



Community and Economic Development in North Carolina and Beyond Blog: Preparing for the Silver Tsunami: Participatory Planning for Aging in Orange County, NC

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The United States is turning gray, and that isn't a reference to the wet weather we have seen lately. The number of older adults aged 65 and older is expected to double by the year 2050 to an estimated 88.5 million seniors. North Carolina is no exception, especially given that our state has become an increasingly desirable retirement destination. Census data shows that North Carolina ranks among the top ten states with regard to growth in the Baby Boomer cohort – the state experienced a 35% increase in the number of adults over the age of 65 from 2000 to 2010.

All of North Carolina's 100 counties have at least one senior center, and these senior centers are often closely associated with a county department on aging that provides programming, services, and information to local seniors. The Orange County Department on Aging (OCDOA), with two senior centers in Chapel Hill and Hillsborough, is one such agency. The OCDOA coordinates a system of integrated aging services throughout the county, including congregate meals, exercise classes, caregiver support, falls prevention outreach, among many other essential services. But this programming isn't limited to within the confines of its senior centers – the OCDOA has long been a forward thinking and innovative organization that looks for ways to enhance the quality of life for seniors, as well as ways that seniors can contribute to a better quality of life in Orange County.

OCDOA recognizes that older adults are a major human resource with a diverse array of skills and talents that enrich our communities, which can be seen through volunteerism, civic service, and entrepreneurship. You don't have to look far for examples. The Chapel Hill SCORE program, a volunteer mentorship program, offers free counseling to existing and start-up businesses. Many of SCORE's volunteers are older adults.

But with these opportunities also come some challenges that necessitate broad-based leadership. Older adults require unique services, such as on-demand and accessible transportation, as well as recreational activities to maintain a healthy lifestyle and discourage social isolation. Moreover, as more and more older adults choose to "age in place" due to financial or personal reasons, they may find difficulties in securing housing that meets their needs as they age. For example, their current home may not be served by public transportation or require modifications to ensure that they are safe and able to navigate their homes without assistance. These challenges are shared across generations. A significant portion of our workforce (who may be older adults themselves) is faced with balancing full-time jobs with their roles as caretakers of both elderly parents and their own children.

Rather than reacting to these issues as they arise and missing an opportunity to harness this tremendous source of human capital, the OCDOA has taken a proactive approach to planning for the increase in the population of older adults. In 2003, the OCDOA led Orange County in the distinction of being the first county in the state to create a five-year Master Aging Plan or MAP. This comprehensive planning process, which recently entered its third cycle, brings together government staff, nongovernmental agencies, citizens, and other stakeholders to identify current and anticipated needs, brainstorm solutions to address these needs, and commit resources and expertise to implementing these strategies over a five-year period. Ultimately, the MAP serves as a work plan for the OCDOA staff, as well as for the partners who assist in the creation of the plan.

The planning process that drives the Master Aging Plan has evolved over the past decade, and the 2012-2017 MAP, now in its second year of implementation, has yielded some valuable lessons for other communities who want to be well prepared to address the needs of older adults. Here are some takeaways from the 2012-17 MAP:

- **Think outside the box when it comes to planning for aging.** The "silo-ing" of issues is a problem that we are all



too familiar with. Transportation folks don't talk with housing folks, housing folks don't talk to public health folks. OCDOA worked hard to rectify this by taking time to build relationships and working towards mutual understanding of where aging and other issues overlap. One way in which OCDOA did this was by having individual meetings with each county department head prior to the kick off of the MAP planning process. These meetings focused on assessing each department's "aging readiness" and provided the foundation for participation from a broad cross-section of stakeholders who don't typically see themselves as involved with aging services.

- **Secure buy-in and participation from a wide variety of stakeholders.** The OCDOA already had a built-in supply of stakeholders to draw on going into the MAP planning process – the hundreds of seniors who walk through its doors each day at its two centers, as well as the many service providers with whom the OCDOA interacted with on a regular basis. This existing pool of engaged stakeholders would have, on its own, made for an impressive number of participants in any planning process. But the OCDOA saw this MAP as an opportunity to reach out to those citizens, local government staff, and service providers with whom it did not already have a strong relationship with. Realizing that these stakeholders may be too busy, uncomfortable attending large public meetings, or constrained by other factors, the OCDOA took time to provide them with other opportunities to participate in the process. They worked with churches to hold focus groups in rural areas, they held meetings at community centers throughout town, and used social media to solicit input from a wider audience.
- **Keep those stakeholders at the table with a clear and streamlined process.** The OCDOA recognized early on that if it were going to ask for stakeholders to commit time to the MAP, it needed to make sure that this time was well spent. The OCDOA did this by spending a lot of time up-front developing a streamlined planning process. The MAP planning process was driven by five work groups, organized by topic (housing, transportation, health, aging in place, and community engagement), and each of these work groups met five times over several months. These work groups were comprised of interested citizens, professionals, and government representatives and were led by an outside facilitator (UNC master's student) who managed the process. At the outset, each work group had a clear sense of the MAP process, such as the objectives for each meeting and homework for members between meetings. By knowing what was expected of them and having a roadmap as to how they would develop the final product, OCDOA was able to ensure a very low attrition rate throughout the course of the MAP's development.
- **Integrate performance measures and evaluation into the plan.** At the outset, OCDOA was committed to making sure that the final MAP was a living, breathing document that didn't just sit on a shelf. One way to ensure this was by building indicators for success into each and every strategy outlined in the final MAP. These indicators served several purposes. For one, they helped to make the planning process more efficient in that work group members were forced to come up with realistic and actionable strategies given the resources on hand. Second, they allow the OCDOA to measure its success in implementing the MAP and to learn what did and did not work for the next iteration. Lastly, these performance measures led to more accountability and ownership of the plan by work group members – each strategy included both an indicator and an "agency responsible" for follow through. These built-in evaluation measures also help to sustain enthusiasm for the MAP — the OCDOA regularly publishes updates on its progress towards fulfilling MAP objectives.

Just a little over a year into its implementation phase, the MAP is already yielding impressive results. For example, the OCDOA is developing a leadership program that draws on the skills of well-connected older adults to serve as liaisons between the department and hard-to-reach pockets of the community. They are working with other agencies to improve the quality of elder care in the county. They are hosting dialogues between developers and citizens to explore the feasibility of alternative housing models for aging in place, such as pocket neighborhoods. They secured funding to hire a Mobility Manager, which will be housed within the OCDOA, to help address transportation issues related to aging. These are just a few examples of what the MAP process has managed to accomplish so far.

Other counties who are interested in adapting the MAP planning process to their own communities don't have to start from scratch. The OCDOA has a tool kit on its website that provides all of the materials that one might need to replicate this comprehensive yet streamlined planning process.

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