

MULTICULTURAL ELDER DIALOGUES

A Report for the Minnesota Board on Aging

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Based on conversations with more than 300 diverse Minnesota elders

Community Dialogues with Multicultural Elders

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The role of elders in a changing world

Across cultures and religious traditions, elders have traditionally held positions of honor and respect. Many of the diverse Minnesota elders interviewed expressed joy in obtaining the position of honor and authority that comes with aging. Their families and communities turn to them for wisdom, problem-solving and mediation. Some have come to Minnesota from countries that have experienced war and disease. Others were born here and aged in place. No matter how they arrived as one of Minnesota's elders, many recognized that simply being alive is a blessing. Elders also recognize that there is much more they can do with their time, skills, and talents. As one elder said, "We have a lifetime of experience to offer."

Yet as the world evolves and our culture places more value in youth, elders also shared challenges, fears and anxieties. The natural aging process is causing their bodies to decline. Many are living alone, when they expected to live with children or grandchildren as elders. They have a smaller social circle, as death and isolation have claimed friendships. And the systems designed to support them often don't meet their needs.

There is not just one narrative that fits elders in Minnesota. They are joyful, and anxious. Mentally strong, with increasing physical challenges. Supported by family and community, and yet too often lonely. The summary below reflects the common themes we heard in conversations with more than 300 elders spanning many different ages, geographies, cultures, languages, and religions. The ideas and concerns they shared can inform policies and practices that will better support Minnesota's diverse elder population.

Summary

More than 300 elders from many different cultural communities shared their thoughts, challenges and ideas about growing old in Minnesota. While this report records much of what the elders had to say, we will be sharing this report with them to make sure we are honoring their stories and sharing ownership of the report. This is a promise we made to the elders when holding the dialogues and we will make sure this promise is kept.

As part of the dialogues, elders had many positive thoughts to share about growing old. They talked about their relationships with family and the community, their strong faith beliefs and their love of their traditions and cultural backgrounds. Many spoke of their experiences and wisdom they have gained over their lives. Some spoke about having more time to enjoy and adjust to their new life, sometimes without work. Many spoke about increased volunteer opportunities to give back to the community. Elders understand their strength and power in the number of elders living in Minnesota. They want to demonstrate their leadership to resolve difficult problems confronting the state.

The section on themes includes statements and quotes from elders about physical and mental health, health care access, housing, safety, economic security, family issues, transportation and community. There are many common concerns among elders from many different communities that are clear in reviewing the themes. There are also some clear differences based on income and disability as well as access to services. The experiences of immigrants also creates some different challenges.

Elders in MN are diverse and their experiences are intersectional and multidimensional. Many elders noted the impact of race and class in how the disparities in housing, income and health impact them daily. One elder described intersectionality in the following way: “I’m a black man. So, every day I wake up, that *is* a barrier. I feel I’m still an endangered species. If homelessness doesn’t get me, if healthcare doesn’t get me, something will get me. As black people we suffer from PTSD and years of trauma.” – Homeless elder

The most common and overarching concern elders shared across themes were health and isolation. Elders across the board talked about the importance of being seen, valued and respected by family and government alike. Many elders said that their connection to others is what supports them in living a strong and healthy life, while disconnection, isolation and lack of investment lead to the concerns listed below.

Physical health, mental health and healthcare access were major concerns for the elders we spoke with. Their health is heavily impacted by challenges in the lack of affordable housing, limited community connections and inadequate income for support. Access to a variety of services, whether transportation, health or community services has a big impact on health, isolation and feeling secure. Connection to family and community is critical for overcoming isolation and improving health status.

The last section begins to outline some of the ways to improve the lives of elders in our communities. Some of these are actions in which elders themselves can take while others require action by the community and institutions. All of these recommendations were raised by the elders themselves during the dialogues.

Who decided to initiate this project and why?

More than 10 years ago, the grassroots statewide organization led by elders on Minnesota issues, the Minnesota Senior Federation, closed its doors. This organization had worked on health care, prescription drugs, long term care and other issues starting in the early 1970's. In 2017, several people started talking about the lack of a powerful senior voice in Minnesota and the importance of hearing from elders. As individuals reflected on the role of the Senior Federation they recognized the importance of hearing from all elders, especially from communities of color, immigrant communities and American Indians who are often left out of the conversations.

These conversations led to the idea of convening dialogues with elders from diverse communities to listen carefully to their experiences with aging in Minnesota. After conversations with the Minnesota Board on Aging and learning about how this listening project was so important to the MN 2030 initiative, funding was provided by the Minnesota River Area Agency on Aging to conduct the dialogues and write a report. The MN 2030 project is designed to develop a plan for the growing aging population when the baby boomers turn 85. While the funding was essential to the dialogues and the report, the hosts and elders from the dialogue groups were also very interested in what would happen after the report and how elders could build a more powerful voice in Minnesota.

What is the Community Dialogues with Multicultural Elders Project?

The overall goal of the Community Dialogues with Multicultural Elders Project was to convene at least 20 community dialogues within diverse communities to listen to elders. In fact, 23 community dialogues were convened between May 8 and July 2, 2018. We wanted to hear elders' stories about what it is like growing old in Minnesota, including the positive roles that elders play in each community. We also asked elders about their challenges and issues most important to them. The dialogues provided an opportunity for elders to talk about how to build a powerful voice in Minnesota that will be heard by elected officials and those developing aging policies. We held community dialogues with individuals from the Asian, African American, Latinx, American Indian, African, LGBTQ, Russian, and Jewish communities, as well as with homeless individuals and retired labor organizers. Dialogues took place both in the Twin Cities metro area and Greater Minnesota.

These conversations were not oral surveys, but rather were created to enable elders to hear each others' stories, struggles, challenges and hopes. We asked elders to think about those direct challenges to aging well and the challenges and hopes of their children and grandchildren. These were safe spaces led by facilitators trusted by the community sharing their stories. Note takers recorded quotes, ideas and lessons to share with other communities, government officials and the public.

These dialogues started to build connections, respect and trust among elders. It is exciting for elders to hear their own voices being recognized as important to the world around them. Too often, elders are not listened to by public officials. But also may have limited opportunity to listen to each other, especially across communities. These dialogues were a first step toward building elder power by offering a space to share their stories and elevate their voices.

Who are elders and why should we be listening to them?

The population of people over the age of 60 is growing very fast and no organization in the state engages multicultural elders to demonstrate their leadership skills and advocate for their own interests. This is especially lacking for elders of color and American Indian elders, who are rarely asked what they want. We are working closely with the Minnesota Board on Aging to make sure that elders of color have the opportunity to share their voices and challenges as part of how policies are developed for all elders in Minnesota. This is part of the MBA's Aging 2030 initiative, which is working to prepare Minnesota for a future where people live well and age well.

Funding for key issues impacting the elderly is not keeping up with population growth, and elders need to raise their voices to represent their own interests. Many elders believe the State of Minnesota needs a vibrant and powerful organization representing elders.

With people over 60 representing one of the fastest growing cohorts in Minnesota, the timing of this endeavor is important. More than 285,000 senior citizens will be added to the population in Minnesota this decade, exceeding the last four decades combined. More than 40 percent of all elders rely exclusively on Social Security as their only source of income which means they are at or very near poverty levels. Disparities among elders of color, including immigrant communities is even worse. Elders have the experience, skills and time to build a powerful voice in Minnesota.

Why this approach?

The Multicultural Elder Dialogues offered participants time to build relationships and share stories. Great effort was taken to create a safe space where elders would be willing to be personal and vulnerable about what they shared with each other. While there were a set of discussion areas and questions to be covered, the facilitators had the flexibility to allow the conversation to go in different directions and not be too rigid. The facilitators were instructed to guide the discussion and not to shut people down if they took the conversation in a different direction.

The dialogues were created with the following principles and vision in mind:

1. Transparency for elders to clearly see the long-term vision and the purpose of the community dialogues.

2. Focus of the dialogues is on building relationships within and among communities.
3. Centrality of sharing stories, being as open as possible and honoring each culture and how it shares stories and builds relationships.
4. Maintaining shared ownership of the dialogues, the process of listening and building relationships and building power for elders in Minnesota.
5. Clarity about the long-term vision of creating a more powerful voice in Minnesota where elders determine the direction, strategies and tactics for action on key issues.

What did we want to know?

A first discussion area was: What is it like to be an elder? This was intended to uncover things like: What the experience of aging has been like for you? What has surprised you? What has been the best parts of growing old and the most challenging? We wanted to get to the idea of what elders themselves experience rather than what others say about elders.

A second discussion area was: When you think about living the life you want to live as an elder, what are some of the challenges or fears you have that are or could be a problem. Where does the support you need come from and examples could be provided? As an older person, what worries you the most and what needs to change to reduce these worries for yourself? Your family?

A third discussion area was: Are there ways you are engaged in our community or would like to be? Or can you imagine having a voice in the community about issues affecting elders and what would that voice look like?

Why write a report?

Our intention is that through this report, the voices of elders will come to life. Stories will be shared so policymakers can truly hear what elders have to say. We believe that by sharing elder voices and stories with policymakers and professionals working in the field of aging, we can make a greater impact in advancing elder priorities.

The report of the dialogues will be shared with the Minnesota Board on Aging as part of the Aging 2030 project. This will be the first time that elders from multicultural groups from around the state will have their views and priorities shared with government officials who make aging policy, and with social service agencies who implement that policy. Through this process, the elders will be engaged in truly shaping the policies that are developed in the years to come. Elders must have a chance to bring their own voices together to advocate for change.

Who was engaged?

This project required the collective work of many people and organizations. For these dialogues to work, elders needed to trust the hosts and facilitators to ensure that their voices would be

respected. We are very grateful to these organizations and community members who made this listening project possible and all of the facilitators and note takers who participated. The following played key roles in making sure the dialogues took place.

1. The Department of Indian Works and director Kathy Denman-Wilkes and facilitator John Poupart for organizing and convening two dialogues with American Indian elders.
2. The St. Paul Jewish Community Center and Adult Services Director Barbie Levine for convening two dialogues, one with Russian elders and the other with Jewish elders.
3. The Wilder Social Healing Center and its director Paul Sinclair and Ha Vo, who organized four dialogues with elders from the Hmong, Karen, Cambodian and Vietnamese communities.
4. The Organization of Liberians in Minnesota and director Georgette Gray who convened a dialogue with Liberian elders.
5. The Little Brothers, Friends of the Elderly and director James Falvey and Harry Hartigan who convened a dialogue with LGBTQ elders.
6. CLUES, Comunidades Latinas Unidas en Servicio, and Elder Services Manager Erika Meza who convened a dialogue with Latinx elders.
7. The 50+ elders group of Open Access and Marcy Shapiro and Linda Fancher who convened a dialogue of homeless elders.
8. The Minnesota Citizens Federation Northeast and director Buddy Robinson who convened a dialogue of Duluth elders.
9. The Minneapolis Regional Retiree Council and president Leif Grina and Tom Beer who organized a dialogue of union retirees.
10. Centro Tyrone Guzman and director Roxana Linares and Yolima Chambers who convened a dialogue with Latinx elders.
11. Abdullahi Sheikh and Nadifo Osman who convened Somali men and women in separate dialogues of Somali elders.
12. St. James Chamber of Commerce and Luisa Trapero and Julio Zelaya who convened Latinx elders in the city of St. James.
13. Brenda Fong who convened a group of Chinese elders for a dialogue.
14. VINE Faith in Action and diversity coordinator Julie Hawker and Cimarron Burt who convened a dialogue of Somali, Latino and Vietnamese elders in Mankato.
15. Hmong elder day center with director Ilean Her and Chee Lor who convened a dialogue of Hmong elders.
16. Hallie Q. Brown Community Center and director of development Dawn Selle who convened a dialogue of African American elders.
17. La Cruz Community Center and Ahmed Noor and Salah Jama who convened a dialogue of Somali elders in St. Cloud.

[What are the next steps after this report is submitted?](#)

This report is being submitted to the Minnesota Board on Aging on August 1, 2018, in compliance with the contract that paid for the Multicultural Elder Dialogues process. We continue to see this report as a living document, however, until the report has been reviewed

by the elders, the hosts and facilitators who participated in the dialogues. It is essential that the report reflect the voices of multicultural elders. Our vision is to reconvene groups of these stakeholders to review the report and make any necessary revisions to make sure the elders and diverse communities have a direct ownership in the report and next steps. We will revise the report as directed by elders after those meetings.

Our plan is to reconvene elders across communities to discuss what the report said and how to make sure their voices are heard. Elders that participated in the dialogues will develop their own leadership and will understand what it will take collectively for their voices to be heard around the state. They will also have opportunities to meet with people from other communities and generations to consider strategies for building a more powerful voice and taking action on some of the key policies they identified.

Themes

Physical Health

A common concern elders shared was that the decline of their physical health impacted many areas of their lives. Some noted the high quality of health care available in Minnesota for many elders. Concerns included:

- **Aches and pains:** As they aged, they were surprised to find that their bodies could not keep up with their active minds like they used to. These pains limit elders' mobility, which affects their ability to socialize and use community services.
- **Physical exhaustion:** Elders are not able to keep up with their daily chores and tasks because they tire easily. They are worried about the burden this places on their families, who often must step up to maintain homes and lawns.
- **Hearing and sight loss:** Hearing and sight loss prevent elders from participating in activities they once enjoyed, such as reading, doing crossword puzzles, and gathering in loud spaces. This can contribute to mental health issues, causing elders to feel more isolated because they can't do the things they once loved.
- **Lack of sleep:** Elders have difficulty falling asleep and staying asleep. Many wake up in the middle of the night and then suffer from insomnia. Their insomnia contributes to their exhaustion and affects their energy to engage in activities and social outings. Many seniors mentioned a daily tension between "not wanting to go out and not wanting to be alone."

Quotes:

- "As you are getting older, your health begins to decline. You can't do normal activities that you are used to; for example, carry a bag of rice, shovel snow, and gardening." – Vietnamese elder
- "When you are young you feel fine, great and you are full of energy. But when older, one easily becomes susceptible to diseases and generally experiences increasing body weakness...and then the distant phobia of death and dying starts to creep into your world and thoughts like never before. The thoughts of death preoccupy you day-in and day-out. This adds to your stress, too." – Somali elder
- "With so many physical pains and my health deteriorating, there's nothing I can do, like when I was still working. Now I feel like I am a kid again, who doesn't know much and can't do much." – Hmong elder
- "I feel surprised that I get as tired as I do. My mind is willing, but not the body." – Jewish elder
- "Getting older is the tragedy of having a 20-year-old mind in a 70-year-old body, because they don't seem to agree with each other." – LGBTQ+ elder

Mental Health

Elders are suffering from a variety of mental health conditions that detract from their daily quality of life. These included:

- **Anxiety:** Anxiety was a pervasive theme throughout our interviews with elders. Elders are worried about their health, their economic security, and their families. Several elders wondered aloud, either in the groups or to their doctors, if they were alone in their worries. They were met with a resounding “no”—most of the elders interviewed suffered from some degree of anxiety.
- **Depression:** Many elders are depressed, largely because of loneliness and social isolation. They want more opportunities to be around their families, to spend time in community and with affinity groups, to learn, and to engage in activities they enjoy.
- **Trauma and racism:** Elders of color, homeless elders, and some immigrant elders have experienced significant trauma. Living on the street, fear of deportation, war, fleeing their home countries, and ongoing racism are among these. Those traumas stay with elders throughout their lives and affect their mental health. Some immigrant elders, on the other hand, expressed profound gratitude for the relative safety and security they experience in Minnesota.
- **Plans for aging:** A few elders noted that their anxiety could have been diminished if they had known what to expect of the aging process. One person said, “I had no plan for aging.” Elders suggested classes on will preparation, power of attorney, and other key legal issues. Others simply thought that families and communities needed to have more open conversations about what it is like to age.

Quotes:

- “We immigrant seniors are faced with a lot of problems in America. When I see those who were born here struggling with life and I look at myself, I ask myself, ‘How will I survive here?’” – Somali elder
- “We didn’t know about these things that are happening now. No one discussed these things with us. And so it’s surprising to us to see the changes we are going through.” – Liberian elder
- “What we experience now really depends on how we plan out our life when we are young.” – Chinese elder
- “It is hard for me to find the beauty in getting older. I am not happy. I am very sad.” – Latinx elder
- “I feel like I am running out of time. I do not have enough time to live and accomplish what I want to. Therefore, it makes me feel scared.” – Vietnamese elder
- “Because of the trauma I went through while my family had to escape to America, and having my husband betrayed, I have major depression and I am on medication.” – Hmong elder
- “I’m a black man. So, every day I wake up, that *is* a barrier. I feel I’m still an endangered species. If homelessness doesn’t get me, if healthcare doesn’t get me, something will get me. As black people we suffer from PTSD and years of trauma.” – Homeless elder

Health care access

Elders often need support navigating the health care system and attending medical appointments. They are dissatisfied with their care, and yet they spend an inordinate amount of time and money on it. Common themes included:

- **Lack of individualized care:** Elders would like more time with their health care providers so they can be treated as people and receive care that is individualized to their needs.
- **Lack of holistic care:** On a closely related topic, elders would like to see more teamwork among their medical providers so the care they receive is holistic rather than siloed.
- **Lack of culturally appropriate medical care:** Elders would like to see medical providers who understand their culture and language. Many elders cannot communicate well with their medical team, which limits elders' ability to receive appropriate care. Of note, elders were grateful for the care and benefits they received.
- **Overmedication:** Elders feel they are overmedicated, and yet they often still do not feel well. Some immigrant elders mentioned that in home countries, they used "food as medicine." In the U.S., by contrast, they only had access to unhealthy foods and were then forced to medicate the health problems caused by their diet.
- **Expensive medication:** Prescription drugs are too expensive for elders living on limited budgets.
- **Navigating Red Tape:** Elders would like more support navigating the healthcare system. They said that bureaucracy and a lack of advocates made it difficult to get their needs met.

Quotes:

- "I am impressed with the dignified attitude towards the elderly in the state of Minnesota. Aging is inevitable, but when it happens in decent conditions one can better tolerate his or her own shortcomings." – Russian elder
- "Going through many medical procedures and having blood draws frequently, it makes me feel confused with the U.S. healthcare system due to a lack of consistency between test results, diagnoses, and treatment interventions between medical providers. For that reason, I do not like to attend medical appointments because I do not want to hear inconsistency from medical providers." – Vietnamese elder
- "So many people are not getting the care they need, and we live in the richest country in the world." – Jewish elder
- "I wish we had better holistic care. I don't want to be dealt with from my head separated from my neck separated from my stomach separated from my knees." – LGBTQ+ elder
- "Many older people can't afford their medications, and cut their pills in half – and drug prices keep getting worse and worse." - Duluth elder
- "We are living amidst too much red tape at times, too many protocols. The systems in place to help us seem to make things more complicated; it's hard to find a clear path to accessing what I need." Latinx elder

Housing

Regardless of whether they were owners or renters, elders expressed common concerns about housing insecurities:

- **Rental affordability:** Many of the elders we interviewed lived in rental apartments or senior living facilities. Rents are very high, and the vacancy rate is low. Therefore, many elders are cost-burdened by their housing and yet limited in their ability to choose different options.
- **Property taxes:** Elders who are homeowners are concerned that rising property taxes could force them out of homes they own outright.
- **Housing isolation:** Elders have creative ideas about housing that would better suit their unique needs. To overcome isolation and loneliness, some elders would like to see senior housing with co-living options so they could spend less time alone. Loneliness was an issue even for those elders currently living in senior communities and assisted living facilities, suggesting that there is more that could be done to encourage socialization among elders across housing types. Another related complaint is that elder facilities do not allow grandchildren to stay overnight. Changing such policies could help reduce isolation among elders.

Quotes:

- “I wish they would build senior housing so that two women can be together instead of individual apartments. We could have roommates to cut down on loneliness.” – Liberian elder
- “I pay less than \$300 a month for rent, but I only make \$577 a month from Social Security. My affordable housing is really not so affordable for me.” – Latinx elder
- “Without housing you can’t do anything. This is the number one priority. You can have a full-time job and not know where to lay your head. Give me some dignity, privacy, some respect. Tell me where I can lay my head.” – homeless elder
- “A lot of us live alone, and never thought that the traditional (formation of the household) would shift as it has.” – American Indian elder

Safety

Elders mentioned two types of safety concerns:

- **Physical safety:** Elders who are still mobile and walk around the community felt that they could no longer defend themselves if presented with a physical threat. This made them more cautious in moving about the community than they felt when they were younger.
- **Scamming:** Some elders worry that they will be tricked by telephone scammers who steal money from elderly people. They noted that shut-ins are particularly vulnerable to this type of scam, because they are more likely to be lonely and thus crave the human interaction of a phone call.

Quotes:

- “I am afraid of loneliness and afraid of being lonely. In Liberia, your children and grandchildren would live in the house with you. But here I am alone...When you are alone in a place it is very bad. Anything can happen to me.” – Liberian elder
- “I should feel proud to be an elder, but what I most feel is fear. Fear that I won’t be looked after. That I will be forgotten.” – Latinx elder
- “Sometimes you want to leave the door open instead of locking. You want to leave it ajar so that you feel and hear voices, footsteps, movement, and sound of others. But you again fear for your life and you don’t know when robbers are coming for you...” – Somali elder
- “We are easy targets for scammers. You become untrusting of people and organizations. I have a good support group, but many more are susceptible.” – African American elder

Economic Security

The majority of elders we interviewed felt anxiety about their economic standing. Elders' budgets are stretched thin and they do not feel that government policies and programs are sufficient to support them. Common themes:

- **Lack of employment options:** Some elders still want to work, but they are not able to find well paying work suitable for older adults. Their perception is that employers do not see elders as a piece of the workforce.
- **Social Security:** Social Security and SSI payments are not sufficient to cover the monthly needs of elders, but many do not have supplemental income. Some elders resent that they spent their entire lives paying into a system that does not serve them well. Others worry for future generations, which may have even fewer Social Security benefits.
- **Government budget cuts:** There is a perception among elders that across the board programs targeted to elders are experiencing budget cuts.
- **Lack of wealth:** Beyond a lack of sufficient monthly income, elders worry about how much wealth they will leave behind. They worry that they will not be able to contribute to building their families' intergenerational wealth. Many elders do not have savings or are spending their savings on their current care. The requirements of some government programs, such as SSI, prevent elders from saving enough to provide a financial cushion for themselves or their families. If elders reach a certain threshold of savings, they will lose their benefit.

Quotes:

- "Once you pay your rent, telephone, and food, you are left with nothing. No change. You live a life of desperation." – Somali elder
- "I feel like white people can get a job and I can't get the same job. We are able to work, but they say we are too old." – Liberian elder
- "I am now used to dealing with the feeling of being on the edge of disaster." – retired labor organizer
- "I want to work and get some money, but I fear that I may not be able to do my part or job and I may get fired for that." – Latinx elder
- "I've been working since I was 14. That's 45 years in the workforce. Now they want to take away my Social Security. Now it's like Social Security is a handout. We've been paying into it for years! It irks me." – African American elder
- "My biggest challenge right now is looking for full-time employment as a senior beyond retirement age. There are jobs all over as far as retail and cashiers, but I'm looking for something more professional. I'm looking for more resources." – LGBTQ+ elder

Family issues

Family is very important to elders. Across the board, elders would like to spend more time with their families. They would also like their families to listen to them more. As elders age, they are experiencing more intergenerational issues with family members and others in the community.

- **Intergenerational relationships:** Elders want to be seen as leaders and to be valued for their lived wisdom. They feel that the shape of families is changing, and that elders are no longer valued for their wisdom. This sentiment was especially strong among immigrant elders. Elders also recognize that they need to listen to and learn from youth. There is a sense that “they don’t listen to us, and we don’t listen to them.”
- **Support for caregivers:** Elders perceive that their families are burdened by caring for them—for example, by providing transportation, arranging medical visits, and maintaining homes. They would like to see more public support for caregivers, and they believe that caregivers need more access to information about existing benefits. Some elders are the primary caregivers for their grandchildren, which brings different concerns about caregiving, economic security, and aging.
- **Family separation:** Some elders are separated from their families due to their immigration status. Because of the Muslim travel ban, elders with family living abroad fear they may never see their family again. The current administration’s family deportation policy is causing anxiety for some families living together in the U.S. If a caregiver is deported, for example, there may be no one left to care for the elder. If an elder is deported, it would be, as one person said, “a death sentence.”

Quotes:

- “In the old days, elders were accorded respect in the Somali culture, but this is gone now and no one gives us that status anymore.” – Somali elder
- “When you are getting old, you become a role model and the children learn from you. As I am getting old, I am still very important to the family.” – Liberian elder
- “If I were to be deported, I would return to a country where I no longer have family, nobody to take care of me. They say when your heart is broken you can get sick, so then I could die without being able to see my family one last time.” – Latinx elder
- “Our communities traditionally included elders in positions of greater leadership, but that has changed...There is a lack of consistent relationship with and communication with the youth...Elders are not honored for their wisdom, knowledge, or as information resources.” – American Indian elder
- “Now when I am getting old, I don’t want to be a burden for my family. I try to see help from the government before asking them for help.” – Vietnamese elder
- “I feel too much worry and stress for our children because if they get injured or harmed, the government may take them easily.” – Latinx elder
- “There needs to be an easier way to access resources. Caretakers don’t know where to go.” – African American elder
- “I believe this is the end of it for me in this life. I used to live with my children, but now that they are older they do not live with me...my children do not show me that they love

me. No child of mine has offered to take me and my husband to live with them.” –
Hmong elder

- “Elders have institutional history to be shared. We need to be asked and respected.” –
Jewish elder

Transportation and mobility

Elders need sufficient modes of mobility. Due to their declining physical condition, many can no longer rely on walking, biking, or other free and accessible modes of mobility. But public transportation options are inaccessible and costly. Concerns include:

- **Transit access:** Much of the Twin Cities region lacks sufficient public transportation access. Elders face additional challenges, because many are no longer mobile enough to walk to a bus route or board a city bus.
- **Ride services:** Metro Mobility's shared ride service provides an alternative, but many elders complained that it was too expensive and inconsistent to use on a regular basis. Some seniors use services like Uber or Lyft, but the cost of these services are also more expensive than a standard bus route.
- **Burden on family:** Most elders rely on family to take them to medical appointments, church, and other engagements. This can place a burden on family members, while at the same time creating challenges for elders. Elders must often travel at inconvenient times and wait for extended periods as they work around their families' schedules.

Quotes:

- "Sometimes I use Metro Mobility to go places. It is not cheap, and you cannot plan your day, since the driver will pick up many passengers from different areas and you have to wait." – Russian elder
- "I can't walk to the bus stop because I can't walk steady. If you have to go to the doctor, you get dropped off at 6:00 in the morning for an 11:00 appointment because of a lack of transportation." – Liberian elder
- "I worry about driving. I wish someone could teach me in my language to drive. I wish I could get a driver's license." – Liberian elder
- "Free buses for seniors are not helping much because buses do not reach most of the suburbs." – Chinese elder

Importance of community

Elders with closer connections to community stated that they felt more supported mentally, emotionally and had an easier time accessing resources. Many elders however, note a distinct lack of community support around them. There is a perception that our society, and even our families, do not value elders the way we used to. As a result, many elders are lonely and isolated. They do not hold the esteemed place in society that they expected to hold once they reached elder status. Concerns include:

- **Institutional support:** Institutions are not supporting elders the way they want to be supported. There are many reasons for this, including budget limitations, lack of culturally appropriate services, including food, language barriers, diminished respect for elders, and bureaucracy. Elders want to access support and services in their own communities. One person said, “We want to go where we already have relationships.”
- **Senior programs and affinity groups:** Many seniors are involved in affinity groups, and noted that those programs are a highlight of their week or month. They would like those programs to be available more often. This would require more funding for elder programming.
- **Support for the homebound:** Homebound people were not interviewed as part of this project, but many elders spoke on behalf of their homebound peers. They suggested that simple programs, such as call trees and weekly visiting programs, could better connect the homebound with community resources and relationships.
- **Power and voice:** Elders feel they have become invisible, but they have skills and talents that are going unused. They want to build power and share their ideas about how Minnesota could be a better place for elders.

Quotes:

- “We can get boxes and cans from the food shelf, but the Liberian people don’t use them. They are not culturally appropriate.” – Liberian elder
- “One thing I appreciate is the farmers market voucher, because we use it to buy our African food.” – Liberian elder
- “I’ve found that at this age, a sense of belonging has become very important. It can be healing. Even life-saving.” – Latinx elder
- “I’m not good at socializing, but this 50+ group is helping me to get out of that and giving me community and camaraderie.” – homeless elder
- “Our community wants to go where they already have relationships, but the focus is on numbers. The services are not culturally appropriate. Isolation can be a result of that cultural gap.” – American Indian elder
- “There is a lack of infrastructure for Indians to be civically engaged and no effective way to do advocacy at this point for Indians. There is a need for affinity groups, for people from the same community to come together and build their voice.” - American Indian elder
- “We have strength in numbers. The more people we have, the more power we have.” - African American elder

- “We don’t think our opinions matter because we don’t have a support system and we are not educated.” – Karen elder
- “As an elder, I just wish to be well so I can come to social groups and be able to interact with my friends and my community, to help me.” – Hmong elder
- “Isolation is a huge problem for me. Because this is my social life. Otherwise I live alone and I might go weeks without seeing anybody. I don’t have any friends and I don’t have any support.” – LGBTQ+ elder

Solutions

While the dialogues were not designed to recommend policy changes or specific actions, there were a number of problem-solving themes that were shared during the conversations. The ideas shared below are potential solutions that should be discussed and explored further. We have divided the solutions into three of areas for consideration: actions to be taken by individuals; actions that would occur at the community level; and actions by institutions, including government.

Individuals

While these are actions that elders said that they themselves can take, it is essential to understand that these actions are very much influenced by the degree of ability and independence of elders, as well as by issues related to race and class. These are possible actions individuals can take to make a difference in the quality of their lives.

1. **Planning for changes in how elders approach the aging process.** Individuals can start planning for aging and retirement much earlier in life, thinking about health changes, finances and connections to the community. More communication is needed between elders and their family, including working together to prepare health care directives.
2. **Maintaining relations with family and friends.** Elders can maintain a community of support and companionship to reduce feelings of isolation and loneliness as they age. Intergenerational communication is essential to maintain these relationships.
3. **Education.** Elders can remain open to learning new things while they age and can look for opportunities to connect with younger people in intergenerational programs and gatherings.

Community

Some suggestions would require elders and their supporters to take community action. Collective action of the community would build on the actions of individuals by bringing elders together to build power and voice. These are important steps to build community and reduce the isolation of so many elders. It is also important that any action in these areas is considered for cultural sensitivity. Throughout the dialogues, elders requested more opportunities to interact with community members who speak the same language and share similar customs.

1. **Building elder power.** Individuals from cultural communities and across communities should come together and build a more powerful voice. With many voices allied together, elders can advocate for policy changes that will improve the lives of elders and their families.
2. **Affinity groups.** Elders who are part of cultural communities should come together on a regular basis to build community where people speak the same languages and share

customs. This can be more informal or in the form of community centers where individuals can organize activities of different types to reduce isolationism.

3. **Cultural inclusion.** Community centers and elder programs need to consider providing or expanding services in the form of culturally sensitive services, translation, food, etc. Centers and programs must also consider how to provide transportation so it is possible for more elders to participate.
4. **Outreach to the homebound.** Community centers also need to consider how to provide outreach to those elders who are unable to leave their homes to provide companionship and support.

Institutions and Government

Some reforms and policy changes will be best supported by institutions and government at the local, regional and state levels. Some of these actions will require the allocation of additional funding to meet the needs of the growing aging population. Increases in funding must be considered given the rapidly expanding baby boomer population.

1. **Public transportation.** Improvements in public transportation are necessary for elders to participate in community activities. Too many elders are no longer able to drive and must depend on different forms of public transportation. This will require more funds for regular bus and train services and changes in Metro Mobility to make it more accessible and affordable. This is even more important in Greater Minnesota, where elders are more isolated and will require more creative solutions.
2. **Housing.** Housing is one of the basic requirements for healthy aging. With the growing number of homeless elders this requires changes in local housing rules and the construction of more affordable housing. Local communities need to look at property tax rules that are taxing some elders out of housing they have lived in for many years. Different housing arrangements should be considered, including roommates that are not related but can provide companionship and support. This can be done with elders living together or through intergenerational housing. Policymakers must also examine housing rules, trends, and policies that lead to the displacement of too many elders and their families, such as better notice requirements and stronger eviction standards.
3. **Employment.** Many elders want to remain in the workforce, especially since so many elders rely exclusively on Social Security and SSI, which does not provide enough income. Federal action may be required to expand the amount of Social Security income available to seniors. Policy change may also be used to generate more opportunities for elders to continue working. Employer education about ageism would also be very important as well as more intergenerational conversations.
4. **Health care.** There may be no area more in need of reform for elders than health care. Institutional practices should be considered to ensure that different health care providers talk to one another to develop a more holistic, coordinated health plan for each individual. Changes are also needed in the cost of prescription medication, which for too many elders remains unaffordable. Health care plans are also too expensive for too many elders. Substantial increases in the availability of mental health services is

needed. Some of these actions require actions by institutions while others require actions by state and federal governments.

5. **Immigration reform:** Too many immigrant families remain separated from their families that are still living in their countries of origin. Other families are facing more recent, or possible, family separation. Reform is needed especially at the federal level to create an immigration system that honors family unity now and in the future.