.

“Also, upkeep of the house and chores. For instance, that gentleman I was friends with, he said he would like to have a handy person come in and clean his yard do some housekeeping for the houses because he, uh he can no longer do that himself.”

Ms. J., Alameda – *“In deep depression, I had no energy to ask for help... So, yeah. But, doctors at Kaiser... and psychiatrist and social worker at Oakland LGBTQ Center and Open House in San Francisco.... Yes, they support me a lot. Good. But I couldn’t contact them at all.”*

Others shared the disruption that occurs when a program that they had relied on closes or stops providing a key service; the sometimes dispiriting struggle to get needed services;

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HEALTHCARE

Healthcare

Navigating health coverage options without a guide is difficult. Timely access to appointments is important, as is being able to have questions answered quickly.

In Their Own Words

Sue, Alameda - *"It's interesting because I talked to other friends that, you know, are going through either Stanford or... UnitedHealth or whatever [managed care plans]. And they're... always changing and they have to get new doctors every year and then they have to wait months to get an appointment."*

Debra Haymon, Fremont - *"Not sure what happens at the end of the year. My health care United Health Care may not accept Medicare or Medi-Cal. Changes. That's what's so frustrating and confusing every year. They are changing. Frustrating and confusing to understand the healthcare plan."*

Barbara Sterrett, Livermore - *"Well, I'm unhappy with Medi-Cal because they say I make too much money, which I know that I don't. But I have to pay a large copay with Medi-Cal. And I'm talking about like thousands of dollars before they would even pitch in to help me. So I'm very unhappy with that."*

Ethel R., Oakland - *"It's those kinds of things, not knowing for sure what's the best coverage, what I'm eligible for. There's no time to talk to people because I'm at work."*

Bennie Whitfield, Oakland - *"We had always had Lifelong Medical [but] they didn't do that this year. And we had to go to the county. We were concerned about what we need to bring but anyway we went down there and the only thing is we found out it wasn't as bad as we thought."*

Jean Toney, Oakland - *"Scheduling they might call me the day before with the podiatrist and I have to stop everything I planned and go to the podiatrist. Which might take me half a day.... It's too time consuming."*

Gabriela A., Oakland - *"They're not as responsive as I would have appreciated. And sometimes it does take weeks instead of days to get an appointment."*

COMMUNITY VOICES – A REPORT HEALTHCARE

Marvin, Pleasanton - *"I have Kaiser for many years. But I noticed that Kaiser is maybe getting to powerful they don't care about patients. It's harder and harder to get healthcare from them. For instance, my blood pressure has gone up, I tried to make an appointment with my doctor, the earliest is the 25th. That to me is too long but I really don't have other choices."*

"My dad went to hospice towards his final month...it was horrible for him. I tell you, those places, I wouldn't go if this is my turn."



Others spoke about their concerns that health plan changes would stop them from seeing current doctors who they like and trust; the difficulty getting health questions answered in a timely way; the challenge of getting appointments; frustration with online portals and limited internet; and the difficulty following a plan of care and diet recommendations on a limited budget.

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TRANSPORTATION

Transportation

Both personal and public transportation are essential for accessing healthcare, engaging with community, and feeling independent, but costs and complexity are barriers.

In Their Own Words



Jean Toney, Oakland - *"So I volunteer but I need money as well. Transportation costs me. Everything, there's a price for everything and so I need income. More income."*

Marvin, Pleasanton - *"Number one is transportation. Like go back to the ability to move around. When you were in your young days you could drive, just pick up your key and go and as you age that gets harder and harder."*

"I no longer feel as comfortable driving to places I'm not familiar with. Driving at night is a bit of a challenge because of the cataract that is developing. I have sleep apnea, so I can't get tired when I drive because I don't have enough rest."

Barbara Sterrett, Livermore - *"Using public transportation, the medical appointments, and then having to deal with Wheels [Dial-A-Ride, the Paratransit service in the Tri-Valley area]. They either get you there too early. Or they get you there too late. So, you have that challenge of having to deal with getting stressed from getting there too early. Or mainly from getting there too late."*

"But your medical appointments or your church appointments, you have to make on your own. You have to have Wheels Dial-A-Ride. You have to apply for that. And they charge a fee. So, that's difficult because I don't live close to a city bus. So, I have to get the door-to-door services. So, that's a problem"

Others shared their reluctance to travel at night when the low light makes seeing difficult, and concerns about safety because of poor balance or diminished strength.

COMMUNITY VOICES – A REPORT RECOMMENDATIONS

Recommendations from Community Voices Participants

We asked participants what recommendations they have for improving the health and wellbeing of older community members.

- *“Create community health fairs in underserved areas.”*
- *“Social workers and help with navigation and coordinating services.”*
- *“Increase funding for senior transportation programs.”*
- *“Seniors want to work and make money too. Workforce development for elders!”*
- *“Help with upkeep of the house and chores.”*
- *“Fewer inspections and other demands on tenants.”*
- *“Help seniors contribute to the community.”*
- *“Focus on communities that have language barriers. I would like to see them getting some help too.”*