Aging and Disability Resource Connection
Market Testing with Focus Groups

Albany • La Grande • Redmond

June 2011

Created for the Oregon Department of Human Services
Seniors and People with Disabilities Division
By Community Planning Workshop at the University of Oregon
AGING AND DISABILITY RESOURCE CONNECTION
MARKET TESTING WITH FOCUS GROUPS
JUNE 2011

CPW
Project Manager Francesca Patricolo
Project Contributor Serena Parcell
Co-Project Oversight Amanda West & Bethany Steiner

ADRC FOCUS GROUPS PROJECT LEAD
Jennifer Mead, Healthy Aging Coordinator DHS SPD
Kristi Murphy, ADRC Program Analyst State Unit on Aging DHS SPD

ADRC FOCUS GROUP PROJECT CONTRIBUTORS
Elaine Young, Manager of State Unit on Aging DHS SPD
Scott Bond, Director of Senior & Disability Services OCWCOG
Pamela Norr, Executive Officer Central Oregon Council on Aging
## Table of Contents

**Focus Group Summary Report**  
1

**Appendix A:** Individual Focus Group Reports  
14

**Appendix B:** Focus Group Strategy  
54

**Appendix C:** Focus Group Flyers  
67

**Appendix D:** Participant Response Quotes  
69

**Appendix E:** Marketing Material Images  
119

**Appendix F:** Focus Group Script  
126
BACKGROUND AND PURPOSE

In Oregon, the older population – people 65 years or older – numbered almost 491,000 and represented 13.2% of the state population in 2009. By 2030, the older population is projected to make up 20% of the state's population. In the United States there will be about 71.5 million older persons by 2030, more than twice their number in 2000. Planning and taking action for the long-term services and care needs of this population is essential for every state.

The Centers for Medicare and Medicaid Services (CMS) and the Administration on Aging (AOA) have jointly funded the development and implementation of community Aging and Disability Resource Center (ADRC) programs in 47 states and territories. There are now over 198 ADRC programs serving 38% of the U.S. population.

The ADRC program is designed to streamline access to long-term services and supports. It provides states with an opportunity to integrate the full range of long-term supports and services effectively into a single coordinated system. By simplifying access to long-term care (LTC) systems, ADRCs and other single-point-of-entry (SEP) systems are serving as the cornerstone for long-term care reform in many states.

An ADRC serves as a highly visible and trusted place where people, specifically older adults of any income level, adults (aged 18 and older) with disabilities, and their families, friends, and caregivers, can turn for unbiased, reliable information on the full range of long-term support options. An ADRC provides a seamless entry point to LTC services and supports – consumers can call one number, come to one organization, talk to one person, and begin the process of having their needs met.

The ADRC markets its services to the community it serves so that residents know where to go and how to get in touch with people who can help them. When people access the ADRC, they can be assured that the information they receive about long-term assistance and supports will be comprehensive, accurate, objective, and reliable. The goal is to empower people to make the best decisions for themselves or family members for whom they are seeking help.

In September 2008, the Seniors and People with Disabilities (SPD) division of Oregon’s Department of Human Services received a three-year grant to implement a prototype Aging and Disability Resource Center (ADRC) using Lane County as the pilot site. In fall 2009 the Community Planning Workshop (CPW) conducted a formative evaluation of the ADRC to help the SPD division gain insights from potential consumers and partners about the operations and marketing of the ADRC. Since completion of the formative evaluation, SPD has developed three pilot ADRC sites and an initial marketing plan to promote them.
In 2010, SPD approached CPW for assistance in conducting focus groups to test marketing messages and features of the Healthy Living portion of the ADRC website with potential users of the ADRC and their family members.

The purpose of a focus group is to collect information from potential users about their attitudes or opinions regarding an idea or service (the ADRC in this case). The interplay among participants in discussion of the subjects allows people to bounce ideas off of one another and to reach conclusions they may not have thought of on their own. This method is useful for collecting opinions from several potential users at one time. Often it is easier and more interesting for potential users to share their attitudes and opinions verbally, increasing participation and making results more demonstrative of the potential user group.

CPW conducted seven focus groups to collect information from potential users on two primary subjects: (1) how to reach them better through ADRC marketing materials, and (2) what types of information to include on the Healthy Living portion of the ADRC website. Focus group participants reviewed prototypes of brochures and posters and then discussed types of information they would like to see on the future Healthy Living website.

The information gathered will be used to improve the ADRC marketing plan to promote the pilot ADRC sites and ADRC website, and to provide input in the development of a Healthy Living section of the ADRC website.

**Focus Group Methodology**

Seven ADRC focus groups took place between March 2nd and April 21st, 2011, in Albany, La Grande, and Redmond. Each focus group had up to eight and no fewer than four participants each, for a total of 42 ADRC focus group participants. The majority of the participants were female. Males made up an estimated 30% of the ADRC focus group participants.

Recruitment strategies for the Albany and La Grande focus groups included participation incentives, advertising, and broad community outreach. To select focus group participants who fit potential ADRC user profiles, recruitment was directed toward individuals not currently receiving Oregon SPD services and who are:

- Baby boomers or older adults interested in community options that support aging;
- Caring for an aging parent or a family member with a disability; or
- Adults living with a disability.

The Central Oregon Council on Aging used its internal networks to recruit for the Redmond focus group.
There were no significant substantive differences among participant comments in the three locations. In general, all participants were engaged and pleased to provide information asked of them. Although the Redmond recruitment process was different than the Albany and La Grande recruitment processes and participants in Redmond were already familiar with many resources, their responses were not substantively different from the Albany and La Grande focus groups. There were a few small differences observed among focus groups in the different locations, but it is unclear if those differences can be attributed to geographic location or to particular individuals in each group.

We noted the following differences:

- All three groups in Albany especially stressed the importance of using images in the marketing materials that evoke emotional response.
- Participants in La Grande felt that the poster images were not representative of their community.
- In the discussion of the Healthy Eating section of the proposed Healthy Living website link, participants in Redmond especially emphasized that gardening/growing information on the website should be oriented to local conditions and needs.
**Findings**

CPW gathered information from participants and grouped their responses into similar categories to identify common opinions and compose key findings. This section contains ideas that we heard repeatedly in the focus groups and unique ideas that we felt warranted special attention.

1. **Icebreaker**

As an icebreaker, participants were asked to share activities or hobbies they enjoy doing. Responses indicate where the target audience may discover ADRC marketing materials and ways to appeal to the target audience’s interests. Participant interests ranged widely.

The most common responses included:

- Quilting (including attending quilt shows)
- Handicrafts (including knitting, crocheting, scrapbooking, and jewelry making)
- Gardening
- Hiking or walking
- Spending time with children or grandchildren
- Pets
- Volunteering (at secular, charitable, or service-based organizations)

Other common responses included:

- Bingo
- Bowling
- Golf
- Painting
- Photography
- Playing instruments
- Reading
- Sightseeing
II. Feedback on Marketing Materials

Participants reviewed and discussed ADRC marketing materials, including prototypes of a brochure and three posters.

A. ADRC Brochures

Participants shared their overall impressions of the brochure as well as content and the look of the brochure.

Overall

Participant impressions were that the ADRC:

- Provides a centralized resource and referral connection to social services, information, and assistance;
- Is a "one-stop" shop for getting help;
- Is a physical place that provides triage reference services; and
- Is geared toward seniors, people with disabilities (but mostly seniors and seniors with disabilities), and their caregivers.

Content

The main questions and concerns participants had regarding the ADRC included:

- **Who qualifies for ADRC services, and are there limitations to who can access them?** Some participants questioned their ability to qualify for ADRC services based on a variety of personal and individual case circumstances. Some wanted to know whether people who do not live in the area are eligible for services.

- **How much does it cost to access the ADRC?** Not all participants understood which aspects of the ADRC are free. Some participants were skeptical about the price of services to which they might be referred, believing that the true costs of accessing the ADRC are hidden.

- **How does one access the ADRC (and what is that process like)?** It was not apparent to all participants if they should call a number, look online, or go to a physical address to access the ADRC. Some wanted to know if they needed an appointment and how long it takes to access services. Some participants wondered if the ADRC could be reached by email and what times the ADRC can be reached by telephone. Some participants wanted to know what the available transportation options are for reaching an ADRC office.

- **How is the ADRC funded?** Participants particularly wanted to know the sources of funding for the ADRC and whether they are local, state, or federal sources.
• **What is the intent or role of the ADRC?** Participants wanted to know if the ADRC complements agencies that currently provide services or if it acts as an umbrella that gathers all agencies into one referral source. Similarly, they also wanted to know if the ADRC is filling a new need or replacing existing resources.

• **How can I get involved?** Participants wanted to know if there is a way to become involved with the ADRC via peer counseling or volunteering.

**Reliability**

Most participants believed the ADRC to be reliable and credible based on the marketing materials they reviewed. Participants noted features in the materials that added to the perceived reliability, including the DHS logo, quotes from a resource specialist and consumers, and a promising list of the ADRC’s helpful services.

Participants suggested additions that they felt would add more apparent credibility and authority to the ADRC. Suggestions included being referred to the ADRC or given a brochure by a trusted source such as a doctor, growing a reputation for good performance and helpful service, and providing more information about ADRC staff qualifications.

Although participants were unsure of how the ADRC is funded, there is reason to believe it is not a concern that would inhibit potential users from accessing services, because their primary concerns were about their own access. Participants did, however, indicate that they wanted more clarity about the structure of the ADRC, including its intent and role; providing this information would likely improve ADRC’s perceived reliability.

**Look of the Brochure**

When asked about specific features of the brochure, participants thought the organization of material was better than other design elements. Some participant opinions varied regarding the colors of the brochure due to some preferences for warmer colors; however, the colors ranked nearly as well as organization of material. Participants complimented the brochure’s readability (font size, font color, and placement of text). The photographs and clarity of content were the least favored aspects of the brochure and were the subjects of the most discussion.
The participants suggested the following improvements:

- Remove the green triangles from “ADRC” on the cover to make it easier to read.
- Remove the background writing on the cover.
- Make “Aging and Disability Resource Connection” larger.
- Make the photographs realistic, emotional, and show people being "connected" in a way that makes the viewers believe someone like them (or harder off) has been helped by the ADRC.
- Make it easier to figure out how to access the ADRC by adding more directive language (e.g., Call this number, contact us this way) to help with the overall clarity of the brochure.

B. ADRC Posters

Participants generally liked the posters but were critical of the photographs, indicating that they wanted to see more realistic and emotional displays of connection. Overall, participants preferred the poster depicting a man in a wheelchair; however, some commented that he
would look more “connected” if he had a dog with him. Many participants did not think the image of seniors on a scooter or the image of the large family were realistic, because they were overly positive.

III. Feedback on Proposed Healthy Living Website

Participants did not feel that there was already an adequate clearinghouse for this type of information and were positive about the potential usefulness of the website. Participants voiced that online resources are not often supplemented by personal interactions and that the website should have a phone number to call to discuss online information further.

Participants stated that they would use the ADRC’s website to access information as long as it was clearly laid out and simple to navigate. Some stated that it would be very important for the website to be found using a Google search. Some mentioned that they do not access websites because they do not have a computer at home. Many participants say they use the library to find health information.

A. Feedback on Proposed Website Categories

Participants were asked about four specific categories that are proposed areas of the planned Healthy Living website. Participants were asked what information they would expect to find under each category.

Physical Activity

Participants were asked what they would like to see under the heading Physical Activity on the ADRC’s Healthy Living website. Responses include:

- **A calendar of local events/activities:** Include links to access more information about them. Suggestions include swim classes at the YMCA, senior bowling leagues, and exercise classes.

- **Walking information and places to go:** Include information about walking tours; organized walking groups; educational, architectural, or historical walks; local sightseeing information; bicycle and walking trail maps (with distances and directions); and a list of handicap-accessible playgrounds.

- **Exercises:** Include simple movements that can be incorporated into daily activities (such as lifting and taking the stairs) or that can be done while sitting or at home, and include exercises for people in wheelchairs and other people with disabilities. Other suggestions include physical therapy exercises that caregivers can administer to increase range of motion, breathing exercises, exercises that promote relaxation, aerobics, and exercises that target specific parts of the body, such as legs and arms.

- **Information on gyms:** Include a list of local gyms, pools, and other places to work out, including a map of their locations and membership fees. Provide information regarding transportation options for reaching them and schedules for exercise classes appropriate for people with specific disabilities, such as fibromyalgia.
• **Free ways to get exercise:** Include a list of ways, places, and good locations to exercise.

• **Professional service contacts:** Include contact information for physical therapists.

• **Clubs:** Include a list of clubs that promote physical activities, such as bird-watching, day hikes, walking, golfing, and cross-country skiing groups.

• **The importance of physical activity:** Include information linking physical activity to a healthy diet.

**Healthy Eating**

Participants were asked what they would like to see under the heading *Healthy Eating* on the ADRC’s *Healthy Living* website. Responses included:

• **Nutrition and diet information:** Include the benefits of certain foods, the importance of a healthy diet, general nutrition information and tips, information about healthy fats and sugars, information comparing complex versus simple carbohydrates, and the benefits of breakfast. Participants also wanted to see nutrition and diet information for people who have diabetes, hypertension, or other diagnosed diseases that require restricted diets. For more information, participants would like to have a phone number for a diabetic educator on the website.

• **Fresh local food:** Include information about local farmers markets and how to get there as well as how to access community-supported agriculture (CSA) programs. Participants also wanted to see a table indicating the shelf life of fresh vegetables.

• **Fast and healthy recipes:** Include recipes that have large font sizes, are easy to print, and come in smaller serving sizes. Special types of recipes participants wanted include recipes for low-sodium meals, very quick meals (ten minutes or less), and diabetics.

• **Reference listings:** Include a list of cooking classes and weight-loss programs.

• **Gardening information:** Include gardening advice appropriate for the local climate. Participants also felt that there should be information specifically geared toward first-time gardeners and indoor gardening.

• **Grocery and cooking assistance:** Include information about how someone could access in-home care that provides cooking services and help with grocery shopping.

• **Quick and healthy food:** Include lists of frozen meals and healthy snacks, as well as their nutritional information.

**Managing Our Health**

Participants were asked what they would like to see under the heading *Managing Our Health* on the ADRC’s *Healthy Living* website. In general, participants thought the term *Managing Our Health* was too broad or that its contents could fit under the other categories. Responses include:

• Information about drug interactions;
• Information on signs of diabetes;
• Instructions on how to take one’s own blood pressure;
• A list of local pharmacies and the services provided (flu shots, blood-pressure testing, etc.);
• Where to obtain discounts and samples on medical supplies;
• A list local hospices and home care services;
• A list of alternative medicine sources such as naturopaths and acupuncturists;
• "Life Line" and "Call Button" information;
• Upcoming health-related workshops on managing chronic conditions;
• Ideas for reducing stress; and
• A suggested timeline for checkups and other health-related tests and activities.

**Staying Connected**

Participants were asked what they would like to see under the heading *Staying Connected on* the ADRC’s *Healthy Living* website. Participants in two of the groups felt that the *Staying Connected* term related to mental-health issues though, based on the marketing materials, they believed that the ADRC does not actually provide mental-health resources. Although these participants wanted to see mental health included in ADRC services, they believed *Staying Connected* to be a misnomer because the ADRC does not provide mental health services. The Staying Connected heading on the ADRC website surprised some participants who thought they had an understanding of the types of services the ADRC provided based on the marketing materials they reviewed.

Participants noted that *Staying Connected* is very important for seniors and people with disabilities, and they suggested several items to include on the website – many of which were precisely repeated in multiple focus groups. Additionally, some participants wanted to stay connected to the ADRC and its *Staying Connected* resources through a semi-frequent newsletter.

Participants also wanted to see:

• **A calendar**: Include local social activities for seniors and people with disabilities, and a calendar of all entertainment events in the area. Suggestions of social activities included bingo nights, church-sponsored trips to community gardens, quilting fairs, card and board game gatherings.

• **New programs and classes**: Include a listing of new programs and classes in the community, such as computer classes at the library or photography classes.

• **Clubs and associations**: Include a list of local associations and clubs that seniors might join.

• **Short group trips**: Include listings for group trips to places a little farther away where people could go together on a bus, such as a quilt show in Sisters or a shopping trip to Portland. Some participants wanted the ADRC to organize trips for seniors.
• **Volunteer opportunities:** Include a list of places where people could volunteer and how they can get volunteers to meet them to discuss topics of mutual interest.

• **An invitation from ADRC:** Include a welcome to individuals who need help staying connected by using a phrase such as, “If you don’t know what to do or where to go, talk to us.”

### B. Suggestions for Other Health Topics and Categories

Participants suggested the following headings for possible inclusion on the Healthy Living website:

• **Community Resources:** Include links to other existing, trusted websites categorized by subject.

• **Financial Resources/Assistance:** Include ways to supplement one’s income, live on a fixed or small income, and access supportive related services.

• **Managing Stress:** Include methods and resources for healthy handling of stressors common to seniors, people with disabilities, and their caregivers.

• **Mental and Emotional Health:** Include resources for individuals with mental and/or emotional health concerns.

• **Maintaining an Active Mind:** Include resources and ideas for maintaining an active mind, including trivia questions on the website.

• **Staying Safe, Staying Healthy, and Staying Independent:** Include these three terms as an alternative to the four topic headings in the prototype. The terms were used in the focus groups as an introduction to the goals of the website.

• **Staying Independent:** Include resources for helping seniors and people with disabilities to keep their independence – something participants said was very important for them to do personally.

### Recommendations

Based on the findings, CPW developed recommendations to improve the ADRC marketing strategy.

**Overall**

• Prepare ADRC staff to answer questions regarding the ADRC’s connection to mental-health services.

• Highlight services to adults with disabilities in the marketing materials and on the website.
• Add a reassuring statement to the website and marketing materials to address ease of access, service cost, and ability to provide personal service. Suggestions include, “Fast, free information that suits your needs,” “It’s easy to get the free information you’re looking for,” and “The free information that can help you is as easy as picking up the phone.”

• Add directive language in the marketing materials and on the website for how to access the ADRC (e.g., “Visit us online at www.ADRCofOregon.org,” "Call your local branch at 541 XXX-XXXX,” or "Stop by and visit our office at *address*").

• Add directive language to the marketing materials and on the website as a call to action for potential users who have specific questions (e.g., “Call us today to ask how we can meet YOUR specific needs: 1-800-XXXX”).

• Include a map or image of ADRC office locations on the brochure and website to improve clarity regarding access and locations.

Reliability

• Emphasize the DHS logo on marketing materials and on the website to enhance the ADRC's image as a credible organization.

• Have ADRC brochures available in doctor’s offices.

• Add a quote from a doctor endorsing the ADRC and its reputation in the brochure. This may be enhanced by an image of a particularly wise and honest-looking doctor.

• Keep the resource specialist and consumer quotes in the brochure.

• Keep the lists of example ADRC services in the brochure.

• Include a word or statement about the authority and credibility of ADRC staff in the brochure and on the website. A statement like the one on the posters that says, “Our professional staff can help you in many ways” may be suitable.

Brochure & Posters

• Keep the same general organization of the material, colors, font size, font color, and placement of text in the brochure.

• Remove the green triangles from “ADRC” in the marketing materials to make it easier to read.

• Remove background writing on the cover of the brochure to increase legibility.

• Increase the size of the spelled-out ADRC acronym (“Aging and Disability Resource Connection”) in the marketing materials.

• Make the photographs in the marketing materials more accurate by removing overly joyful human images.
• Add images to the marketing materials that show emotional displays of connection in the marketing materials such as images of people receiving needed help.

• Include images representative of the local community on the website and in marketing materials.

• Add directions to potential users in the marketing materials about how to reach the ADRC for the first time.

• Provide additional language in the brochure about the structure of the ADRC, including its intent and role.

• Determine whether the ADRC will offer potential users and partners the opportunity to volunteer. If yes, provide a statement of invitation in the brochure with a contact phone number.

**Healthy Living Website**

• Purchase Google advertising space to ensure the Healthy Living website ranks high in Google searches.

• Ensure all information on the website is clearly laid out and simple to navigate.

• Include an obvious phone number on the website and a directive statement for website users to call for additional information.

• Consider incorporating the recommended topics and alternative or additional headings provided by participants.

• Include a calendar feature to display a range of local opportunities for classes, activities, and events on the website.

• Include a range of information specifically tailored to individuals with diabetes.
# APPENDIX

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix A:</td>
<td>Individual Focus Group Reports</td>
<td>14</td>
</tr>
<tr>
<td>Appendix B:</td>
<td>Focus Group Strategy</td>
<td>54</td>
</tr>
<tr>
<td>Appendix C:</td>
<td>Focus Group Flyers</td>
<td>67</td>
</tr>
<tr>
<td>Appendix D:</td>
<td>Participant Response Quotes</td>
<td>69</td>
</tr>
<tr>
<td>Appendix E:</td>
<td>Marketing Material Images</td>
<td>119</td>
</tr>
<tr>
<td>Appendix F:</td>
<td>Focus Group Script</td>
<td>126</td>
</tr>
</tbody>
</table>
Focus Group Summary Reports

Each 1 ½ hour focus group included an introduction with a description of the project and its purpose, confidentiality statement, and ground rules; an icebreaker that asked participants about their activities and hobbies; conversations about marketing materials including a brochure (discussion of the brochure overall, its content, and the look of it) and three posters; a discussion about a Healthy Living Website and its content; and a wrap up.

Albany Focus Group #1

DETAILS

Session: 1st of 7
Date: Wednesday March 2nd, 2011
Time: 5:30-7:00pm
Location: Ray’s Food Place - 621 NW Hickory Street Albany, OR 97321
Participants: 8
Facilitator: Francesca Patricolo, CSC Intern Project Manager
Note taker: Amanda Stocker-West, CSC Project Manager
Guests: Elaine Young, Manager of State Unit on Aging DHS SPD
        Jennifer Mead, Healthy Aging Coordinator DHS SPD

ICEBREAKER: ACTIVITIES & HOBBIES

As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions, in which they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful: the responses give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests.

Although there were some commonalities among the interests of participants (including gardening, quilting/ sewing, and grandchildren), there was also great variation. Unique responses included using the internet, scrapbooking, bowling, bingo, beading and jewelry making, dogs, their kids, volunteering, and motorcycle riding.
Marketing Materials

Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.

Brochures

Participants shared their Overall Impressions of the brochure as well as Content and the Look of the brochure. Each segment (Overall, Content, and Look) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

Overall

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

- Provides a ‘one-stop’ resource and referral connection to social services, information, and assistance.
- Is a place to turn to for help.
- Is for seniors, people with disabilities, and their caregivers.

Other responses indicate some participants may have believed the brochure to be geared toward healthcare professionals or seniors alone.

Content

Following discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Three main questions were:

- **Who qualifies for ADRC services and are there limitations to who can access them?**
  Some participants were unsure if the ADRC could help them in the ways they need. They questioned their ability to access the ADRC if they fell on their motorcycle, receive social security and disability benefits already, were a younger person with a disability, or are a senior without a disability. They also were concerned with how much accessing ADRC
Focus Group Summary Reports: Albany Focus Group #1

services would cost, what kind of qualifications and limitations they would be subjected to, and if they would have to provide their financial information to the ADRC.

- **How does someone access the ADRC?** Some participants were unsure how to access the ADRC. They wondered if the ADRC has a physical location or if it is just a phone number or a website. They expressed uncertainty about what their access options are.

- **How is the ADRC funded?** Some participants were unsure who funds the ADRC/ how the ADRC is financed.

**Reliability**

Participants gave general consensus that the ADRC appeared reliable based upon the content of the brochure.

**Look**

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the clarity of content and the photographs of the brochure to be the least satisfying aspects while the readability was rated the highest on average.

<table>
<thead>
<tr>
<th>ALBANY FOCUS GROUP 1</th>
<th>1 I dislike it a lot</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 I like it a lot</th>
<th>AVG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>0</td>
<td>3.5</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>5</td>
<td>0</td>
<td>3.6</td>
</tr>
<tr>
<td>Photographs</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td>3.1</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>3.8</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>3.2</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>
Focus Group Summary Reports: Albany Focus Group #1

Cover
Participants were asked for their opinions about the cover of the brochure and generally agreed it is ‘just fine’. Most of the participants that rated the cover a ‘4’ still noted it lacks qualities to be outstanding or especially attention-grabbing. Participants provided suggestions for improvement that include making the words ‘aging and disability’ bigger, changing “Get connected” to “Here’s help for you”, removing some of the background ‘busyness’, and removing the triangles in the ADRC logo.

Colors
Participants were asked what they thought about the colors used in the brochure and their opinions were more on the side of liking them than thinking they were average. They generally agreed that the colors are calming but not particularly attention-grabbing. Three participants thought red would be a more noticeable font color; one stated he/she would like to see it “warmed up” perhaps with a colored background like beige or purple. Another commenter preferred lime green rather than the current shade of green.

Photographs
Participant opinions on the photographs ranged from dislike to like, but weighed more towards average overall. The majority of participants stated that the people in the photographs did not appear realistic and implied desire for more realistic human images. Reasons for this included that people in the photographs do not look like they need assistance, look too perfect, beautiful, or healthy, and appear too happy to be realistic. Other opinions included that the brochure needs more images of people with disabilities because the photographs are more slanted to seniors, that the photographs should be positioned higher in the brochure, and that photographs should show ‘people getting physically connected’.

Readability
Participant opinions on the readability (font size, font color, placement of text) ranged from average to like it a lot, with more weight given to them liking it overall. Participants noted the font size was readable.

Organization of Material
Participant opinions ranged from not liking the organization of the material to liking it. Overall, participants liked the organization a little bit more than average.

Clarity of Content
Participant opinions on the clarity of content (whether it is easy to understand) ranged from dislike to like, balancing out at average. Ratings suggest participants could benefit from efforts in improving the general clarity of content.
Posters

Participants had ten minutes to discuss their overall impressions of three posters. Reactions to the poster with an image of people riding a moped together indicated general dissatisfaction because it appeared unrealistic to participants. Comments included that the people in the image did not look like they needed help or assistance. One participant who did not think the photograph was realistic for ADRC’s intended service commented, “Why is money being spent on them? Others who are more needy need it.”

Regarding the poster of a family, participants had mixed opinions. Some stated that the family looked unrealistic, that they did not need help, and it looked like money was provided for people who did not need it. Others stated that the image demonstrated positive effects of what ADRC services could provide.

Regarding the poster of an individual in a wheelchair, participants generally concluded that it created the emotion of connection. One participant commented, “The guy in the wheelchair looks like he has been connected and he looks proud of it.”

Other comments included that “Our professional staff can help you” is a great message but needs to be larger, that the reverse type white against blue was difficult to read, more of the lettering needs to be bold, and there needs to be a phone number on the posters. Some participants suggested communicating some of the ADRC services on the posters to help them understand what the ADRC does when they look at them.

Healthy Living Website

Participants had 30 minutes to discuss the Healthy Living Website. The website was explained including the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see.

Some participant suggestions included changing the titles of resource areas to ‘staying safe,’ ‘staying healthy,’ and ‘staying independent’; terms that were used in the facilitation as an introduction to the goals of the website. Several participants voiced that a subject heading called ‘financial assistance’ that contained many resources and links would be more helpful than any of the other headings. One participant suggested the topic title ‘staying independent’ because as a senior, it is important to them.

Physical Activity

Participants thought it would be helpful to have a calendar of local events and activities and links to access more information about them. Events and activities suggested included swim classes at the YMCA, bowling league (there is a senior league), and exercise classes. Some participants thought it would be helpful to have links to different types of exercises as a ‘how to’.
Focus Group Summary Reports: Albany Focus Group #1

Healthy Eating

Some participants did not believe Healthy Eating to be particularly useful compared to the other topics. Some felt that rather than Healthy Eating, topic headings should include ‘Nutrition’ and ‘Access to a Meal.’ In support of the heading ‘Access to a Meal,’ one participant stated, “What if I need help with someone bringing me groceries?”

Managing Our Health

Some participants thought the term Managing our Health was too broad and not as important as the physical activity subject or community resource links that should be under the subject of ‘Staying Connected.’

Staying Connected

On the whole, participants were not tied to the term Staying Connected and expressed preference for the title ‘Community Resources’ under which users could find links to other existing, trusted websites categorized by subject.

Wrap Up

Guest Elaine Young, Manager of the State Unit on Aging with the Department of Human Services Seniors and People with Disabilities division, provided a brief concluding explanation of the ADRC and its purpose in order to answer any questions that may have remained until then. Gift card winners were selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: Albany Focus Group #2

DETAILS
Session: 2nd of 7
Date: Saturday March 5th, 2011
Time: 10:00-11:30am
Location: Albany Senior Center – 489 Water Ave NW Albany, OR 97321
Participants: 4
Facilitator: Francesca Patricolo, CSC Intern Project Manager
Note taker: Amanda Stocker-West, CSC Project Manager
Guests: Kristi Murphy, ADRC Program Analyst State Unit on Aging DHS SPD
Scott Bond, Director of Senior & Disability Services OCWCOG

ICEBREAKER: ACTIVITIES & HOBBIES
As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions, in which they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful: the responses give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests.

Participants in this focus group enjoyed ‘staying political’ and painting. One participant stated that he/she often participated in public outreach groups, like Alcoholics Anonymous and Narcotics Anonymous.

Marketing Materials
Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.
Brochures

Participants shared their Overall Impressions of the brochure as well as Content and the Look of the brochure. Each segment (Overall, Content, and Look) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

Overall

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

- Is a centralized source for information for people needing assistance.
- Connects services to people who need them.
- Is geared towards seniors and people with disabilities (mostly seniors and seniors with disabilities).

Other responses indicate participants think the ADRC is “the first place to look” for information, is geared toward care givers, and leaves out the mentally ill.

Content

Following the discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC. Participants stated that they would like more information on the following:

- The sources of funding for the ADRC and whether they are local, state or federal sources.
- Appropriate first steps for accessing the services of the ADRC (i.e. stop by the location on the back, call, or go online).
- The intent of the ADRC: Is the intent to compliment agencies currently providing services or to act as an umbrella that gathers all agencies into one?
- Whether the ADRC is filling a new need or replacing existing resources.
Focus Group Summary Reports: Albany Focus Group #2

Several participants expressed delight over the perceived service the ADRC would be providing, indicating it would help them and others they know. One participant said, “[The ADRC] would reduce the redundancy out there.” Others expressed exasperation for their experiences attempting to receive help for aging and disability support without a one-stop resource like the ADRC. One participant said, “It is really hard to navigate. My sister gave up trying to navigate the system.” Another said, “It is so tiresome. One agency is not communicating with the next agency. You get so tired that you give up. Did they finally figure out that they need one agency?! (sarcasm)”

Reliability

Participants ranked their perceptions of the reliability of the ADRC as ‘average,’ based on the information contained in the brochure. Participants stated that the program’s association with DHS raised its level of reliability, but that a lack of racial diversity in the brochure diminished it. Participants also stressed the importance of the brochure being provided by a trusted source in order to increase the perceived reliability of the organization.

Look

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the readability of the brochure to be the least satisfying aspect while the photographs were rated the highest on average.

Table 2: Results of Look of Brochure Survey at Second Albany Focus Group.

<table>
<thead>
<tr>
<th>ALBANY FOCUS GROUP 2</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>AVG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>2.8</td>
</tr>
<tr>
<td>Photos</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3.1</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>2.3</td>
</tr>
<tr>
<td>Organization</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2.8</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2.8</td>
</tr>
</tbody>
</table>

Cover

Participants were asked for their opinions about the cover of the brochure and provided predominantly critical feedback. Opinions ranged from dislike to like a lot. Participants felt that the ‘busyness’ of the brochure’s background would cause people with disabilities, especially
mental disabilities, to have trouble reading it. The phrase ‘Get Connected’ was suggested to be too vague and slightly confusing. Participants suggested the following changes for the cover:

- Remove the green triangles from within the ‘ADRC’ title.
- Remove the green header at the top of the cover, or edit to make it bolder, larger and more readable.
- Edit or remove the background font.

Colors

Participants were asked what they thought about the colors used in the brochure. Participants thought the colors were about average. They liked the shade of green used in the body of the text, but found the blue shading inside of the brochure (containing testimonials) to be confusing. A group member found the colors to be ‘gang-like’.

Photographs

The group was divided across the spectrum with their opinions of the photographs but overall opinions were more positive than negative. The majority of participants found the pictures to be unrealistic, however; they felt that the subjects of the photographs should be visibly in need of help, in order to make them more relatable to those who might read the brochure. Participants also suggested that the photographs should depict a more diverse group of people.

Readability

Participants generally disliked the readability. Participants once again noted that the blue shading inside (containing testimonials) was confusing and reduced the readability of the brochure. They also suggested that the brochure would benefit from more white space, rather than repetition of information and themes.

Posters

Participants were given ten minutes to discuss their overall impressions of three posters. Participants felt that the posters were generally difficult to read, due to small font sizes and ‘too many words.’

Opinions about the poster depicting seniors riding a scooter were conflicted; some participants found the poster be ‘unrealistic,’ while some thought that it was not. Participants generally liked the poster depicting a man in a wheelchair, stating that it was the most relatable.

However, participants felt that the posters should instead feature a senior couple; one sitting in a chair, with another person (her caregiver) standing behind the chair. Participants also suggested picturing a senior citizen and an adult child.
**Focus Group Summary Reports: Albany Focus Group #2**

**Healthy Living Website**

Participants were then introduced to the *Healthy Living Website*. The website was explained including the four resource areas that might be covered on it. The four resources (*Physical Activity*, *Healthy Eating*, *Managing our Health*, and *Staying Connected*) were written on a flip chart for all to see. Participants stated that they would like to see a ‘Financial Resources’ section added to the website (this sentiment was expressed again at the end of the session).

**Physical Activity**

Participants stated that they would like to see exercises in this section of the website, including simple movements that can be incorporated into daily activities (such as lifting and taking the stairs), exercises that can be done while sitting, physical therapy motions that caregivers can administer to increase range of motion, breathing exercises, exercises that promote relaxation, and a list of local group exercise classes.

**Healthy Eating**

Participants stated that they would like to see nutrition information specific to diabetics, information about local farmers markets and Community Support Agriculture, and information about the shelf life of fresh vegetables.

**Managing Our Health**

Participants felt that the topic should be entitled ‘*Managing Your Health,*’ and that it should include information about drug interactions.

**Staying Connected**

Overall, participants did not believe that the title evoked a certain kind of information, and that it might be titled ‘*Social Connections,*’ instead. One participant stated that the section might include church-sponsored trips to community gardens.

**Other Health Topics**

When asked what other facets of health were important to them, participants noted their emotional, spiritual and mental health. There was a strong focus on finding activities that keep the mind healthy and active, either in the community or at learning centers or through volunteering.

When asked how participants currently access health information, they agreed that the library was the source most commonly used. Other sources cited were the Food Network, the radio, Linn-Benton Community College and Oregon State University’s Extension Office and personal physicians. They stated that they would use the ADRC’s website to access information, as long as it was clearly laid out and simple to navigate.
WRAP UP

Guest Kristi Murphy, ADRC Program Analyst State Unit on Aging with the Department of Human Services Seniors and People with Disabilities division, provided a brief concluding explanation of the ADRC and its purpose in order to answer any questions that may have remained until then. Gift card winners were selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: Albany Focus Group #3

DETAILS

Session: 3rd of 7
Date: Saturday March 12th, 2011
Time: 12:30-2:00pm
Location: Ray’s Food Place -621 NW Hickory Street Albany, OR 97321
Participants: 7
Facilitator: Francesca Patricolo, CSC Intern Project Manager
Note taker: Amanda Stocker-West, CSC Project Manager
Guests: Jennifer Mead, Healthy Aging Coordinator DHS SPD

ICEBREAKER: ACTIVITIES & HOBBIES

As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions, in which they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful: the responses give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests.

Multiple participants noted they enjoy quilting (including some who attend quilt shows), gardening, walking, volunteering (at church and local charitable organizations), playing instruments, photography, and reading. Other activities mentioned included arts and crafts, housekeeping, travelling, and astronomy.

MARKETING MATERIALS

Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.
Brochures

Participants shared their *Overall Impressions* of the brochure as well as *Content* and the *Look* of the brochure. Each segment (*Overall, Content, and Look*) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

**Overall**

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

- Does not provide senior and disability services itself but guides people to the services they need.
- Is more for seniors, seniors with disabilities, and those who care for them.
- Is a ‘one-stop’ starting place for getting help.

One participant believed the ADRC is for people to receive the above help because he/she cannot afford services they need.

**Content**

Following discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Participants wanted to know more about ADRC, specifically if services are funded by tax dollars. They also wanted to know if it was new or how long services have been available. Others wanted to know more about some of the services provided, specifically if in-home visiting by volunteers (to give seniors company) or hospice care is included. One participant wanted clarity about whether or not the ADRC had a physical location or not.

**Reliability**

Participants noted that reliability would be based upon ADRC performance after it builds its reputation, however they gave general consensus that the ADRC appeared reliable based upon the content of the brochure. On a scale of 1 to 5 where 5 is ‘very reliable’, most participants rated it a 5. Participants who rated lower would like to see performance results first while some
of the participants who rated it higher noted they did so because of the quotes and the promising list of helpful services.

**Look**

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the photographs and clarity of content of the brochure to be the least satisfying aspects. The cover was rated the highest on average, however this group also rated all the other aspects highly, including the colors, readability, and organization.

**Table 3: Results of Look of Brochure Survey at the Third Albany Focus Group.**

<table>
<thead>
<tr>
<th>ALBANY FOCUS GROUP 3</th>
<th>1 I dislike it a lot</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 I like it a lot</th>
<th>AVG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>4.2</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Photographs</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>2</td>
<td>3.8</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2.3</td>
</tr>
</tbody>
</table>

**Cover**

Participants liked the cover and did not offer additions or alterations to it.

**Colors**

Participants liked the colors of the brochure. One participant noted that the color choice is good because red and yellow are not good for people losing their eyesight.

**Photographs**

Participants generally disliked the photographs in the brochure. Many did not feel like the photographs reflected enough of an emotional response demonstrating people in need receiving valuable assistance. One participant stated that the woman in a wheelchair on the cover is the best of all the photographs because it looks like she has been helped. Another stated he/she would like to see someone in bed smiling at the viewer to invoke a more emotionally connective response. Although others expressed some disagreement, other opinions included that images are not important to the overall message of the brochure, and
that graphic images might be better than actual photographs because it is hard for them to connect with the images since they are strangers.

**Readability**

Participants liked the readability (font size, font color, placement of text) of the brochure. Some participants noted that black font against a white background would be easier to read.

**Organization of Material**

Although one participant did not like the organization at all, most participants liked it. Criticism justifying the low rating was unclear, however may have actually been related to clarity of content.

**Clarity of Content**

Opinions ranged from dislike to like, however most disliked the clarity of content. Ratings suggest participants could benefit from efforts in improving the general clarity of content.

**Posters**

Participants were given ten minutes to discuss their overall impressions of three posters. Participants expressed differences of opinions in reaction to the posters. Criticisms indicated general dissatisfaction with the scooter and family posters because the happiness illustrated in the photographs appeared unrealistic to some participants. One participant commented that the man in the wheelchair looked more realistic. They did not think those images invoked a strong enough emotional response to encourage one to access the ADRC. Another opinion was that images are confusing and unnecessary if the words were clear and direct. On the other hand, one participant commented “I like those seniors on the scooter.” Participants gave suggestions for images that could invoke more of an emotional response, including an activity like gardening or service-oriented photographs.

**Healthy Living Website**

Participants had 30 minutes to discuss the Healthy Living Website. The website was explained including the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see.

**Physical Activity**

Some participants mentioned they would like to see information about walking tours and organized groups of people who go on walks together and suggested educational architectural or historical walks as well as local sight-seeing information. They also would want to read information linking physical activity to a healthy diet.
Healthy Eating

Suggested elements of *Healthy Eating* include recipes, particularly ones in large font sizes which make it easy to print them. Also mentioned was diets for people who have diabetes or hypertension and low-sodium options, as well as diet information for people who are recently diagnosed with a disease.

Managing our Health

Elements of *Managing our Health* that participants suggested for the website included information for people looking for help getting to the store and with grocery shopping, information on signs of diabetes, information from dietitians, and instructions on how to take one’s own blood pressure.

Staying Connected

Participants gave many suggestions for elements of the *Staying Connected* portion of the *Healthy Living Website* including information on new programs individuals could join or participate in, such as computer classes at the Library. Other suggestions included photography groups or classes, music clubs, ongoing events, quilting fairs, and short group trips further away where people could go together on a bus to a quilt show in Sisters or a shopping trip to Portland. Some would also like to see request postings for needed volunteer jobs. Another suggestion was a list of people who could come and discuss certain topics of interest with them, such as how to start new hobbies, and ways to network with other people. One participant suggested the ADRC facilitate organizing trips for seniors. Multiple participants indicated it would be great to receive a newsletter about the ADRC.

Wrap Up

Guest Jennifer Mead, Healthy Aging Coordinator with the Department of Human Services Seniors and People with Disabilities division, provided a brief concluding explanation of the ADRC and its purpose in order to answer any questions that may have remained until then. Gift card winners were selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: La Grande Focus Group #1

 DETAILS
Session: 4th of 7
Date: Thursday March 17th, 2011
Time: 5:30 – 7:00pm
Location: La Grande Public Library – 2006 4th St, La Grande, OR 97850
Participants: 6
Facilitator: Amanda Stocker-West, CSC Project Manager
Note taker: Ben West, CSC Assistant
Guests: Kristi Murphy, ADRC Program Analyst State Unit on Aging DHS SPD

 ACTIVITIES & HOBBIES
As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions where they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful. They give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests. Answers included hiking, camping, visiting local waterfalls, and sightseeing.

 MARKETING MATERIALS
Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.
Focus Group Summary Reports: La Grande Focus Group #1

Brochures

Participants shared their Overall Impressions of the brochure as well as Content and the Look of the brochure. Each segment (Overall, Content, and Look) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

Overall

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC is a free resource that provides informative connections for seniors, people with disabilities, and people with health problems to get help they are looking for. Other responses indicated that some participants believe the brochure is geared toward a much broader audience including anyone who knows a senior/person with a disability.

Content

Following discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Main areas of concern regarded:

- **Location of ADRC:** Participants wanted to know if there are any local ADRC offices and wondered what the distance is to other ADRC offices. Another participant was curious about transportation options for reaching the ADRC office.

- **More information:** One participant wanted to see a longer list of all the services the ADRC provides and more information about who the ADRC may provide services to. Another participant wanted to know how to find out more about the ADRC on-line.

Reliability

Participants were asked to rank their perception of the reliability of the ADRC, based on the brochure and using a scale of 1 through 5. A 5 meant that the participant perceived the ADRC’s services to be highly reliable. One participant stated that mentioning the Department of Human Services within the brochure lent increased credibility to the ADRC. One participant answered with ‘4’ and one with ‘5,’ while others stated that they could not rate the organization’s reliability based on the brochure.
Focus Group Summary Reports: La Grande Focus Group #1

Look

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the cover of the brochure to be the least satisfying aspect while the organization was rated the highest on average.

Table 4: Results of Look of Brochure Survey at the First La Grande Focus Group.

<table>
<thead>
<tr>
<th></th>
<th>LA GRANDE FOCUS GROUP 1</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Cover</td>
<td>0</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
</tr>
<tr>
<td>Photographs</td>
<td>0</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>0</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0</td>
</tr>
</tbody>
</table>

Cover

Opinions about the cover ranged from dislike to like a lot, but overall, participants liked the cover. Some participants provided suggestions for improvement including use of brighter colors, editing of the background words to be darker or brighter, removal of the phrase ‘get connected’ (which a participant commented does not connote the services that ADRC provides), and a larger font for the ‘ADRC’ title on the cover of the brochure.

Colors

Participants enjoyed the colors used in the brochure. One stated that he/she thought the colors were nice but were not enough to catch the attention of passers-by. Another participant suggested using yellow accents and other participants agreed.

Photographs

Participants liked the photographs in the brochure. When asked for their thoughts on the photographs contained in the brochure, participants generally liked the diversity of the people photographed. When asked about the cover photograph, participants suggested adding a person with a physical disability to the photograph, enlarging the photographs and adding a photograph to the center of the brochure to replace the phrase ‘get connected.’
Some participants stated that they would like to see more photographs inside the brochure, specifically ones that contain young people or a family.

**Readability**

Participants overwhelmingly liked the readability.

**Organization of Material**

Participants liked the organization of material. Criticism mentioned that the bullet items listed inside the brochure appeared to be in random order. Some participants appreciated the organization of the contact information on the back cover though.

**Clarity of Content**

Participants were generally satisfied with the clarity of the brochure’s content; however, they requested expanded ‘information for assistance’ on the front cover and a ‘washed-out’ picture of the ADRC’s physical location on the back cover.

**Posters**

Participants were given ten minutes to discuss their overall impressions of three posters. Participants enjoyed the poster depicting a family, noting that they liked the family and that the people in this poster are smiling and seem connected to one another.

Participants felt that the individual in the wheelchair on the second poster looked lonely and that they would prefer to see him smiling. They would have liked to see a caretaker or animal on the poster as well (one participant suggested a Golden Retriever). Participants felt that these additions would more accurately express that he was ‘connected.’ One participant also felt that the phrase ‘Get Connected’ should be changed to better reflect that the ADRC provides help.

The third poster (depicting senior citizens on a moped) garnered positive feedback. Participants liked that the subjects were smiling and appeared to be having fun and stated that they seemed ‘connected.’

Participants suggested the addition of a phone number to the posters. They liked the size of the font and that the style of the brochure and the posters matched.

**Healthy Living Website**

Participants were then introduced to the Healthy Living Website. The website was explained including the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see.

One participant suggested adding a resource for ‘Managing Stress’ and all participants agreed that it was important to include a ‘Mental and Emotional Health’ resource. Participants also stated that staying positive and maintaining positive family relations, self-esteem and spiritual
Focus Group Summary Reports: La Grande Focus Group #1

health were important for their overall health. One participant also suggested adding trivia questions to the website.

Participants did not feel that there was already an adequate clearinghouse for this type of information and were positive about the potential usefulness of the website. Participants voiced that online resources are not often supplemented by personal interactions and that the website should have a phone number to call to further discuss online information with more personal service.

Physical Activity

Participants were asked what information they might like to see included in this section of the website. Participants mostly discussed types of exercises they would like information on including exercises that can be done in the home; exercises for people in wheelchairs and other people with disabilities; exercises that target specific parts of the body, such as legs and arms; and exercises that relieve stress. Other suggestions included maps of local trails (with distances and directions), and ideas for activities that keep the mind and hands busy, such as scrapbooking and beading noting that some people can only use their hands.

Healthy Eating

Participants were asked what information they might like to see included in this section of the website. Answers included information about how to prepare very quick meals (ten minutes or less), healthy recipe ideas, information for diabetics about recipes and cooking (especially snacks), a phone number for a diabetic educator, information specific to those with restricted diets (such as those with eating disorders or other disorders), and information about healthy fats and sugars as well as information comparing complex versus simple carbohydrates.

Managing Our Health

Participants stated that they would like this section of the website to list pharmacies and the services provided there (flu shots, blood pressure testing, etc.) and where to obtain discounts and samples on medical supplies.

Staying Connected

Participants asked to see a calendar with local social activities for seniors, a list of local associations that seniors might join, local volunteer activities, and the phrase “You don’t know what to do, or where to go, talk to us,” in the Staying Connected section of the Healthy Living Website.

Wrap Up

During the wrap up of the focus group, participants stressed that the town of La Grande provides little support for the homeless and suggested that there might be a resource for the homeless added to the ADRC materials. One participant suggested including a phone number for the homeless to contact for referral to assistance.
Focus Group Summary Reports: La Grande Focus Group #1

Guest Kristi Murphy, ADRC Program Analyst State Unit on Aging with the Department of Human Services Seniors and People with Disabilities division, provided a brief concluding explanation of the ADRC and its purpose in order to answer any questions that may have remained until then. Gift card winners were selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: La Grande Focus Group #2

DETAILS

Session: 5th of 7
Date: Saturday March 19th, 2011
Time: 10:00 – 11:30am
Location: La Grande Public Library – 2006 4th St, La Grande, OR 97850
Participants: 4
Facilitator: Amanda Stocker-West, CSC Project Manager
Note taker: Ben West, CSC Assistant
Guests: No guests

ACTIVITIES & HOBBIES

As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions where they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful. They give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests. Answers included gardening, working out, making handicrafts, and snow shoeing.

MARKETING MATERIALS

Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.
**Brochures**

Participants shared their *Overall Impressions* of the brochure as well as *Content* and the *Look* of the brochure. Each segment (*Overall, Content, and Look*) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

**Overall**

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

- Provides information and answers questions through supportive counseling.
- Is for seniors, people with disabilities, and their family, friends, and caregivers.

**Content**

Following discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Main areas of concern regarded:

- **Time and money:** Some participants wondered how much the ADRC charges for its services and how much time it would take to access ADRC services.
- **Accessing the ADRC:** Some participants wondered if the ADRC could be reached by email and what times the ADRC can be reached by telephone.
- **Services:** Some participants wanted to know whether the ADRC makes home-visits for those who are not capable of going to a physical location, and how ADRC’s services benefit caregivers.
- **Community involvement:** One participant wanted to know if there is a way to become involved with the ADRC via peer counseling or volunteering.
Focus Group Summary Reports: La Grande Focus Group #2

Reliability

One participant suggested improving the ADRC’s appearance of reliability by providing more information about qualifications ADRC staff hold, appealing to the participant’s desire for more apparent credibility and authority.

Look

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the clarity of content and the photographs of the brochure to be the least satisfying aspects while the readability was rated the highest on average.

Table 5: Results of Look of Brochure Survey at the Second La Grande Focus Group.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>2.5</td>
</tr>
<tr>
<td>Photographs</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>3.2</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3.5</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>4.2</td>
</tr>
</tbody>
</table>

Cover

Participants thought the cover of the brochure was just average and suggested using brighter colors (especially green), adding a photograph, and removing the phrase ‘get connected’. Some participants did not think the phrase ‘get connected’ connotes the services that ADRC provides. There were differing opinions regarding changes participants would make to the background of the cover including editing the cover’s background words to be darker or brighter, and removing the background words altogether. Participants agreed the cover could be improved by removing the background lettering to make it easier to read and look at.

Photographs

Participants thought the photographs of the brochure were average or a little better than average. Suggestions for improving the photographs included making the photographs larger and moving the top middle photograph to the cover of the brochure.
Focus Group Summary Reports: La Grande Focus Group #2

Participants expressed discontent with the middle bottom photograph: one group member stated that the woman was distracting, rather than adding to the brochure. Some stated that photographs of unhappy people should not be included on the brochure, implying they believed the woman appeared unhappy. One participant urged caution with all photographs used, as the phrase ‘get connected’ might make people think the ADRC is a dating service.

**Readability**

Participants liked the brochure’s readability (font size, font color, placement of text). Suggestions for improving the readability included adding bright colors interspersed in text, darker text, changing the color of triangles from green to red (for noticibility), and changing the green triangle bullets to the same green that is used at the very top of the front color (because it is easier on the eyes).

**Organization of Material**

Participants liked the organization of the material in the brochure but would not provide further guidance.

**Clarity of Content**

Participants liked the clarity of content (whether it is easy to understand) but did not provide further suggestions.

**Posters**

The participants were then shown three ADRC posters. When asked what the group enjoyed about the posters, a participant mentioned that he/she thought the diversity of ages and the inclusion of a family on the materials was appropriate and that it projected a feeling of happiness and togetherness. One participant stated that their favorite poster was the one depicting a couple on a moped and suggested adding a younger person to that poster as well.

Other responses to the posters were generally critical. Participants did not feel that it was appropriate to picture a Black family on the poster. They noted that there are very few Black people in their community and that it did not represent the people that ADRC would serve there. They also noted that prejudice exists in the community and that people generally would not respond well to the poster.

Participants felt that the individual in the wheelchair on the second poster looked lonely and that they would prefer to see him smiling. They would have liked to see a caretaker or animal on the poster as well. One participant suggested that if he was performing an action, such as bouncing a ball, it would give him a ‘happier’ appearance.

Participants suggested changing the shade of green used on the font to a brighter shade of green, red or blue and changing the color of the moped from green to red.
Focus Group Summary Reports: La Grande Focus Group #2

HEALTHY LIVING WEBSITE

Participants were then introduced to the Healthy Living Website. The website was explained including the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see.

Physical Activity

Participants were asked what information they might like to see included in this section of the website. Answers included:

- **Information on gyms**: Participants wanted to see a list of local gyms, pools and other places to workout including a map of their locations and membership fees. They also wanted to see information regarding transportation options for reaching them.

- **Places to go**: Participants wanted to see bicycle and walking trail maps as well as a list of handicap accessible playgrounds.

- **Professional service contacts**: One participant suggested contact information for physical therapists.

- **Clubs**: One participant suggested a list of clubs that participate in activities that are physically active, such as bird watching groups.

Healthy Eating

Participants said they would want to see information about local farmers’ markets and how to get there; general nutrition information and tips, perhaps provided by the nutrition center at the hospital; listings for cooking classes and weight loss programs; and recipes for small meals.

Managing Our Health

Participants stated that they would like this section of the website to list local hospices and home care services; list alternative medicine sources such as naturopaths and acupuncturists; provide ‘Life Line’ and ‘Call Button’ information; and publicize health-related workshops on managing chronic conditions.

Staying Connected

Participants stated that they felt that this topic was related to mental-health issues and indicated they did not believe the ADRC provides mental-health resources. They asked to see resources under this topic such as a calendar with local social activities for seniors, a list of local associations that seniors might join, and local volunteer activities.
Focus Group Summary Reports: La Grande Focus Group #2

WRAP UP

During the wrap up of the focus group, one participant stated that he/she probably would not use the internet to access information of this sort, but would instead use a newspaper. When asked what other aspects of health were important to them and their families, one participant mentioned that giving back to the community was important to them.

After participants finished their comments, the facilitator read the background section from the ADRC Focus Groups Scope of Work to help answer any potential remaining questions they may have had until that point. A gift card winner was selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: La Grande Focus Group #3

DETAILS

Session: 6th of 7
Date: Saturday March 19th, 2011
Time: 12:30pm – 1:00pm
Location: La Grande Public Library – 2006 4th St, La Grande, OR 97850
Participants: 5
Facilitator: Amanda Stocker-West, CSC Project Manager
Note taker: Ben Stocker, CSC Assistant
Guests: No guests

ACTIVITIES & HOBBIES

Not applicable to this focus group/ no data gathered.

MARKETING MATERIALS

Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.

Brochures

Participants shared their Overall Impressions of the brochure as well as Content and the Look of the brochure. Each segment (Overall, Content, and Look) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

Overall

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

- If you had to explain to a friend what the ADRC is, what would you say?
- Who do you think this brochure is geared toward?
Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

- Is an informative service for seniors, people with disabilities, and people with general needs.
- Is a physical place and a program.

Other responses indicated some participants believed the ADRC to particularly serve seniors (as opposed to seniors and people with disabilities) and one participant believed the brochure to be geared toward nursing home staff.

**Content**

Following discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Participants felt that the phrase ‘Get Connected’ was not very clear and that seniors do not like to remember acronyms like ‘ADRC.’ They also felt that the “Vital Connections” section of the brochure might not be necessary or applicable.

Main areas of concern regarded:

- **Potential limitations to service:** Participants wanted more information about how much the ADRC charges for its services, whether people who do not live in the area are eligible for services, and whether an appointment is required in order to receive services.

- **ADRC finances:** Participants wanted more information about if and how the ADRC is financially capable of providing support services to those who need it for a longer duration, and how the ADRC is capable of providing services for free.

One participant did not understand what the acronyms ‘ADRC’ and ‘DHS’ stand for. Another wondered if there was a physical address for the ADRC. One participant particularly wanted to know if the ADRC provided access to hospice care services.

**Reliability**

Participants stated that the ADRC seemed reliable, based on the brochure. They stated that the information was comprehensive and provided the necessary information to ‘get started’ with the ADRC, but noted that the perceived reliability would be more strongly based on how someone was treated during their first phone call to the organization.
Focus Group Summary Reports: La Grande Focus Group #3

Look

Participants were asked to rank six aspects of the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the photographs to be the least satisfying aspect and the organization of the material to be the most satisfying.

Table 6: Results of Survey at the Third La Grande Focus Group.

<table>
<thead>
<tr>
<th>Aspect</th>
<th>1: I Dislike It A lot</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5: I like it A lot</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3.5</td>
</tr>
<tr>
<td>Colors</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3.5</td>
</tr>
<tr>
<td>Photographs</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>2.7</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3.5</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>3.6</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>3.4</td>
</tr>
</tbody>
</table>

Cover

Participants were asked for their opinions about the cover of the brochure. Most participants chose not to comment on the cover of the brochure, but some participants suggested editing the background words to be darker or brighter. Two participants rated the cover a ‘3’ for ‘average’ and two rated it a ‘4’ for ‘like it’.

Colors

Participants generally liked the colors of the brochure. One participant mentioned he/she thought the green and the blue were too dark and that one of them could be lighter. Others, however, commented that they would not make changes to the colors of the brochure despite some of the less than perfect ratings.

Photographs

Participants liked the photographs of the brochure. Suggestions for improving them include using larger photographs (especially those in the bottom of the middle panel), and representing more races in the photographs.
Participants generally did not like the picture of a woman with a disability on the cover. They also were not sure that the photographs helped to clarify who the ADRC is geared toward and that the photographs were directly related to the content of the brochure.

**Readability**

Participants liked the readability (font size, font color, placement of text) of the brochure. Positive feedback included that the headings were well bolded and the font size, appropriate. Suggested changes included spelling out ‘Department of Human Services’ (rather than DHS) at the top of the brochure cover to make it more readable.

**Organization of Material**

Participants liked the organization of material in the brochure. Comments suggested that some of the services listed did not appear congruent with other services also listed, however.

**Clarity of Content**

Opinions ranged from dislike to like, suggesting overall the clarity of content was just average. Suggested improvements were unclear.

**Posters**

The participants were then shown three ADRC posters. Participants stated that they liked the diversity of the subjects photographed and that the posters were eye-catching. Participants stated that the green strip at the top of the posters should be removed or edited to be larger and was distracting in its current form. Participants also noted that there was a period at the end of the phrase ‘Get Connected’ on the brochure, but not the poster. Overall, the participants agree that the phrase ‘Get Connected’ appealed to diverse populations.

Participants felt that the individual in the wheelchair on the second poster should be accompanied by a caretaker or animal and that he should be performing an action that made it clear that he was active. They also suggested the addition of a phone number to all posters.

**Healthy Living Website**

Participants had 30 minutes to discuss the Healthy Living Website. The website was explained including the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see. One suggestion was to provide website information in several languages.

**Physical Activity**

Participants were asked what information they might like to see included in this section of the website. Responses included locations of gyms, pools and other places to workout; bicycle and walking trail maps; and suggestions for free ways to get exercise (including good locations to do them).
Focus Group Summary Reports: La Grande Focus Group #3

Healthy Eating

Participants were asked what information they might like to see included in this section of the website. Responses included information about healthy snacks and appropriate serving sizes. Another recommendation was to have trusted professionals recommend healthy foods as an alternative to private marketing efforts by companies.

Managing Our Health

Participants stated that they would like this section of the website to include ideas for reducing stress and a suggested timeline for checkups and other health-related tests and activities.

Staying Connected

Participants stated that they felt that this topic was related to mental-health issues and indicated they did not believe the ADRC provides resources for mental-health issues. They asked to see resources under this topic such as a calendar with local social activities for seniors and people with disabilities (including bingo) and a calendar of all entertainment events in the area.

During the wrap up of the conversation, participants suggested that Managing our Health be the first topic on the website, with the other topics perhaps underneath it. They noted that mental health should have its own category. They also noted that they would use the website to access information of this kind if one of their family members required help and stated that it would be very important for the website to be found using Google search.

Wrap Up

The facilitator read the background section from the ADRC Focus Groups Scope of Work to help answer any potential remaining questions participants may have had until that point. A gift card winner was selected and gift bags were distributed. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
Focus Group Summary Reports: Redmond Focus Group

DETAILS

Session: 7th of 7

Date: Thursday April 21st, 2011

Time: 10:00am – 11:30am

Location: Redmond Senior Center -325 NW Dogwood, Redmond, OR 97756

Participants: 8

Facilitator: Francesca Patricolo, CSC Intern Project Manager

Note taker: Serena Parcell, CSC Intern

Guests: Kristina Barragan, Intern at Central Oregon Council on Aging

ACTIVITIES & HOBBIES

As an icebreaker, ten minutes at the beginning of the session were dedicated to participant self introductions where they were also asked to share activities or hobbies they enjoy doing. This question was asked strategically for participants to quickly become comfortable participating during the session; however, responses may be useful. They give indication as to places ADRC marketing materials may be discovered by the target audience and ways to appeal to the target audience’s interests.

Most of the participants at this session enjoyed gardening. Nearly all female participants stated that they enjoyed knitting, crocheting and other forms of handicrafts. Some participants were actively involved with their churches and some enjoyed spending time with animals. Many were also active in the senior center and other service organizations. Two participants stated that they enjoyed outdoor pursuits such as hiking and golf, but could no longer participate in those activities due to physical limitations.

MARKETING MATERIALS

Participants were given 40 minutes to review and discuss ADRC marketing materials including prototypes of a brochure and three posters.
Brochures

Participants shared their Overall Impressions of the brochure as well as Content and the Look of the brochure. Each segment (Overall, Content, and Look) was allotted ten minutes for a total of 30 minutes dedicated to discussion of the brochure.

Overall

ADRC brochures were distributed and participants were given five minutes to read them. After the five minutes, brochures were collected again and half-sheets of paper were distributed on which participants were asked two questions:

• If you had to explain to a friend what the ADRC is, what would you say?
• Who do you think this brochure is geared toward?

Participants were invited to share their answers verbally and written responses were collected. Most participant responses indicated their overall understanding is that the ADRC:

• Is a place to find information and referral to resources.
• Serves community members who are seniors.
• Serves community members who have disabilities.
• Makes life easier for users.

Content

Following the discussion of the overall impressions of the brochure, brochures were handed back to participants. Participants were invited to verbally share any questions they had after reading the brochure and also to offer other information they would want to know before accessing the ADRC.

Compared to previous focus group sessions, participants had less questions or concerns to share. One participant noted that she was happy to see that the ADRC did not appear to be geared specifically toward low-income individuals. Another asked about the difference between the services provided by the ADRC and 211, a group that provides in-home care for seniors and the disabled. The other participants stated that they did not believe that the services were the same.

Reliability

Participants were asked to rank their perception of the reliability of the ADRC, based on the brochure and using a scale of 1 through 5. A ‘5’ meant that the participant perceived the ADRC’s services to be highly reliable. One participant stated that mentioning the Department of Human Services within the brochure increased the ADRC’s credibility. Three participants
answered with ‘4’ and two with ‘5’, indicating they perceived the ADRC to be reliable to highly reliable based on the brochure.

**Look**

Participants were asked to rank six aspects on the brochure on a Likert scale of 1-5. Answers were written on paper surveys and compiled after the focus group. This focus group found the cover and the readability of the brochure to be the least satisfying aspect although the colors, organization of material, and clarity of content all tied for the most satisfying aspect.

**Table 7: Results of Look of Brochure Survey at the Redmond Focus Group.**

<table>
<thead>
<tr>
<th>REDMOND FOCUS GROUP</th>
<th>1 I Dislike It A lot</th>
<th>2</th>
<th>3</th>
<th>4 I like it A lot</th>
<th>AVG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td>1 0 0 3 4</td>
<td></td>
<td></td>
<td></td>
<td>4.1</td>
</tr>
<tr>
<td>Colors</td>
<td>0 0 0 3 5</td>
<td></td>
<td></td>
<td></td>
<td>4.6</td>
</tr>
<tr>
<td>Photographs</td>
<td>0 0 1 3 4</td>
<td></td>
<td></td>
<td></td>
<td>4.4</td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td>0 0 0 2 5</td>
<td></td>
<td></td>
<td></td>
<td>4.1</td>
</tr>
<tr>
<td>Organization of Material</td>
<td>0 0 0 3 5</td>
<td></td>
<td></td>
<td></td>
<td>4.6</td>
</tr>
<tr>
<td>Clarity of content (easy to understand)</td>
<td>0 0 0 3 5</td>
<td></td>
<td></td>
<td></td>
<td>4.6</td>
</tr>
</tbody>
</table>

**Cover**

Participant opinions ranged from dislike a lot to like a lot, however the majority of participants overwhelmingly liked the cover. Suggestions for improvement included removal of the small triangles from the ‘ADRC’ title on the cover of the brochure; removal of the background words on the cover of the brochure; a larger font for the ‘ADRC’ title on the cover of the brochure, as well the subtitle; writing ‘Aging and Disabilities Resource Connection,’ in lieu of ‘ADRC’; and use of the phrase ‘get connected,’ rather than the ‘ADRC’ title.

**Colors**

Participants really liked the colors of the brochure. One stated that he/she thought the quality of the printing was very high. Two participants thought the colors were ‘great,’ while two thought they were ‘ok.’ One expressed happiness that the ADRC had not chosen day-glow colors.

**Photographs**

Participants liked the photographs a lot. When asked for their thoughts on the photographs contained in the brochure, participants focused on the female in the bottom, center
Focus Group Summary Reports: Redmond Focus Group

Photograph. One participant thought her expression was menacing, while others largely believed that she looked like a ‘normal’ person and that they often looked like her in photographs. All participants liked that the people in the photographs were smiling and that it was appropriate for the brochure.

Readability

Participants really liked the readability (font size, font color, placement of text) and comments were positive, saying that the brochure has big font that is easy to read.

Organization of Material

Participants really liked the organization of the material. Comments were positive saying that the brochure is concise.

Clarity of Content

Participants really enjoyed the clarity of content of the brochure. One participant even commented he/she liked how the information was listed concisely on the back cover.

Posters

Participants were given ten minutes to discuss their overall impressions of three posters. Initial reactions to the posters were generally positive. They liked the “Get connected” wording and felt like it was an “attention grabber” and thought the photograph of the person in a wheelchair was realistic. When asked about their reactions toward the specific poster with a picture of people riding a moped, answers were generally less positive. Participants did not believe that the poster represented the ADRC’s services or that it attracted the right audience attention. One group member stated that the people on the moped should be moved to the other side of the poster because of the way they are facing, in order to draw the eye toward the script on the poster.

Healthy Living Website

Participants were given 30 minutes to discuss the Healthy Living Website. They were told about the website and the four resource areas that might be covered on it. The four resources (Physical Activity, Healthy Eating, Managing our Health, and Staying Connected) were written on a flip chart for all to see.

A few participants mentioned that they do not access websites because they do not have a computer at home. All participants voiced that they believed that an active mind was essential to maintaining a healthy lifestyle and living a long life. In light of this, they thought that ‘maintaining an active mind’ might necessitate its own category.

Physical Activity

Participants were asked what information they might like to see included in this section of the website. Answers included available local exercise classes, including aerobics; group activities
that had been previously coordinated, whether by the ADRC or a community group. Suggestions for group activities included day hikes, walks, golfing, and cross country skiing. One participant stated that she would like to see schedules for exercise classes appropriate for people with specific disabilities, such as fibromyalgia.

Healthy Eating
Participants were asked what information they might like to see included in this section of the website and remarked that it would be valuable to include information about growing your own food. Specifically, the participants wanted to see gardening advice, tips and information that related to the local climate. Participants noted that Central Oregon has a very different growing season from other locations in Oregon so gardening information should consider the local climate or it would not be valuable. Participants also felt that there should be information specifically geared toward first time gardeners and indoor gardening.

Participants also wanted information about how to access in-home care that provides cooking services; frozen meals and other easy meals, including where to get it and nutritional information; the benefits of certain foods and the importance of a healthy diet; and information about the benefits of breakfast.

Managing Our Health
All participants felt that this topic should be the heading under which the other three topics would fall and that it should not have its own section of the website.

Staying Connected
Participants asked to see three main resources under this topic including a calendar with local social activities for seniors, card and board game gatherings, and local volunteer activities.

Wrap Up
The facilitator read the background section from the ADRC Focus Groups Scope of Work to help answer any potential remaining questions participants may have had until that point. No gift cards were awarded (it was not advertized to be offered either), however participants were given gift bags. Upon departure, participants expressed feeling positive about their contributions and experience in the ADRC focus group.
FOCUS GROUP STRATEGY

PARTICIPATION

There were a total of seven ADRC focus groups. Three were in Albany, three in La Grande, and then one in Redmond. Locations were selected based on the recommendations of local partners with the DHS SPD for convenient, ADA accessible, public meeting spaces equipped with chairs, tables, and electric outlets (for note-taking on a laptop computer). In Albany, there were two locations: Rays Food Place (two sessions) and the Albany Senior Center (one session). The two locations of sessions was due to the availability of the Community Meeting Room at Rays Food Place, which was considered a more inviting location for attracting younger people with disabilities to participate. In La Grande, all three sessions were held at the La Grande Public Library and the single session in Redmond was held at the Redmond Senior Center.

Dates and times were selected based on staff availability, local partner recommendations, and professional experience of days and times that generally turn out more participation than others.

Table 8: Dates and Locations of ADRC Focus Groups.

<table>
<thead>
<tr>
<th>Focus Group Dates &amp; Locations</th>
<th>ALBANY</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Focus Group 1</td>
<td>Focus Group 2</td>
<td>Focus Group 3</td>
</tr>
<tr>
<td>Wed. March 2nd</td>
<td>Rays Food Place</td>
<td>621 NW Hickory St.</td>
<td></td>
</tr>
<tr>
<td>Sat. March 5th</td>
<td>Albany Senior Center</td>
<td>489 Water Ave. NW</td>
<td></td>
</tr>
<tr>
<td>Sat. March 12th</td>
<td>Rays Food Place</td>
<td>621 NW Hickory St.</td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>5:30-7:00pm</td>
<td>10:00-11:30am</td>
<td>12:30-2:00pm</td>
</tr>
<tr>
<td>Location</td>
<td>La Grande Public Library</td>
<td>La Grande Public Library</td>
<td>La Grande Public Library</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Focus Group Dates &amp; Locations</th>
<th>LA GRANDE</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Focus Group 1</td>
<td>Focus Group 2</td>
<td>Focus Group 3</td>
</tr>
<tr>
<td>Thu. March 17th</td>
<td>Redmond Senior Center</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sat. March 19th</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sat. March 19th</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Time</td>
<td>10:00-11:30am</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Location</td>
<td>325 NW Dogwood St.</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Address</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Focus Group Dates &amp; Locations</th>
<th>REDMOND</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Focus Group 1</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Thur. April 21st</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Time</td>
<td>10:00-11:30am</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Location</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Address</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
### Table 9: How Participants Heard About ADRC Focus Groups & Number of Participants.

<table>
<thead>
<tr>
<th></th>
<th>ALBANY</th>
<th>LA GRANDE</th>
<th>REDMOND</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 2</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 3</td>
<td>1</td>
<td>6</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sum of Groups</td>
<td>7</td>
<td>10</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>-</td>
<td>1</td>
<td>2</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 2</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Focus Group 3</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sum of Groups</td>
<td>-</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Recruitment for Redmond focus group was internally organized by the Central Oregon Council On Aging.
Most focus group participation came from Albany, where there were four more participants than in La Grande. Recruitment aimed to attract 8 to 12 participants per focus group for a total of six focus groups (3 in Albany and 3 in La Grande), however actual recruitment fell short of this goal by at least 14 participants by the close of the last La Grande session. To attempt to make up additional participation while maintaining the budget and overall timeline, one more focus group was added in Redmond.

The most participants in any one session were eight; a participation level achieved twice: once at the first focus group (in Albany) and once at the last focus group (in Redmond). At the close of the Redmond focus group, overall focus group participation left a minimum difference of just six individuals from original aims.

**RECRUITMENT EFFORTS**

The focus group recruitment strategy for Albany and La Grande focus groups included participation incentives, advertizing, and broad community outreach. In order to select focus group participants that fit potential ADRC user profiles, recruitment was directed towards individuals not currently receiving Oregon DHS SPD or other aging and disability support, who are:

- Baby boomers or older adults interested in community options that support aging;
- Caring for an aging parent or a family member with a disability; or
- Adults living with a disability.

Focus group promotion materials required potential participants to self-identify as the described target audience and call the CPW office to register for their choice of session date. Registration was accepted on a rolling basis and registrants were not required to disclose which of the target audience categories they self-identify. As participants called to register, they were asked how they heard about the focus group.

Recruitment for the Redmond focus groups was provided by the Central Oregon Council on Aging utilizing its internal networks to recruit based on the same standards for targeted participant profiles. Participants did not self-identify but were rather asked to participate individually.

**INCENTIVES**

Focus group participation being voluntary, four incentives were offered to increase the number of registrants:

- **Food**: Promotional materials announced ‘good food’ available to participants at the sessions. Food provided in this session included a range of healthy finger foods.
**Focus Group Strategy**

- **Gift bags:** Promotional materials announced gift bags for participants. Gift bags included a grab bag assortment of individually wrapped snacks (like graham crackers), fun office supplies (like rainbow Sharpie markers), and other surprises (such as gladiola bulbs).

- **A chance to win a gift card:** Promotional materials announced a 1 in 5 chance to win a Fred Meyer gift card in Albany, and a Bi-Mart gift card in La Grande. The worth of the gift cards was not advertised, however they were worth $25 each. Each participant wrote his/her name on a slip of paper and winner’s names were drawn by the facilitator at random at the wrap up section of each session. Two gift cards were awarded only in sessions of 8 participants. Gift cards were not a part of recruitment for Redmond focus groups and were not awarded at the session.

- **Recruitment cash:** Upon registration, registrants were offered $10 cash to be handed to them at the session if they had a friend call to register beforehand and also show up with them the day of. Two individuals in this focus group recruited their friends in this way. Since registration was not a part of Redmond focus group recruitment, recruitment cash was not offered to Redmond participants.

**Albany Advertizing & Outreach**

An advertisement of all three Albany focus groups ran for two Sundays, February 27th and March 6th, in the Gazette Times and Democrat Herald newspapers that serve the greater Albany and Corvallis area. Advertising ran daily in the Democrat Herald between March 1st and 12th. Each newspaper advertisement was located in the front section of the paper. Additional advertising ran as a banner on the front page of the Democrat Herald website on March 2nd, 5th, 9th, and 12th. Two postings were also listed on Craigslist.org in the Events section on February 17th and 21st.

Fliers advertizing all three Albany focus group sessions were displayed and distributed throughout the Albany area with the help of businesses, institutions, and organizations that agreed to publically post a poster on their sites, email the poster PDF file to a listserve, read/announce verbally to a congregating group, or otherwise help distribute or recruit. Community volunteers also brought fliers to businesses, organizations, and other locations.

**Local Businesses & Organizations**

Fliers were distributed to at least 17 local businesses and organizations including:

- Albany Visitors Association
- Historic Carousel and Museum
- Shopping Centers
- Albany Public Library
FOCUS GROUP STRATEGY

- Health Clubs
- Health Care Providers
- Sports and Recreation Centers and Studios
- Linn Benton Community College
- Civic Clubs and Organizations

Churches

Fliers were distributed to about 25 churches in Albany who either posted a flyer somewhere on their site, emailed out the flier to their congregation listserv, included information on the focus groups in a church flier or newsletter, and/or made an announcement at a church service regarding the focus groups.

LA GRANDE ADVERTIZING & OUTREACH

A 2”x 2” display advertisement for all three La Grande focus groups ran in the main section of the La Grande Observer for five weekdays including Friday March 11th and Monday through Thursday March 14th through 17th. A Public Service Announcement also aired on Eastern Oregon University’s radio station KEOL 91.7 FM daily between March 10th and 18th.

Fliers advertizing all three La Grande focus group sessions were displayed and distributed throughout the La Grande area with the help of businesses, institutions, and organizations that agreed to publically post a poster on their sites, email the poster PDF file to a listserve, read/announce verbally to a congregating group, or otherwise help distribute or recruit. Community volunteers also brought fliers to businesses, organizations, and other locations.

Local Businesses & Organization

Fliers were distributed to at least 26 local businesses including:

- The La Grande Country Club
- Eastern Oregon University
- La Grande Community Recreation Calendar
- La Grande Aquatic Center
- Civic Clubs and Organizations
- La Grande Public Library
FOCUS GROUP STRATEGY

- La Grande Senior Center
- City Boards and Commissions
- Health Care Providers

Churches

Fliers were distributed to about 8 churches in La Grande who either posted a flyer somewhere on their site, emailed out the flier to their congregation listserv, included information on the focus groups in a church flier or newsletter, referred individual participants, and/or made an announcement at a church service regarding the focus groups.

HOW PARTICIPANTS HEARD

Participants were asked how they heard about the focus groups. Data does not exist for nine of the participants. Forty-five percent of all participation came from focus groups in Albany. Seven participants are known to have heard from the newspaper, all of which were in Albany, and most of the participants who heard from a friend were also in Albany. There was a little more onsite recruitment in La Grande (due to lower participation numbers); however more La Grande participants were reportedly recruited by a flyer they saw or from a recruitment phone call. La Grande had the most unknown source participants; however it is reasonable to believe that at least some of them actually heard from advertisements in the newspaper.
### Focus Group Strategy

#### Table 10: How Participants Heard about the Focus Groups.

<table>
<thead>
<tr>
<th></th>
<th>ALBANY</th>
<th>LA GRANDE</th>
<th>REDMOND</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>25%</td>
<td>50%</td>
<td>12.5%</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 2</td>
<td>100%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 3</td>
<td>14%</td>
<td>86%</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sum of Groups</td>
<td>37%</td>
<td>53%</td>
<td>5%</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>-</td>
<td>17%</td>
<td>33%</td>
<td>-</td>
</tr>
<tr>
<td>Focus Group 2</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>50%</td>
</tr>
<tr>
<td>Focus Group 3</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sum of Groups</td>
<td>-</td>
<td>7%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>The Paper</td>
<td>A Friend</td>
<td>On-site Recruit</td>
<td>Flyer in Town</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Groups</td>
<td>17%</td>
<td>26%</td>
<td>7%</td>
<td>5%</td>
</tr>
</tbody>
</table>

* Recruitment for Redmond focus group was internally organized by the Central Oregon Council On Aging.
FOCUS GROUP STRATEGY

ROOM DYNAMICS

Albany Focus Group #1

Four tables were pushed together to form a square and participants sat in a “u” shape along three sides of the table with the facilitator seated alone on one side. The note taker sat in the back on one side of the room facing the facilitator. Guests sat in the back, opposite the note taker, strategically out of direct line of sight for participants so as to not provide influence over participant responses.

Diagram 1: Room Dynamics for Albany Focus Group #1.

Albany Focus Group #2

Participants were seated on two sides of an oval conference table with the facilitator and note-taker across from each other at the heads. Guests sat behind the note-taker in the corner of the room to strategically be out of participant’s direct line-of-sight so as to not provide influence over participant responses.

Diagram 2: Room Dynamics for Albany Focus Group #2.
Focus Group Strategy

Albany Focus Group #3

Four tables were pushed together to form a square and participants sat in a “u” shape along two sides of the table (out of choice) with the facilitator seated alone on one side. The note taker sat in the back on one side of the room facing the facilitator. Guests sat in the back, opposite the note taker, strategically out of direct line of sight for participants so as to not provide influence over participant responses.

Diagram 3: Room Dynamics for Albany Focus Group #3.

La Grande Focus Group #1

Four tables were pushed together to form a square and participants sat in a “u” shape along three sides of the table with the facilitator seated alone on one side. The note taker and guest sat at the back of the room at a separate table across from the facilitator. The guest was strategically out of direct line of sight for participants so as to not provide influence over participant responses.

Diagram 4: Room Dynamics for La Grande Focus Group #1.
FOCUS GROUP STRATEGY

La Grande Focus Group #2

Four tables were pushed together to form a square and participants sat in a “u” shape along three sides of the table with the facilitator seated alone on one side. The note taker sat at the back of the room at a separate table across from the facilitator.

Diagram 5: Room Dynamics for La Grande Focus Group #2.

La Grande Focus Group #3

Four tables were pushed together to form a square and participants sat in a “u” shape along three sides of the table with the facilitator seated alone on one side. The note taker sat at the back of the room at a separate table across from the facilitator.

Diagram 6: Room Dynamics for La Grande Focus Group #3.
Focus Group Strategy

Redmond Focus Group

Four tables were pushed together to form a square and participants sat in a “u” shape along three sides of the table with the facilitator seated alone on one side. The note taker sat in the back on one side of the room facing the facilitator and the guests sat in the back of the room on the opposite side of the room as the note taker facing the facilitator so as to not provide influence over participant responses.

Diagram 7: Room Dynamics for Redmond Focus Group.

Facilitation Process

Each 1½ hour focus group followed a process and content outline that included an introduction with a description of the project and its purpose, confidentiality statement, and ground rules; an icebreaker that asked participants about their activities and hobbies; conversations about marketing materials including a brochure (discussion of the brochure overall, its content, and the look of it) and three posters; a discussion about a Healthy Living Website and its content; and a wrap up.

At the start of each session, the facilitator, note taker, and guests introduced themselves, including their occupations and their roles in the focus group. The facilitator provided a brief description of the project and its purpose, explaining that the description was intentionally left brief to gain their uninfluenced impressions of how participants perceived ADRC messaging. Participants were assured that they would have their questions answered by the end of the focus group session.

Participants were guaranteed that their names and personal information would not be attributed to any of their responses, questions, or statements as a matter of confidentiality. Six ground rules were then explained to help establish order, respect, and full participation in a safe and inviting environment.
Help build Oregon’s new Aging & Disability system

Enjoy GOOD FOOD, a GIFT BAG and a 1 in 5 chance TO WIN a Fred Meyer gift card

If you are:
- A baby boomer or older adult interested in community options that support aging.
- Caring for an aging parent or a family member with a disability.
- An adult living with a disability.

We want to hear your opinions!

Come to a discussion session hosted by UO on behalf of the Department of Human Services! Review new marketing materials for the Aging & Disability Resource Connection. It’s fun and easy, plus your feedback will be used to improve future outreach by an important new social service.

Please call the University of Oregon TODAY to reserve a space!

(541) 346-0259
Help build Oregon’s new Aging & Disability system

Enjoy GOOD FOOD, a GIFT BAG and a 1 in 5 chance TO WIN a Fred Meyer gift card

Please call the Univ. of Oregon TODAY to reserve a space!
(541) 346-0259

Wednesday March 2nd
5:30-7:00pm
Rays Food Place
621 NW Hickory Street

Saturday March 5th
10:00-11:30am
Albany Senior Center
489 Water Ave Northwest

Saturday March 12th
12:30-2:00pm
Rays Food Place
621 NW Hickory Street

*Dates are subject to availability

If you are:
- A baby boomer or older adult interested in community options that support aging.
- Caring for an aging parent or a family member with a disability.
- An adult living with a disability.

We want to hear your opinions!

Come to a discussion session hosted by UO on behalf of the Department of Human Services! Review new marketing materials for the Aging & Disability Resource Connection. It’s fun and easy, plus your feedback will be used to improve future outreach by an important new social service.
Help build Oregon’s new Aging & Disability system

Enjoy GOOD FOOD, a GIFT BAG and a 1 in 5 chance TO WIN a Bi-Mart gift card

If you are:
- A baby boomer or older adult interested in community options that support aging.
- Caring for an aging parent or a family member with a disability.
- An adult living with a disability.

We want to hear your opinions!

Come to a discussion session hosted by UO on behalf of the Department of Human Services! Review new marketing materials for the Aging & Disability Resource Connection. It’s fun and easy, plus your feedback will be used to improve future outreach by an important new social service.

Please call the University of Oregon TODAY to reserve a space!

(541) 346-0259
Help build Oregon’s new Aging & Disability system

Enjoy GOOD FOOD, a GIFT BAG and a 1 in 5 chance TO WIN a Bi-Mart gift card

If you are:
- A baby boomer or older adult interested in community options that support aging.
- Caring for an aging parent or a family member with a disability.
- An adult living with a disability.

We want to hear your opinions!

Come to a discussion session hosted by UO on behalf of the Department of Human Services! Review new marketing materials for the Aging & Disability Resource Connection. It’s fun and easy, plus your feedback will be used to improve future outreach by an important new social service.

Thursday March 17th
5:30-7:00pm
La Grande Public Library
2006 4th Avenue

Saturday March 19th
10:00-11:30am
OR
12:30-2:00pm
La Grande Public Library
2006 4th Avenue

*Dates are subject to availability*
PARTICIPANT RESPONSE QUOTES

Direct verbal and written quotes retain original participant language to the greatest extent possible in order to preserve their integrity apart from interpretation and are provided for additional insight into the thoughts, concerns, and expressions of potential ADRC users. Some of the following quotes are abbreviated to some degree because they were transcribed on-site during note-taking of the live focus group.

ALBANY FOCUS GROUP #1

Marketing Materials
Brochures
Overall

If you had to explain to a friend what the ADRC is, what would you say?

Verbal Responses

- “Group to assist aging and disabled person by providing information and assistance.”
- “One stop location to learn about services regardless of income.”
- “Support service for seniors and those with disabilities. Bridge to the social services available to the populations.”
- “Enriching senior’s lives.”
- “Connection points for services and resources.”
- “Triage for available resources.”
- “Resource and referral connection for those with seniors with disabilities.”
- “A place to go when you need help.”

Written Responses

- “It is a support service for seniors and those with disabilities and offers a variety of services and counseling. In essence, they are a bridge to the social services and assistance available for this population.”
- “An organization that works for/towards enriching seniors’ lives, whether disabled or not.”
- “A place to go to when you need help with things you can’t do by or for yourself. It is out there for everyone.”
Participant Response Quotes: Albany Focus Group #1

- “Group to assist aging and disabled persons, providing information and assistance.”
- “One-stop location to learn about services and to obtain help whether disabled or regardless of income.”
- “The age for available resources for age/disability.”
- “Resource and referral connection for seniors and people with disabilities.”
- “It is a connection point for services and resources for people who have needs — disability, aging and other issues. Both government (some) and possibly private.”

Who is this brochure geared toward?

**Verbal Responses**

- “Elderly, disabled people.”
- “Seniors and those with disabilities, social service providers.”
- “Healthcare professionals. Little much for my mother to understand. The terminology and vocabulary gave it that feeling.”
- “People of all ages. Provides info to those who care for the people who might need it.”
- “Aging and disabled and their family and friends. My mother wouldn’t have understood or thought it was for her. So much information there. The older you get, the less you process. It needs to be short and simple with not too many choices. She would have picked it up but given it to me or my brother.”
- “Older or disabled people.”
- “Seniors.”
- “Seniors and people with disabilities.”

**Written Responses**

- “Elderly, disables, people without resources.”
- “Seniors and those with disabilities and social service providers.”
- “Healthcare professionals.”
- “People of all ages. It provides information to people who care for elders and seniors.”
- “The aging and disabled and their family and friends.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #1

- “Older and disables people who need help that they are not getting.”
- “Seniors and people with disabilities.”
- “General info for seniors regarding services.”

Content
- “Who funds this?”
- “It appears to be focused on seniors and specifically on seniors with disabilities. As I read through it there seems to be a slant toward older people and the elderly. The picture on the front page is the only reason I’m thinking it might be for younger people.”
- “Just the name alone, I thought it was seniors with disabilities only. But now that I read it carefully it is too different things but I got that from the back.”
- “The fact that this is geared to people with disabilities and they would just see the website on the cover and then chuck it without looking at the phone number on the back. The phone numbers should be more than on the back cover.”
- “It says it is a service but I can’t tell if it has a physical location. I see ADRC but then it talks about an options counselor. I’m kind of lost. Here do I go? Is it a phone #, a website? What? Maybe it is not specific enough to pinpoint this. If I was 84 years old and I needed some help I wouldn’t know what this free service is. I know there is no free. I don’t know if it really is. Who do I call? Take it from the points of trying to hand it off to my aunt.”
- “It says regardless of income. But elderly people with a fixed income are afraid to disclose. Seniors are leery of that. I’m not sure if it is because of the language or not. When you apply for something you always have to have a certain income bracket. People might see that and not come out and explore. Need to help people understand that more.”
- “If I fall down on my motorcycles and fall down, I don’t know if I would qualify.”
- “Where in her do I qualify? I’m on social security and disability. I’ve gone here and I don’t qualify. I’ve gone to the place on the map and I don’t qualify. Not clear that it is open to me. It looks like there is something here for me but there isn’t.”
- “How much is it gonna cost? It is not free. There is qualifications and limitations. It is not accurate to say regardless of income.”

Reliability
No quotes.
Look

Cover

- “It’s fine. Nothing really grabbed me. I’m little bias because I use to work at the university and make brochures. It looks like a typical government brochure. It doesn’t grab me. But it has the information I need.”

- “It’s fine. Kind of calming to me but I wouldn’t pick it up if it were laying down.”

- “Fine. I would pick it up because I am disabled and want all the information I can get. I am worried about myself.”

- “I would want the aging and disability to be bigger (others agreed). I need it bigger and bigger.”

- “Doesn’t stand out. If I saw it in a rack I wouldn’t pick it up. It is nice but I wouldn’t be motivated. I’m not sure what would motivate.”

- “The ADRC. I don’t know what that means. It is the terminology. ‘here’s help for you’ not ‘get connected’.”

- “Combine the people and seniors with disabilities with the get connected. That is what this is all about.”

- “It is busy and has lots of information. Interesting if you have lots of time to study it. There is a lot of busyness there.”

- “It’s fine. I’m not sure I understand the triangle things (in the logo). I agree with the comments about making the aging and disability resource connection larger. If it comes in a #10 envelope, I throw it away.”

Colors

- “They’re fine. My colorblindness doesn’t hide stuff. I can read everything here.”

- “I didn’t pick up the shadow of the faded font until you just now said it. (I didn’t see it either; I thought it was a repeater).”

- “I wondered if people with color issues would see this.”

- “I’m a red girl. It would catch my attention more. They are calming though. It is not distinct enough. Maybe a different color.”

- “It’s fine. Lots to be said for consistency. Don’t change on me.”

- “They’re calming. Not going to shout at you.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #1

- “They’re fine. I like them. They are good quilting colors. I’m not sure why I didn’t give it a 5. It doesn’t 100% catch my eye. If it was on a rack I don’t know if I would pick it up.”

- “If it came in the mail it would go straight in the recycling. I think changing the size and color would change that. It would make you focus in on that more. Like red.”

- “It’s ok with me. I would pick it up because it has the disability part. I think of HP when I see blue and white.”

- “Blue is my favorite color but I hate that shade of green. It irritated me. I like lime green. Or the colors of leave or trees.”

- “I would like to see it warmed up. Colored background. It is very stark, institutional and government. Beige background or something. Purple maybe. Like on the instead blue shading. The woman’s photo on the front has a nice shirt.”

- “That is a really good point. It is smooth and glossy. Institutional. Maybe some paper with texture to it or some card stock.”

- “When I think of get connected I think of earth, community, get together.”

- “Need recycled paper.”

Photographs

- “Put the pictures at the top. Then I would know what it is for. These people don’t look that elderly.”

- “Pictures tell me it is for seniors who have assistance. I don’t see people who don’t have assistance. These people look healthy and like they don’t need any assistance.”

- “Needs more disabled. The pictures are more slanted to seniors. I would rather see the pictures up higher.”

- “She doesn’t look too senior to me. People look really good now. You don’t know how old they are. This disabled person is really young. When you are this age a disabled you have your parent’s insurance. When you are older and have a disability then it might not help you.”

- “I liked at these pictures and thought, yeah, right. The last few years of my mom’s life you had strokes. The people in the hospitals aren’t happy. My mother was in there for 8 months and we never missed a day seeing her. These people look happy. There aren’t that many happy seniors in the world otherwise we wouldn’t have all these services. These people are fine and don’t need any help.”

- “These people aren’t old or disabled. They look like actors.”
**Participant Response Quotes: Albany Focus Group #1**

- “I think this guy is on Viagra. I thought of the Viagra commercials.”
- “Need a combination of people getting physically connected.”
- “They look like models. The picture on the poster of the guy in the wheelchair is real but the lady on the brochure doesn’t seem real.”
- “A picture paints 1000 words. We need to warm it up and make the pictures more believably.”

**Readability**

- “The font is fine, I can read it.”

**Organization of Material**

No quotes.

**Clarity of Content**

No quotes.

**Posters**

- “Is that a Vespa? They are having too much fun. They don’t need help. They are on vacation. Why is money being spent on them? Others who are more needy need it.”
- “They don’t look disabled.”
- “Our professional staff can help you’ needs to be larger.”
- “Having trouble with the white against the blue, the reverse type.”
- “The middle section could be bolded.”
- “Trouble seeing the reverse if it is not bold.”
- “I like the message, “Our professional staff.” I would get rid of the busyness of the ADRC. Who cares? Make that less prominent. Make that more the size of DHS and drive home the message.”
- “You need to add a phone number.”
- “Family looks too happy. They have resources and a support group. They family structure is already there. They family would go there for them. Giving money to people who don’t need it.”
- “You could look at it like people are smiling because this is what your service can do.”
Participant Response Quotes: Albany Focus Group #1

- “The people on the poster don’t look like they need all the services on the poster. I don’t want someone on there that looks like they are gonna keel over.”
- “Need to find the emotion. Want to create the emotion of connection.”
- “What are you branding? Are you branding the ADRC or trying to communicate the services? Communicate what you’re offering.”
- “What are they connecting? See the service being implanted. Woman delivering medication. The service being provided. Putting in a ramp or something.”
- “The guy in the wheelchair looks like he has been connected and he looks proud of it.”
- “You could change the wording on them. They don’t have to be the same.”
- “Redesign to have three of the different services on one poster.”
- “I don’t like that the family looks like a nuclear family. It is not for them.”

Healthy Living Website

- “Swim night, warm water exercise.”
- “Calendar of event.”
- “Bowling league. You can bowl in a wheelchair. Senior league.”
- “Swimming at the YMCA.”
- “Exercise classes.”
- “Risk for starting new services. I have concern about recreating the will. Maybe having links on the website.”
- “Bit about staying independent. Managing your health doesn’t do it. Use those three things. Focus the website on that. Then link to existing community resources. Whatever those three main goals were.”
- “I would like to see a heading that says ‘Community Resources.’ I don’t like those word choices. What are you branding?”
- “Your three goals said it all.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #1

- “Where is financial assistance? What if I need help with someone bringing me groceries. Want to know what services are available.”

- “People would go to this website looking for ways to stay independent and not what should I be eating. They have resources for this. My in-laws are more concerned with retaining their independence than anything. That is what they would be looking for.”

- “How do they pay their light bill? How do you get groceries?”

- “Could use it as a catch all instead of searching on the internet.”

- “It goes back to being the connection bridge.”
**PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #2**

**BROCHURES**

**Overall**

If you had to explain to a friend what the ADRC is, what would you say?

**Verbal Responses**

- “Aging and disability triage, the first place to look.”
- “Aging and disability service for better connection with health social groups.”
- “Centralizes source for information for people needing assistance and with people with their disability. The brochure was pretty good.”
- “Conduit connecting service with those that need it. Geared toward care givers.”

**Written Responses**

- “Aging and disability service for better connection with health social groups.”
- “A conduit connecting available services with those needing those services.”
- “Aging/disability triage. The first place to look.”
- “A centralized source for information to aid people in finding assistance in solving problems associated with their disabilities.”

**Who is this brochure geared toward?**

**Verbal Responses**

- “Almost everyone. But leaves out the mentally ill.”
- “Selling marketing skills. Marketing to your social groups. No specifics. The aging part is pretty funny. Definitely something I have to look more into. Not sure exactly. Know it is a local address where we had our other meeting before this one. Looking for disability and aging. Handicapped individual in some way, aging, dealing with their own need and priorities and how their life skills can go. Aging is 42.”
- “Disabled, people having difficulty interacting on a medical level. Having trouble with their doctor.”
- “Well, I think the reason I said almost everyone is that could have this brochure to a teenage and they could read it and understand or having trouble with a grandparents
and they could relate to the material. The material is geared toward understandability. They have parents or grandparents. But it left out mental illness. Suicidal thoughts. They could see the disabilities in the rest of it.”

Written Responses

- “Selling their marketing skills.”
- “Caregivers.”
- “Almost everyone – leaves out the mentally ill.”
- “Brochure was geared toward disabled and mentally challenged.”

Content

- “Does this actually exist?”
- “Is it funded by the state government, county or feds?”
- “That was the first question that came to my mind too.”
- “The thing to me is the brochure is great. If you can bring this under one heading and bring it all together. Reduce the redundancy out there. Bring it all together and have stability. It would be wonderful. Stability of care, long term, disability, short term. That is hard to find in the economic situation.”
- “You need a clearing house for all the services out there. It is really hard to navigate. My sister gave up trying to navigate the system.”
- “There are a lot of words on here. To me it says this service is available, but it doesn’t say that this is the first pace that you start. There are a lot of different department and thing. What is step one?”
- “Transportation is one here twice. It is very important though. That was a good comments about where you start. It is already on the back. it is not obvious that you are leading the reader to the contact information on the back. Put this throughout the brochure.”
- “Do the people putting this together see it as filling a new need or replace existing sources. Are they trying to make all the services easier to navigate? It kind of says that. That we can connect you with all these others thing. Is it going to replace something or not.”
- “It is so tiresome. Once you start the process is the information you give them going to be disseminate you do have to repeat it over and over again. One agency is not
communicating with the next agency. As you’re done as the care provider you are so tired at the end. Or the person with the disability you get so tired that you give up. You don’t know that this is final things. Did they final figure out that they need one agency?” (Everyone agreed)

- “It is not evident that it is not just another blanket.”
- “The images are in fine, they indicated success. Show images of people in distress. They are pictures of people that are all fine and good. Maybe need to show people that are in a little bit of trouble.”

Reliability

- “It has DHS backing it up. Most people are aware of Lin Benton counties disabilities program. It is like you are competing. Where does it fit in the scheme of all these organizations? Sometimes you know what DHS is used for. To break down the paper path. Not deal with children because you want to be a care provider. Because there is a need. There might be an avenue that we can get past. There are just coming down as the hammer.”
- “Can’t figure it out. Not Hispanics or Asians in here.”
- “Put it up with the rest of them. Put it on the wall with all the brochures. I hope it is right. Not sure form picking it up.”
- “If you’re doctor handed it to you personally I would feel more connected. Depends on who is giving you the brochure. Needs to come from a trusted source.”
- “If its’ stand alone. If it’s in the doctor’s office I might take a harder look at it and question it more. Depends on where I’m seeing it and who is giving me the information. Could be made more reliable if given by someone I trusted. I’ve been burned too many times already.”

Look

Cover

- “Background is very confusing. I am 67 and looking for clear backgrounds and things that aren’t an effort to read. Too much going on.”
- “As someone with epilepsy and two brain tumors, I agree.”
- “Background has too many words and it’s a mess. What is this doing in here? The back is easier to see. I would take the black maker to it.”
- “Why does ADRC have those little arrows on it? It is confusing. Get rider of the top part in green. It is so small and confusing.”
- "I liked the cover. The way I read it was fast. It picked it up because I saw what I did on the front. You know you will get transportation."

- "The ‘get connected’ part: There should be another message. Get connected to what? What your resource or caring people. In the name you are already pronouncing it. Like people didn’t pick up that they are going to get connection. Get the green things out of the way. More on purpose. Top part is just too much it is a distraction." (lots of nods)

- "It bothers me because of my type of disability. It is too musty. If I am trying to look at it, I don’t because it is difficult for me to read, if you are asking me with this type of disability I will toss it away. You need to clean it up."

- "Of Oregon thing: Where else would it come from? Put it up front first. Then it is in this ugly color. Or leave it has state. It is obvious that it is Oregon; or you could put it up front. Oregon’s ADRC."

- "People with brain problems won’t look at this.”

**Colors**

- "Like the color. It is fine. All this extraneous stuff like the arrows."

- "All the green on the front should be there. The green line is irritating and doesn’t do anything."

- "The green within the body is good and you are being drawn into what you are saying."

- "The blue shading on the bottom is confusing."

- "It is more words."

- "You’ve got everything repeated everywhere. What is with all the words? Make simpler. Don’t need to testimonials. Need more white space. Less words."

- "Looked like a sold eye all the way through. It flowed."

- "It is gang like with the colors.”

**Photographs**

- "Need more diversity. Talk about people and show people who are distressed. We are struggling, let us relate to people who are having a tough time. Shoe me that I am not alone. I am not smiling, I am in pain. I am struggling. I need to make sure that I am getting through every day and my husband as well. These people are too happy and retied. This isn’t my life.”
Participant Response Quotes: Albany Focus Group #2

- “Form the resource specialist saying this, what basis does this have. It is self aggrandizing. Look how good we are. Retracts form the reliability factor. Testimonials from people who have received the services instead. Why that?”

- “Should display people who are in the position of needing people. It is all taken care. The connection of people getting there through the ADRC isn’t coming through. In real life this isn’t true.”

- “Would you pick up a brochure without a happy face on it? Good point.”

- “Form a marketing stand point, I can imagine the intent. Maybe need a before and after split. Show both of them.”

Readability

- “Middle of the road. Not different than any brochure. Most of the space you are using up doesn’t take you to what you want done. That is the call, come see us. It should be more that we want to help you, we want to help you now.”

Organization of Material

No quotes.

Clarity of Content

No quotes.

Posters

- “Too many words. Too much fine print. I can’t read line 3 and 4. Our professional staff.”

- “Same thing.”

- “No diamond things in the ADRC logo.”

- “The guy in wheelchair is more representative of where you’re going.”

- “Get connected, family reunion here.”

- “The scooter one is really unrealistic.”

- “I want to see someone with a disability and dealing with the type of things that I’m dealing with. The wheelchair one is the best.”

- “I think the realistic part of getting connected with the motor scooter is good. It is hard to say because you are brining this all out. I think it sounds good. We are nit picking this all apart but I want to know where to go with it.”
**Participant Response Quotes: Albany Focus Group #2**

- “I’m coming from a differ space. Family, caregiver, disabilities. My life has been dealing with people with disability since I was 17 or 18. And I never saw the other images on the posters.”

- “I would like to see (instead of scooter) grandma in a chair, adult daughter nearby with a smile on her face. Same thing with husband in a chair and elderly wife nearby. You can see that he has dementia and she is dealing with her own issues. She may or may not get around. She doesn’t trust services so she stays in here house. Adult female is happy because she has support. That would speak to me.”

- “That image would speak to me because that is what I experience.”

**Healthy Living Website**

- “What about finances?”

**Physical activity**

- “Simple exercises while you’re sitting. Things you can do through your daily routine. Picking something up three times. Incorporate this activity through daily routine. Find moments in the day where you can do those things. Instructions on how to do this.”

- “Physical therapy. So when you are doing care giving at home that you can incorporate at home to help that caregiver to extend that without having to take the person somewhere. There are really simple pictures that you can show. Give physical strength to help that our house bound that can reduce the cost of physical therapy. Advice and pictures. Extending range of motion and breathing.”

- “Breathing exercise.”

- “Relaxation exercises. Things that support that are going on inside the home. Support the environment in the home and help the caregiver.”

- “Using the cans of vegetables to lift weights. Practical, at home.”

- “Senior fitness class at the Y. I like group exercise. After 30 years in Medford, I go to the Y now and that is my core group. We keep in touch. I can’t function at home.”

- “Group activities.”

- “Get the stretch bands.”

- “YMCA, swim and water exercises. Connecting to those things. I have a friend who’s older parents would do this.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #2

Healthy eating

- “Diabetic eating.”
- “For people who don’t get out often it is hard to get fresh vegetables. Info on local markets or delivery services. You buy vegetable and want to eat that way but you can’t do it daily if you can’t get them it is hard.”
- “Foods that last longer but are still healthy. Fresh fruits and vegetables are hard for people to maintain. Information on food with a longer shelf life.”
- “Local markets or CSAs. It was hard for me to find one. The produce is so fresh. They pick in the morning and I have it by 5.”
- “Benton County has a Wednesday market. Our local market is a few blocks away. In Corvallis it happens on Saturday mornings.”
- “I would like to see more community based plots of land and growing. Community gardens for senior and people with disability. Make it easy for them to have access to fresh fruits and veggies.”
- “The types of issues that senior and people with disabilities have it is totally different than when you’re older. Lots of medications makes it hard. The quantity that you’re doctors are giving you is huge. It totally wrecks the aging body. So Healthy Eating is really important.”
- “A church is Corvallis has garden plots. Sometimes that is their only connection. It is a Sunday morning thing. A bus comes from my church.”

Managing our health

- “Managing your health, not our health.”
- “Interaction of drugs. Need to put that on there.”

Staying connected

- “Not sure about this one.”
- “Another way to say this. Some kind of social connection.”
- “If you’re involved in the swim then you are getting some social connection at the same time.”
- “Staying connected doesn’t say enough about what you want.”
- “Trips that churches make to garden plots.”
“Church information for activities in Albany and Corvallis.”

“The whole things of staying connecting, how do you do it? Without people in the community, in your networking, etc? Don’t want to isolate you’re caregivers.”

What else do you think about?

“Physical, emotional, spiritual, social, education (Mental). My mind going to turn to jello. I am use to being active.”

“I picked up a brochure for ALL. Academy for lifelong learning. That is a cool resource that has people who are past professor at OSU. Now I am tutoring at one of the elementary schools to stay sharp. That helped at lot.”

“Foster grandparent program. We have a meeting once a month where you can connect with a lot of counties and people.”

“Getting out with the kinds, a reason to get up in the morning.”

“Social, educational, keep your mind sharp. Volunteerism. It is important to give back. Story about the lady in the paper who did not qualify for assistance. Her only connection was her internet or TV. Sitting at home just makes you more depressed. Need to get those people out in the community.”

“Opportunities at the college or university. LB, OSU.”

“Finances is big. When someone with an Oregon Trail card buys soda pop and lottery tickets that is like what do we want our money being spent on?”

Where do you find this information now?

“I do a lot of research. Books. I read a lot. I use the library.” (all agreed)

“I use my doctor a lot. I use every resource that I possibly can. Any type of person or avenue that I can. Healthy eating and nutrition is huge because of diet restrictions that my husband has. We have to maintain his life. It is hard. The medications we have to take, makes it hard. Any avenue that I can take I find.”

“Food network. Any network that I can. Any recipe that I modify I do. We can’t eat out with our restrictions. Food is a big issue to the elderly. Taste buds change. You need to food to be exciting and vibrant. It is a challenge with dietary restriction. It can be fun though.”

“My standpoint is that my concepts are really basic. I relay basically on the initial instruction that you get when you are in highs school or college. The basic concepts don’t change or if they do they change back.”
“Healthy Eating – easy recipes. I am cooking for 1 now. Super simple. Nothing with too much species. I only have cinnamon. I make food that is easier now. Nothing complicated.”

“I get my recipes out of my head now. I’m pre-diabetic and pre-cardiac. It has to be reasonable. Not expensive. Really simple foods.”

“Linn Benton (LB) culinary thing. New, creative ideas.”

“You can do the simple thing. 3, 4 or 5 ingredients max.”

“LB extension, OSU extension. They put out something once a month. If you need something like you can get the information. They have an open page thing. I live and die by it in the spring. They talk about canning and other thing. Have them come in and help. They are wonderful.”

“I get information from AM radio. Reading. Newspaper. Brochures. The local section of the newspaper. What’s happening agriculturally because that is an asset for disabilities. Pets. Where so we take our pets? Animals with disabilities and helps dogs.”

Would you use the ADRC website for this info?

“‘Yes.’

“‘Needs to be easy to navigate.’”

“They are all important aspects of our society and personal life. I don’t see why not.”

“‘Pushing it out like you are is great. We are all doing something together that is networking.’”

Other components?

“Finances. How to survive on what you’ve got. My parents never talked about retirement. You live, your work and you die. The money has to last longer now.”

“That rings true for others. This should factor into everything. It needs to be in all these sections. All the things have to be cheap or economical. Can’t put expensive resources on there.”

“I understand about the story and the rest of it. Trying to live on what you get form disability is the VA is really difficult. When have to factor in that you are paying your own medical. You can constantly have a problem. Expensive medication. Need to keep everything affordable and a roof over your head and food on the table and pay your medical. It is not easy.”
**PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #3**

**BROCHURES**

**Overall**

If you had to explain to a friend what the ADRC is, what would you say?

**Verbal Responses**

- “Gateway source to elder services of all kinds. They are going to steer you toward who can be helpful to you. The ADRC isn’t going to.”

- “One stop shopping for senior services and info regarding the services. If you had a question about helping paying for electricity that you could call this. Clearinghouse place.”

- “One stop type of services that provides much needs services for seniors and the handicapped. Like a locator. Like you are Googling it or something.”

- “I can’t think what I would say. Right now I have a totally blank mind. I don’t know how I would present anything. I’m a one on one person.”

- “It is an association or group where they can assist people with disabilities. They guide you to who you are supposed to call. You call them up and say what you are looking for and they will guide you. The analogy of Googling something is good. In the brochure they direct you to different places.”

- “If I had that brochure that I needed to find someone to take me to the doctor every week because I don’t drive. I associate ADRC and a phone number I could call to get the resources that I need.”

- “Problem I found is that aging individuals start developing forgetting problems. Even if you tell them where to go they could forget it the next day. The organization could guide them to where they need to be. I tried to start a group called the VIPs for the visually impaired. Giving information in one location so you don’t have to go in 16 different directions.”

**Written Responses**

- “A gateway source to elder services of all kinds.”

- “One-stop shopping for senior services and info regarding the services.”

- “An association that can assist people with disabilities or income problems as well as medical and can guide you to the right person.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #3

- “It sounds as though this is a one-stop type of service to assist in providing much needed services for seniors and handicapped.”

- “Aging/disability resource center. Organization containing elements capable of helping Ads with their problems. The ADRC can connect the aging recipient with those who can help.”

Who is this brochure geared toward?

Verbal Responses

- “Elders and people who care for them.”

- “Seniors and people who care for them.”

- “People in need. Seniors, handicapped. People with physical problems.”

- “People who need information who don’t know where it starts. This is the place it can start. If go to the phone book it is overwhelming and confusing. This makes it more manageable.”

Written Responses

- “Elders and those who care for elders.”

- “Seniors.”

- “Seniors – those who need information they could not find on their own.”

- “Locating these various services.”

- “Obviously the disabled senior in need, especially the indigent! Unfortunately occasionally personal egos prevail, causing those who can help to resign.”

Content

- “So it says this is a single. Does that mean that you just dial one number?”

- “Who pays for it?”

- “Is this a hypothetical thing? I want a large sticker with a phone number. Then I can put in on the refrigerator. Then the phone number is available and always ready. The print has to be really large. Bigger is better.”

- “Individuals don’t know what to do. There should be a group that will help you follow up.”
“Who funds this?”

“Is it government? Does this come out of our tax dollars?”

“Is it something new? How long has it been available?”

“Seniors get very lonely when they are living alone. They should be encouraged to develop some kind of hobby. They need to keep themselves busy. Need to find the seniors and find what they are interested in.”

“Last night they had a meeting here about the photography club. We could take a picture of that cabinet and it could be interesting depending.”

“Is there something where you have volunteers? Where you visit seniors once or twice a week to talk to people? Is that a service of the ADRC? It talks about in-home services in here and I’m just wondering if visiting can be a service. Some people are alone for days and no one calls.”

“Nothing here about hospice care. Shouldn’t that be included?”

“It sounds like the ADRC doesn’t provide any services. It is an office that you can walk into? So us talking about all these things that seniors need isn’t the point. We need to focus on the ADRC.”

“Something about hospice. The hospital helps take care of this. We had to contact hospice ourselves. The care for our mother was really hard before hospice came in.”

Reliability

“Is the ADRC does what it says in the brochure. Depends on how it performs. Looking at the brochure it sounds great. I wish there was something like this when we were caring for our mother. I think the brochure is great. Based on the brochure it sounds great.”

“Based on the quotes here. It sounds like a 5 to me.”

“I didn’t look at the quotes; I just looked at the services. I feel skeptical about it too. But if it delivers on half of this then it would be a 5. There is so much out there that we need to get access to.”

“I’m not sure what all this covers. I think it is all reliable myself because I worked for senior services. I see nothing wrong with it. Sometimes the caregivers get awful burnt out.”

“I would give it a 5 from the brochure. If it deliver what it says it deliver then it would phenomenal.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #3

- “Like it says on the front ‘get connect’ that is great. People really need this.”
- “Reliability can only be determined by how the organization has functioned.”
- “How is this going to be paid for? Are they volunteers or are they going to be paid? Who is going to oversee this? It is about a 3 now. Show me first.”
- “It is one thing to have this system in place but how are they going to perform. How is this service going to perform? Are they going to be thorough?”

Look

- “Red is not good for people losing their eyesight. Red or yellow is hard for people with bad eyesight. Yellow on white is difficult to look at. The colors are pretty ok.”
- “Whatever happened to black against white. That is the easiest to read. Especially if it is a large font. Bold font.”
- “We’re trying to create a message. The photos aren’t important. When you create a brochure, what are you trying to get across? This brochure didn’t have too many photos.”
- “For me the photos didn’t really show the aging and disability resource connection. They don’t really connect to you.”
- “Would like to see someone in bed smiling at you.”
- “Maybe some graphics rather than actual photos of people. It is hard to connect of pictures of strangers.”
- “The first picture of the girl in the wheelchair is the best.”
- “I had a 5 before he mentioned the black on white thing. I was legally blind at the time and I wouldn’t have been able to read this at that time.”
- “I thought it was easy to understand.”
- “Up until this very moment I just saw the background color. It is so light.”

Posters

- “I like those seniors on the scooter.”
- “I’m cynical about things. These people look so happy.”
- “Part of a person’s physical well being is tied to their mental wellbeing. Maybe having someone doing an activity like gardening.”
**PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #3**

- “The one with the family doesn’t like sense to me.”
- “I don’t think the picture present seniors. Most seniors aren’t like this.”
- “The disability guy on the end makes sense. This photo is more realistic.”
- “The happy family is unrealistic.”
- “I think the ‘get connected’. If everyone knew what that was then it would make sense. You don’t have an idea what get connected means based off the photos.”
- “Do some service oriented photos.”
- “We don’t need to have the images in there. They should say senior help in large word. These people don’t look like they need help.”
- “If get connected was a huge campaign and people knew it was ADRC then that would make sense.”
- “When you see ‘get connected’ on a billboard. Then people can associate it with the ADRC.”
- “If you are going to get a color and use it for the ADRC, pick one color. Be consistent. You could even use rainbow colors. You associate the color with the ADRC.”

**Healthy Living Website**

- “Need resource to help seniors take care of their homes. Fix things around the house, mow lawns, etc. Need people you can trust that won’t rip you off.”
- “It would be great to have a newsletter about the ADRC.”
- “If this thing is the clearinghouse, then a monthly newsletter telling about the new sources that have been added.”
- “There should be an address where we can contact you.”
- “Need to get more volunteers for seniors. If everyone could volunteer an hour month that would be great. You never know where it could it lead.”

**Physical Activity**

- “Walking tours. Organized groups of people who go on walks. Sometimes they are architectural or historical walks.”
- “I had never been to the oldest house here in Albany before. You go in and take a look and it is really fun. It opens up a whole new world.”
PARTICIPANT RESPONSE QUOTES: ALBANY FOCUS GROUP #3

- “Physical activity that goes along with a healthy diet.”

Healthy Eating

- “Recipes in large font sizes. Make it easy to print out.”
- “Diabetes diets or hypertension diets. Low-sodium.”
- “I retired from HERS. They send out a newsletter.”
- “Recipes.”
- “Diets for people who are recently diagnosed with a disease.”

Managing our Health

- “Someone to take you to the store.”
- “What do you look for if you’re a diabetic?”
- “Dietitians that volunteer their time and you can get information about it.”
- “How to take your own blood pressure.”

Staying Connected

- “With my partial vision damage. When I get on the internet it becomes almost impossible to find what you are looking for.”
- “You can find some recipes online but it I impossible to find out how to print it in large font.”
- “New programs that they can be sent to. Like RSVP. Staying connected is like new resources that people need.”
- “Library class where you can learn computers or having a lesson for an hour.”
- “Photography.”
- “Oregon Club music.”
- “Ongoing events.”
- “Quilting fairs.”
- “Senior center in Corvallis will take a busload of people to the quilt show in Sisters.”
Participant Response Quotes: Albany Focus Group #3

- “Trips to go on. Like shopping in Portland.”
- “Volunteer jobs.”
- “People to come discuss topics with you like science. Create a hobby for people to focus on instead of their aches and pains.”
- “New opportunities for hobbies.”
- “Like when you go to the museum and someone explains things to you. Network and meet with other people.”
- “You can also organize trips for the seniors.”
**PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1**

**BROCHURES**

**Overall**

If you had to explain to a friend what the ADRC is, what would you say?

**Verbal Responses**

- “Program to help people that have help problems or disability. Find people that can help them with their problems and where they need to be.”
- “C – State resources for the elderly or disabled to help them with their life.”
- “Great resource to be sure that needs get meet. Agree with previous two. Like that it is free.”
- “Sounds good – what the previous people said. A free resource.”

**Written Responses**

- “A free resource guide to assisting/aiding seniors and people with disabilities, from medical.”
- “A state resource for the elderly and/or disabled to help them live their life.”
- “A resource for connecting people who have disabilities or health problems with those who can help them.”

**Who is this brochure geared toward?**

**Verbal Responses**

- “Disabled. Elderly.”
- “Ramp with wheelchair makes it look like it is for disabled.”
- “Feel that it is geared toward everyone b/c all people have someone that they could help give the brochure to.”
- “Geared toward aging and disabled to make life a little easier.”
- “Help get around red tape with social security.”
- “Helps a lot to have an advocate for ‘SSD’.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

- “Someone to help talk to both state and federal disability. Lawyer helps talk to both groups.”

Written Responses

- “Helping to make sure that services are available for seniors and people with disabilities, making sure their needs are met.”

- “Anyone that knows an elderly or disabled person.”

- “Anyone who knows someone who could use their services.”

Content

- “Is there an ADRC center in the area? Are there physical locations?”

- “What is it about?”

- “A list of services provided would be helpful and you could match that with what you are looking for. A complete list within the brochure is helpful.”

- “The locations and how far away they are would be helpful.”

- “Transportation is an important factor for getting to the facility.”

- “Would want to know who qualifies.”

- “Would it be easily found on the internet? A lot of people are looking for this kind of thing there, so how easy would it be to find it?”

- “Some people might like to go online – some physical address.”

- “Would like to go to a physical place after checking it out in the internet.”

- “Will the ADRC have medication and diabetes strips at their locations? Would want access to medical supplies.”

- “Will this be a clinic?”

Reliability

- “Would give it a 4.”

- “Would want to visit before could rate it by the brochure.”

- “A lot of scams. This is pretty literature, but would want to know more about what walking into.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

Look

Cover

- “Thought the triangles with ADRC caught interest and thought a lot of work had been put into it.”
- “Make the ‘Oregon’ a little bolder. Should stand out more.”
- “Needs brighter colors. Just a little bit.”
- “It’s good.”
- “Thought of a phone company when say ‘get connected.’ The other words were lost with the bright ‘get connect’ message.”
- “What can be done to make it a 5?”
- “Background text that is faded now could be brighter or darker text.”
- “The ‘get connected’ throws off what you might think when you first look at it.”
- “Maybe ‘connected’ is not the right word to be jumping out.”
- “Perhaps the ADRC part could be larger. The name is more connected than the message of ‘get connected’.”

Colors

- “Everything is good but it needs something. Needs a little more something to really get attention. Might walk right by it without getting too much attention.”
- “Like the colors with the dark greens and purples.”
- “A good color palate for everyone.”
- “Something that wanted to stand out more could have a yellow accent color or something outlining it. Other people agreed.”
- “Green is a good color.”
- “The triangle within the A of the ADRC should also be green. It looks a little off with the other green triangles.”

Photographs

- “Like the photos: different ages, disabled people. All age groups and disabled.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

• “Maybe needs a little kid on there with ADHD.”

• “Maybe someone with physical disability as well as just mental disability.”

• “Pictures could be larger.”

• “Could put a picture in the middle around where the ‘get connected’ is.”

• “If disabilities was not on the front would not have wanted to participate.”

Inside

• “Different races, ages, genders and different disabilities represented. Should have mental and physical disabled.”

• “Maybe should a kid with his nana. Have a family seen.”

• “More younger people to give a mixed feeling. Very weighted toward the elderly. Not evenly distributed with the age groups.”

• “More pictures inside on the various panels.”

• “Makes wonder if this is for kids as well with so many elderly.”

• “After mentioned that seems skewed towards older people other people noticed the same thing.”

Readability

• “Can easily see the text without glasses.”

• “Bullets increase readability.”

• “Font big enough and a good darkness to be able to see it easily.”

• “Big font and being in print helped a lot.”

Organization of Material

• “Pretty well laid out. Good organization that dives into what the program is all about.”

• “The different bullets seem a little random and not in any order in how they are laid out.”

Clarity of Content

• “Easy to understand.”
• “Some things not easy to understand. Don’t remember what was wrong with some of the sections.”

• “The cover could use a little more help. Looks like a phone brochure. A bit more on the ‘information for assistance’.”

• “Liked the back that gave lots of ways on how to communicate. Good to have all the contact information in one place.”

Anything else that should be on the back?

• “A picture would be good.”

• “A picture of the building where this is would be helpful.”

• “Some kind of washed out picture of the physical location would be good.” (Others agree.)

Posters

• “I like that it has lots of different races. Family with the kids in it.”

• Wheelchair: “#2 looks lonely. Needs a caretaker or someone with him. Needs a smile on his face.”

• Scooter: #3. “Like that it is two elderly active outgoing and cute. Cute to see an older couple on a scooter. Might be older with disability but still having fun.”

• “Like the size of the fonts. The right size to make him want to read the whole poster.”

• “Same style as in brochure shows that the materials are connected.”

• “#2 – ‘get connected’ should be changed to get help. Meant to say that ‘we are here to help you.’ It isn’t obvious that it is a resource connection. Not clear.”

• “#2 could be good with a pet, golden retriever. Posters says “get connected” but the guy is there by himself.”

• “#2 Maybe he could even be outside to get connected with the outdoors.”

• “#1, #3 the people are smiling and seem connected, but #2 does not seem connected.”

• “Phone number should be added to the poster.”

• “‘Our professional staff can help you in many ways’ should be in bold.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

- “Don’t notice the words in the back in the main part of the poster where it says ‘get connected.’ Maybe a light pastel color. Can’t read the text.”

Healthy Living Website

- “I would like to see ‘Managing Stress’ as a subject.”
- “Associations that could belong to. Music concerts. Events happening in community. Somewhere/something to keep you busy and connected.”
- “You don’t know what to do or where to go? Talk to us ‘talk to us, we will help you’.”
- “What do you think of the concept of staying connected?”
- “Really means something when you are not connected with your community.”
- “Are there volunteer opportunities?”

Physical activity

- “Exercises that can be done in the house.”
- “How do you use your muscles?”
- “Exercise for stress.”
- “Maybe information on physical therapy that you can use for your legs or other parts of your body. Tid bits that you can use to take care of yourself on a daily or weekly basis.”
- “Wheelchair exercises.”
- “Have areas around the city or town, or walking trail, give direction on how to get there. Show a map of how long it is that if you want to walk a mile a day, you know how to do it and can track it.”
- “Perhaps something for handicap people.”
- “Could also be crafts or scrapbooking. Beads.”
- “Have to keep hands busy. Will make beads or otherwise start making things. Keep the mind and the hands busy. Will go for a short little walk. Can be something small that keeps healthy and physical attributes there.”
- “Don’t atrophy.”
- “Keeping the mind sharp is a good physical activity.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

- “Trivia questions are good.”

Healthy eating
- “10 minute meal ideas.”
- “Healthy sugars, healthy fats.”
- “Recipe ideas.”
- “Simple and complex carbohydrates.”
- “Diabetic recipes/cooking.”
- “Diabetic snacks.”
- “I want to learn how to cook for different diet needs for diabetic or other eating disorders, or that need specific things.”
- “Phone number to a diabetic educator.”

Managing our Health
- “Pharmacies giving flu shots, blood pressure checked, etc.”
- “ Discounts, sales and other samples and things for medicines.”

Do you feel like there is a clearing house for this kind of information?
- “If there is, doesn’t know about it. Imagines that there probably is, but probably not state oriented.”
- “Kind of like web MD can find information, but there is no one to talk to.”
- “Want to find a live person, not something automated.”
- “Credentials are good too.”

What other components about Healthy Living are important to you or your family?
- “Stress management.”
- “Keeping positive.”
- “Self esteem.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #1

- “When there are things that you cannot do with family members it gets depressing. Having something about keeping your self esteem up. Is very easy for someone that is aging or disabled to keep positive. Easy to get depressed because something makes you believe that you can do something.”

- “Some spiritual and emotional help and a way to get to someone right away.”

- “Everyone in group believed that having a mental and emotional section would be very helpful.”

- “Put Mr. Spock in there, where people will want to go look at something on a regular basis. Something that keeps you coming back every day and gets your attention.”

- “Family relations would be helpful. Opportunity for good communication with family.”

Anything else that you want to talk about?

- “Last sentence of first bulleted area. If in a wheelchair the bullet with the ‘walk in’ might be troublesome. Perhaps put the phone number right inside the first fold. ‘Your ADRC connects you to the help you need’.”

- “Could something be put into the brochure for the homeless? A resource for the homeless. A phone number might be very helpful. Even if the information is just about a place to stay for the night. Not a lot of help out there for homeless people.”

- “If homeless and disabled can be very hard to get help. Homeless that are disabled may not be able to get benefits because they do not have a physical address.”

- “Need a soup kitchen in town.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #2

BROCHURES

Overall

If you had to explain to a friend what the ADRC is, what would you say?

Verbal Responses

• “There is counseling and it is a kind of a take from the local senior center with the counseling. Reminds her of hospice. Is a benefit for seniors and disabled people. Can help with counseling and getting equipment. Can help with any disabilities.”

• “It’s a group that supports you and helps stay in contact with physical activities and health. A database for Q&A.”

• “A place to get answers to questions that you or your loved ones might have.”

• “Information referral was the first thing that popped into head. If talking to someone would say ‘it would give information, options you might have, its free and easy to access’.”

Written Responses

• “Very informative counseling.”

• “Information and referral - not only do they give you information but it appears they help you discern what you need and options. Choices. It’s free, easy to access.”

• “A place to get answers for you and your loved ones.”

• “A supportive group – physical activity, health.”

Who is this brochure geared toward?

Verbal Responses

• “Seniors and disabled.”

• “Anyone that you could find. A neighbor, friend, family.”

• “At first geared more towards family or caregivers. But is also directed toward the individual that is aging or with a disability.”

• “People with aging and disability that are older or even older adults. Spent 3 days with a family that has a daughter helping family understand how to access resources. Say that
this program is probably very helpful but that many people wait until it is an emergency before picking up and getting to understand the resources that are out there.”

- “People need to be educated about resources and prevention before things become an emergency.”

Written Responses

- “Seniors and disabled.”
- “Older people, people who have disabilities, adult children of even older adults.”
- “Family members of seniors.”
- “Help for the aged and disabled.”

Content

- “I’m curious to know if is this duplicating what is already existing?”
- “Is this ‘walk in’, or website? The walk in is not clean on the brochure of where it is here.”
- “Jim says that if he was able to use the service he would be very appreciated.”
- “We have hospice on one place and the hospital in one place and senior center in another place. If all these locations and resources can be placed into one facility than it can be very helpful. Hospice was helpful medically wise, but then have to go somewhere else for equipment.”
- “How much is it going to cost? What can you do for me? How much time is this going to take from my schedule? How are you going to help me, when I am working on helping other people? How will you help me, help them?”
- “With all the information out there, it seems like this is trying to get everything where you can digest it. People on SS are a burden and don’t know how it can be solved but like the plan of taking it piece by piece.”
- “Are they [ADRC] trying to help us, help ourselves?”
- “If there was an ADRC in the tri cities, what time could I get a hold of them if I need to get a hold of them? Could I have an email relationship or otherwise converse with someone online? Maybe there would be some after hours times that would be helpful to me because I am working during the day. Would that be available? Seems like do a pretty in depth assessment, what qualifications would the people have that are making the assessment for what equipment is needed, or other resources that will be provided. If
the program is in cyberspace or would they go out and see people that would not be able to visit the physical locations?"

- “Is it also a connecting place where you cannot only get services, but do peer counseling, or volunteering or way to stay in touch?”

Reliability
No quotes.

Look

Cover
- “Background words are hard to see. But are they important words?"
- “Wasn’t sure why, but maybe it is the background clutter that makes my eyes work harder.”
- “Maybe it can be more green.”
- “It needs to be more colorful. Green always helps stuff.”
- “Not just getting connected but getting answers, or getting help. The word connected doesn’t grab her. More green, brighter green. The “of Oregon” could be a brighter green than is the darker green at the top. Get rid of the faint background text.”
- “Not sure if get connected is helpful. Get help might not be that good either, but getting answers could draw people. Realize that it is about getting connected.”

Colors
No quotes.

Photographs
- “Like the photo inside middle top. Would like the photos on the cover to be bright and happy.”
- “If going to have photos, maybe make them a bit bigger, but actually like that there is an intergenerational photo. Fairly diverse audience. On the inside think that the middle bottom one, does anything for her. Is she a worker? Not sure that this photo is adding anything.”
- “Put middle top photo somewhere on the front because it is happy and cheerful. The rest of the photos are pretty good.”
- “The front photos are depressing. They are aging. When you are taking care of old people it is tough and you want a lift. If it is happy pictures you think that you might be
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #2

able to help people. Like the photo on the inside top. How am I going to be happy like the people in the photos?”

- “With the get connected logo, have to be careful with the pictures so you don’t seem like a match making service.”
- “Maybe companionship is a service to add with the program.”

Readability

- “More bright colors interspersed.”
- “Size of font is good so that can read it without the glasses.”
- “The bulk of the text could be a bit darker but also like the blue text.”
- “Make the triangles red so that they don’t blend in so much. Make the triangles pop more. Current green seems hospital-ly so want to make it red. Everyone else thought the green was ok. Not crazy about the shade of the green necessarily, but would definitely stay with green. Like the green that is just above the pictures on the front panel.”

Organization of Material

No quotes.

Clarity of Content

No quotes.

Posters

- “The minority should be a minority, not all black. If it is a family that is easy enough and it will work.”
- “I like #3 with the scooter best.”
- “I like #1 because it brings in all the age groups.”
- “Maybe in #3 could have younger people with it too.”
- “Should have something happy with #2. It is a sad photo because he is lonely. Perhaps it is him being independent.”
- “Troublesome that #2 is alone. Perhaps a service animal such as a dog would be nice.”
- “Group thought #2 is depressing and that an animal or someone with him would be good.”
**Participant Response Quotes: La Grande Focus Group #2**

- “Some thought that other people or an action such as bouncing a basketball would be #2 more happy.”

- “Background words don’t add much. Give background so that it is not plain.”

- “Like the simple blue and what text and like the messaging of it.”

- “The green is a little blah. If you want it to pop out at you need a brighter color. Like the red and blue from the flyer that promoted the event which is more catching.”

- “#3 should be a red scooter instead of a green one.”

**Healthy Living Website**

**Staying connected**

- “Clubs, events.”

- “Many things in the senior center with dancing pinnacle. Does a lot of activities and publicizes them a lot.”

- “Volunteer opportunities could go here. Seniors can also go volunteer themselves such as volunteerings for dances and the middle and high school.”

- “There is a big list that is kept in the local newspaper for things that people need volunteers for.”

- “Old Time Fiddlers are the senior center. Someone calls and lets people know that there will be an activity. If someone within the group [ADRC] can let people know about the activities. Really appreciates it when someone calls him to let him know that activities are going on.”

- “Should be in the newspaper, magazine, at senior center. Should not just be on the computer.”

**Physical activity**

- “Locations for gyms or places to work out. Physical therapists. Bicycle paths.”

- “Local pools and walking trails. Walking paths. Playgrounds that are handicap accessible. The hospital does have a gym, but would want to know who can go and how much it would cost, hours of operation for the gym and for specific things like the gym.”

- “Trying to get physical type things going at the senior center, but it isn’t working.”

- “What qualifications or opportunities of fun activities are there such as dance where older people or with disabilities that people can access?”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #2

- “Maybe some of the clubs such as bird watching that leads to a physical activity could be added to the website. It is mental and physical. Gets out of the house and connected to people.”

- “Like knowing the times and hours of facilities. Would be great to have a bus schedule that is associated with the program and how you can use the bus to get there for when things are open. Should also include the prices.”

Healthy eating

- “Farmers maker and how it can be accessed.”

- “Senior center needs help to get meals out every day.”

- “Should provide counseling on how to eat better. Nutrition would be very helpful and how it is good for your health. Could be a class, or a meeting where could share recipes and quick meals. If you are by yourself a small meal is ok.”

- “Information that shows what ingredients can be purchases in small quantities.”

- “Biggest resource in the community is a good nutrition center within the hospital that could perhaps give regular tips.”

- “There was an article about diabetics that was published. Specific tips for general good eating would be great. Small articles.”

- “Linking in with cooking classes going on or weight watchers programs in town would be helpful.”

- “The nutritionist in town is very expensive but perhaps the person could give a class to a group. Believes that people learn more through listening to others than reading.”

Managing our health

- “Would love to see phone numbers for hospice, home health and other agencies that there are that people done know about.”

- “Alternative medicine. Acupuncture, naturopath, etc. Would want to know where you can find the people and would want to know alternative for managing health.”

- “Workshops for ‘living well’ or managing chronic conditions would be good. Some of these things exist for workshop series and hospital groups, etc.”

- “Lifeline and call button, wellness information.”

- “Staying connected good for social health. Doesn’t seem that mental health is a large focus of the website. Maybe with all of the categories there should be sub categories.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #3

BROCHURES

Overall

If you had to explain to a friend what the ADRC is, what would you say?

Verbal Responses

- “A service or place to obtain services for the aging populations and or population of people who are disabled.”
- “A program that assists elderly people. Older people.”
- “Resource help center for people with needs.”
- “Very informative for any individual. Very interesting in all aspects of good for the individual.”
- “Would welcome anything that helps the aging and disability programs.”

Written Responses

- “A service/place to obtain services for the aging populations and/or population of people who are disabled.”
- “Informative.”
- “It’s a program that assists elderly people.”
- “A resource help center for people with needs.”

Who is this brochure geared toward?

Verbal Responses

- “Nursing home staff.”
- “Older people.”
- “People or are aging, have disabilities or that are aging or have disabilities.”
- “There are more old people on it than people with disabilities.”

Written Responses

- “Everyone.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #3

- “Older people.”
- “Nursing home status, disabled.”
- “The aging population and families/friends of those who are aging. Also people with disabilities.”

Content

- “The cost to get services.”
- “Do you need to make an appointment?”
- “If you don’t live in the area what would you do if you needed services?”
- “People might not know what DHS and ADRC stand for, or who the programs are through.”
- “Where is it located? If you call the company, would you get sufficient information about the entity and the people that work there?”
- “Would want to be sure that was not being scammed. Want to be sure that the customer knows that the organization does.”
- “Would you want to know more about services that the brochure does not mention to you?”
- “The services are listed fully. What about hospice? It is not listed on the back panel with all the services that ADRC connects you to.”
- “Says, ‘has help for long term help payment.’ Who is the resource connection? Will not give out more than name and telephone number without knowing who the person is.”
- “The brochure is full of information of how he can be helped with the resources available. This program is telling me it is very helpful in all aspects of what I need.”
- “Is there information missing from the brochure?”
- “Concerned about saying that the information is free. Would like to know more about who funds the program and how is it free.”
- “What does it mean ‘get connected’? Does it mean that I should be involved in whatever I am participating in?”
- “I don’t like that it says it is a free program from our government. Is it for anyone? Is if for low income, certain races, gender? With all the funding that the government is having a hard time balancing the budget, having a hard time balancing how can worry
about cut backing social security vs. while also providing additional services such as the ADRC program.”

- “ADRC means nothing unless you spell the word out. I don’t like the abbreviations. As you get older it’s a bit hard to remember all these things.”

Reliability
- “4: Seems really comprehensive for what they say they do.”
- “4.5: Right now would not have a clue where to start, but this brochure gives a lot of information about what they do and contact information for getting started. It gives a good direction to start. If the number given by the ADRC doesn’t help give you the information that you need, or that the ADRC says it can give, then it would hurt the reliability.”
- “I give a 4 for the same reasons.”

Look

Cover
- “Hard to see background text. Seems like important information but it’s not easy to see it.”

Colors
- “3 – The green and the blue are both too dark. One of them could be lighter. The green on the ‘get connected’ in the posters might be better.”
- “4 – I wouldn’t change anything.”
- “4 – But not sure there is anything I would change about the colors.”

Photos
- “2 – Not well laid out. The disabled one did not help.”
- “3 – Could be more races represented. Could be larger as well. The pictures overall are good, but small.”
- “The photos are too squished and small at the bottom. Is the background helpful?”
- “The disabled girl – don’t like. Would not use as dark of a green at the top.”
- “Others agree that the picture might be a bit small.”
- “I did not like the photos because it was not clear if they were applicable to the content or not.”
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #3

- “I’m not sure if I’ve seen anything similar to what has been proposed in the brochure.”
- “Photos being taken outside of activities would not help.”
- “Don’t know if should have more photos, or if should have photos that are a bit more explicit to the written content of the brochure. Maybe the brochure should be another leaf.”

Readability
- “Font side on inside is good, but font on the very top of the front cover is hard to read. DHS should be written out. Is simple which is good. The headings are bold and good.”
- “Font inside is a good size. On the inside perhaps there should be one more disabled person. Overall seems more like services that an old person would need vs. a disabled person.”
- “Not really sure why would need it because tailored to someone with a disability or an older person, but not exactly for people that are helping another person.”

Organization of Material
- “4.5 – It’s unclear about the vital connections – if someone you know is being abused... not sure that a brochure is the best place for that. Seems like it is out of place with all the other services.”
- “4 – Agree that the vital connections part doesn’t belong with the rest of the services and that maybe there should be a contact number for reaching someone right away.”

Clarity of Content
- “Content is clear. Not sure what could be done to make content more clear. Maybe it should be another leaf because there is a lot of information.”

Posters
- “Good pictures. Everyone seems happy.”
- “Like the posters but don’t like the green stripe across the top with the ODHS.”
- “Good diversity. Older people in one poster and the family in the other poster.”
- “I would place a dog with the family or the wheelchair.”
- “It would catch my eye if is I was walking by.”
- “The photos would probably catch my eye first.” (Other participants nodding)
PARTICIPANT RESPONSE QUOTES: LA GRANDE FOCUS GROUP #3

- “4.5 – The top strip is too small.”
- “It should show someone else aside from the wheelchair person. Maybe would show a family member or an aid, or a dog with the person. Maybe a picture of him doing something. Perhaps on a computer or in some other way being active. His arms look like they are used, but isn’t doing anything.”
- “Green strip at top needs to be fixed. It is distracting. Maybe don’t need DHS there twice.”
- “Can’t read the background text at all. Is really hard to read.”
- “You would really only read the other green background text if sitting in a doctor’s office.”
- “There is a period on the ‘get connected’ in the brochure, but not in the poster.”
- “‘Get connected’ idea does connected with all people in the group. It is quick and gets the message across.”
- “There are no phone numbers on the posters. A 1-800 number should be there to get to more audiences.”
- “I like that ADRC is printed bigger than DHS.”

Healthy Living Website

Staying connected

- “Bingo.”
- “Entertainment, what is going on in the area and where? Anything in community that is going that is entertaining.”
- “Would want to see special activities for aging people and people with disabilities.”

Physical activity

- “Would want to see free stuff that you can do in the community. Or free or low income services or activities in the community.”
- “Walks or other activities outdoors. Trails, paths, etc.”
- “A list of gyms, parks.”
- “Physical activity, pools, exercise opportunities.”
Healthy eating

- “Samples of recipes.”
- “Having it in several languages would be helpful.”
- “Something to help people know what is actually healthy vs. all the claims that some food companies have. Something that has endorsement from professionals.”
- “Alternative snacks or foods that could be eaten instead of unhealthy things. Would also want to know quantities of different foods should be eaten.”

Managing our health

- “Getting checkups on blood pressure and other key things so that they do not have health problems because they can keep up with their health.”
- “Ideas for reducing or working with stress.”

What other categories?

- “Managing health should be first in the list.”
- “Mental health should be its own category. Need to have physically healthy, mentally healthy, emotionally healthy.”
- “Family, hobbies, spending time with friends. Less specific than some of the other categories.”

Would you go to the ADRC website for the information categories?

- “I would go to it if a friend or family person could use help.”
- “I would go to if was aware of it. Would it come up on a Google search? That is how I find a lot of solutions and the Google search will often help me find what I need. I don’t think I would think about DHS for this kind of service. I think of it more for kids or people with trouble family situations. Not really known for working with elderly or disabled. This of it as children’s services, food stamps but not something if I needed to something for my parents or if my child became disabled. Suppose that DHS could be referred to me as a resource.”
- “People don’t often know about what the DHS does.”
PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP

BROCHURES

Overall

If you had to explain to a friend what the ADRC is, what would you say?

Verbal Responses

- “A place to get needed information regarding aging resources and disability resources.”
- “Letting the seniors and disability people know that there are services and resources out there and how to get a hold of them.”
- “An organization dedicated to helping elderly and handicapped people.”
- “A big help for people with questions and no answers.”
- “A program to help disabled and elderly with the ability to find information.”

Written Responses

- “A place to get needed info regarding aging resources.”
- “A resource connection to adult community resourced for the aging and disabled.”
- “A big help for people with questions and no answers regarding aging and disabilities.”
- “An organization dedicated to helping elderly and handicapped.”
- “An explanation of how to take care of yourself as you get older. How to carry yourself when walking, stairs, body language.”
- “Offers programs and resources for the aged and people with disabilities.”

Who is this brochure geared toward?

Verbal Responses

- “I was pleased to see that it wasn’t income regulated; more or less anyone can take advantage of it. Some of the resources have regulations about incomes, but this was not it.”

Written Responses

- “Aging and disabled.”
PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP

- “Anyone in need, not income regulated.”
- “People like me who can pass on the info in a helpful manner.”
- “Elderly and handicapped.”
- “Seniors!”
- “Services that are available to seniors and people with disabilities. Resources that make life easier for these people.”

Content

- “What about things like 211? Isn’t that the same thing?”
- “It’s pretty self-explanatory.”
- “This is completely different from people that come around and help you when you’re disabled? I had a new knee and a new hip last year and I had medical people I guess, home help come to assist me. Does this include home help?”
- “I would also like to know this. Are you a connected AOA from the hospital? Seems you could work together well.”
- “Seems to be it would be.”
- “Why would it be?”
- “It’s a resource to go to, depending on what the patient has had done. I think that is separate from this.”
- “Is it local? When you’re dealing with a resource here, not in the value, it’s to know if it’s available here so you could contact them right then.”
- “One thing too, homecare is different from Home Health because homecare people do your housework and either your insurance or something has to make the balance of what they pay you and that’s different than home health.”
- “Services provided from Home Health would be different from ADRC.”
- “I would like to be positive that people whom they employ have had a background check. To me as a nurse, that’s extremely important. We hear about a lot of caregivers who are rotten and background checks help to stop that.”
PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP

Reliability

- “It has credibility because it mentions the Oregon DHS.”

Look

Cover

- “Looks good to me.”
- “I don’t like it. It’s too busy. The background is distracting. I’m looking at this from the viewpoint of how I work with people at the senior center. Triangle within the logo should be taken out and the words in the background should be taken out.”
- “If I saw it across the room I would have no idea what that is. If it said ADRC in bigger letters and no background garbage. Seniors don’t see well. I can’t read what it says under ADRC - the font is too small. It should say Aging and Disabilities Resource Connection.”
- “I would say ‘get connected’ first, rather than ‘ADRC’, which isn’t going to grab my attention. I would want to know what I was supposed to get connected with so I would pick it up. Put ‘get connected’ above the ADRC.”
- “I don’t have any problem with it. I think it’s pretty, its seniors.”
- “Aging and Disability should be written bigger, not ADRC.”
- “It doesn’t give you any reason to pick it up. There’s no hook.”

Colors

- “The colors are ok.”
- “It’s great.”
- “I gave it a five.”
- “Just don’t use day glow green or pink. Never ever use day glow colors.”
- “I said they were ok. I can’t see anything wrong with it.”
- “The printing quality is excellent.”

Photos

- “I like everything but the middle one on the bottom. She looks like she’s ready to jump on you. She looks suspicious.”
- “But it’s clear and the rest are fuzzy? Or is my eyesight bad?”
**PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP**

- “She looks typical to me.”
- “She does not look pleased.”
- “She looks like me. That’s how I look in pictures. Some people just don’t smile very big in pictures.”
- “I like all the pictures because they’re all smiling, maybe because they’ve had relationship with your group and they’re pleased with your experiences with you.”
- “They better not have sad looks when you’re reading this.”
- “That’s what I was going to say. They should all imply that the material in this is great.”

**Readability**
- “Good, big font.”

**Organization of Material**
- “I think it’s pretty concise.”

**Clarity of Content**
- “I like having it listed concisely on the back, after the information.”

**Posters**
- “These have what I feel the brochures should also have - ‘get connected’ because that’s an attention grabber.” (one agreed)
- “You’ll wonder what you’re supposed to get connected about and read about the ADRC.”
- “The picture with the person in the wheelchair very obviously says disabilities. The other 2 don’t convey as easily. The far one is seniors but it’s hard to determine that this is the focus of what you’re trying to convey. Caregivers not so clear.”
- “I don’t believe that the scooter picture explains the ADRC. You think ‘seniors can get together and do something’.”
- “I don’t think it does either; they’re just out for a joyride.”
- “If you read the words there’s no misunderstanding but the picture doesn’t draw you in. I like the words.”
- “Because of the position of the people on the moped, I would move them to the other side to make them go towards ‘get connected’, instead of drawing your eye off the page.”
PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP

The one with the person in the wheelchair works the opposite; he’s facing into the picture. “

Healthy Living Website

Physical Activity

• “Aerobics."
• “Available exercise classes.”
• “Cross country skiing for senior adults.”
• “Day hike type of stuff locally.”
• “Local places you could go on your own or groups?”
• “I would prefer hiking with someone. Groups that have already been coordinated.”
• “Just walking or golf. Could be group activities and regular 4somes. Whatever gets you going.”
• “Treadmill. Some are better than others, some go faster. You’re not getting your heart rate up golfing. Tell people about the benefits about getting your heart rate up.”
• “Power walking.”
• “I would like to see exercises for people with fibromyalgia and other disabilities.”
• “Is this website going to facilitate or simply information givers? Will they set up the classes or will they work with the people who set up the classes (College, Parks) to make sure they’re there, which is what we do now? How much of a part are they going to play in setting up the things that don’t exist that could?”

Healthy Eating

• “Tell me where to find someone to come cook meals for me.”
• “Information about easy meals you can get, including frozen dinners.”
• “Which easy ones you can cook, not just buy and the things people can put into them that are beneficial. Recipes and healthy meal ideas.”
• “It wouldn’t hurt to put the benefits of certain greens and things like that because you need that balance. Nutritional information about balancing your diet.”
PARTICIPANT RESPONSE QUOTES: REDMOND FOCUS GROUP

- “I can see it being a site specific kind of thing, like the Central Oregon site would have information about Central Oregon. Local gardening information because we have different growing conditions than the valley. It should be separate by region.”

- “A lot of people are going into gardening that have not done it before because of the money situation, so information for the first time gardener. But still specific to Central Oregon because our soil is so different.”

- “I’m from Northern California where seeds pop right up but around here we have a lot of problems. The website could be an important thing because there’s so many different ways of growing things in Oregon. Stuff to do with indoor gardening.”

- “I think healthy eating should be tied to 3 meals a day. If you skip one, you’ll put yourself in the doldrums. Eat breakfast.” (Lots of nods)

Managing our Health

- “Finding support groups for whatever you’re dealing with - grief or disabilities.”

- “I see that ‘Managing your Health’ is the heading and the other three topics go under this one.” (Everyone else agrees)

Staying Connected

- “Card games and different things that we do at the granges and different places. Listing social activities.”

- “My mother died 5 years ago a few months from 110. She had all her marbles the day she died and she was up and around with a walker. Her secret was she kept her brain active every single day of her life. She worked in the county courthouse, was a reader her whole life. The day she died she had her marbles because she kept her mind active.”

- “Where does an active mind fit in these categories? Physical Activity or Staying Connected.”

- “Maybe a whole different category of its own.”

- “Social activities like games will help a person to stretch their mind, being able to share something that’s important with others, is helpful.” (All agree)

- “Volunteer opportunities could be a good link to have on the website. Once a month the newspaper runs a page but it’s so out of date and limited that it’s not very useful. An up to date website with volunteer opportunities with testaments from volunteers on there would be valuable.”
DHS: Seniors and People with Disabilities Division

ADRC
Aging and Disability Resource Connection of Oregon

Get connected.

www.ADRCofOregon.org

Your ADRC connects you to the help you need

The Aging and Disability Resource Connection, or ADRC, is a free service that offers the public a single source for information and assistance on issues affecting older people and people with disabilities regardless of their income. It is easy to access the ADRC. Simply call, walk in or visit our website.

Information and assistance

Information and assistance specialists provide you with knowledge about public and private services and programs so you can choose options that fit your personal situation.

Health and wellness

Today there are many ways to stay healthy and avoid injury as we age or live with a disability. The ADRC can make connections to local programs that will support your best possible health and safety.

"We take information and referral to the next level by actually connecting people to the resources they need. This work is very gratifying and people are very appreciative of the help we give them."—ADRC resource specialist

We connect you to services

- In-home service and support: bathing, dressing, housekeeping
- Choosing a care facility: adult foster care, residential care, assisted living and nursing homes
- Family and caregiver support
- Peer counseling
- Transportation
- Home-delivered meals
- Personal medication alerts
- Medicare counseling
- Medical equipment
- Programs and resources for healthy living
- Legal services
- Transportation

... and other services you may need.

The ADRC’s services don’t stop here. We follow up to make sure you are getting the help you need.

"[ADRC] was very, very helpful. My parents have warmed up to the idea of services in their home, obtained Lifeline™ and contacted the VA ... They are considering numerous options that were introduced to them."

—ADRC consumer
Your ADRC connects you to the help you need
The Aging and Disability Resource Connection, or ADRC, is a free service for information and assistance on issues affecting older people and people with disabilities regardless of their income. Simply call, walk in, or visit our website. It's easy to access the ADRC. Simply call, walk in, or visit our website.

Benefits counseling
Benefits specialists can provide accurate and current information about private and government benefits and programs that may be available to increase benefits. Benefits specialists can cut the “red tape” when you may be entitled to receive benefits. Benefits specialists can help you with Social Security and other benefits.

Help paying for long-term care
Aging and Disability Resource Connection, or ADRC, are the only way to publicly funded and advertised local ADRC programs. The Resource Connection helps assess your level of need for services and ensures that you are eligible. ADRC staff can provide information about all the options available and help you select the solution best for you.

Connecting with your local ADRC is easy
You can walk in to your local ADRC, call us or visit our website at www.ADRCDominion.org.

The ADRC located a contractor who showed me how to make financial arrangements. So now I have a ramp with an automatic lift, and she can go independently. She can go inside, she can go outside, she can go to the ocean, she can go to the beach. She’s very grateful for the help we give her.

— ADRC Consumer

Vital connections
If you or someone you know is at risk of abuse or neglect or is in crisis, the Resource Connection can connect you with someone who will respond to your urgent situation.

Information and assistance
Information and assistance specialists provide you with knowledge and information on the programs with which they have personal connections so you can choose options that are best for you.

Health and wellness
Today there are many ways to stay healthy and avoid injury as we age. Health and wellness specialists can make connections to local programs that will support you to the best possible health and safety.

MARKETING MATERIAL IMAGES: BROCHURE INSIDE
Contact your local ADRC
To locate the nearest center in your area, visit www.ADRCofofOregon.org.

Serving Linn and Benton counties:
1400 Queen Ave. SE, Suite 206
Albany, OR 97322
Local: 541-967-8630
Toll-free: 1-800-638-0510
TTY: 541-924-8402
FAX: 541-812-2581
E-mail: ADRCmail@ocwcog.org

Serving Lincoln county:
203 N Main Street
Toledo, OR 97391
Local: 541-336-2289
Toll-free: 1-800-282-6194
TTY: 541-336-8103
FAX: 541-336-1447
E-mail: ADRCmail@ocwcog.org

DHS
Oregon Department of Human Services

This document can be provided upon request in alternative formats for individuals with disabilities. Other formats may include (but are not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats. E-mail spd.web@state.or.us, or call 1-800-282-8096 (voice or TTY) to arrange for the alternative format that will work best for you.

DHS 9381BE (11/2010)
Get connected

...to local information for seniors and people with disabilities, their families and caregivers.

Our professional staff can help you in many ways. For example, we can connect you with long-term living options, family and caregiver support, resources to stay healthy, in-home services, and much more!

www.ADRCofOregon.org
Get connected

...to local information for seniors and people with disabilities, their families and caregivers.

Aging and Disability Resource Connection of Oregon

www.ADRCoforegon.org

Our professional staff can help you in many ways. For example, we can connect you with long-term living options, family and caregiver support, resources to stay healthy, in-home services, and much more!
Marketing Material Images: Family Poster
GENERAL FOCUS GROUP SCRIPT

INTRODUCTION – 5 MIN

• Introduce facilitators
  - Amanda West, Project Coordinator for the Community Planning Workshop program out of the University of Oregon department of Planning, Public Policy, and Management.
  - Francesca Patricolo, University of Oregon masters student in Community & Regional Planning and intern for Community Planning Workshop.
  - Francesca will be the facilitator today and Amanda is here to take notes. Also in the back we have two guests joining us. (Guests introduce themselves). They are here to listen to your opinions first hand but are not here to participate.
  - Community Planning Workshop (CPW) is an experiential program within the Department of Planning, Public Policy and Management at the University of Oregon that allows graduate students the opportunity to enhance their skills by applying them to planning projects in the community. CPW works for entities all over the state on a variety of different projects.

• Description of the project and its purpose
  - Today we are here to talk about one of those projects: the Aging and Disability Resource Connection.
  - The Oregon Department of Human Services Seniors & People with Disabilities Division has been working to implement a new statewide resource called an Aging & Disability Resource Connection (ADRC).
  - I don’t want to tell you anymore about the ADRC because we asked you here today to evaluate the promotional materials that DHS has put together. We interested in learning if these materials are understandable, attractive and would motivate you to use this service.

• Confidentiality
  - We won’t share any individual responses or who says what. We’re interested in the overall discussion, and having your honest opinions. Whether your opinions are positive or negative, they will help us improve what we can offer communities around the state.

• Ground rules for the focus group
**GENERAL FOCUS GROUP SCRIPT**

- Listen actively -- respect others when they are talking.

- Speak from your own experience instead of generalizing ("I" instead of "they," "we," and "you").

- Do not be afraid to respectfully challenge one another by asking questions, but refrain from personal attacks -- focus on ideas.

- Participate to the fullest of your ability -- community growth depends on the inclusion of every individual voice.

- Be conscious of body language and nonverbal responses -- they can be as disrespectful as words.

- Engage in an open, honest discussion about how information about the ADRC should be communicated to Oregon communities.

**ICEBREAKER – 10 MIN**

- Introduce your name and tell us about an activity or hobby that you enjoy doing.
  
  - Why?
  - Where do you do this activity?

- Great, thank you. Now let’s dive into some of the materials for the ADRC.

**MARKETING MATERIALS (BROCHURE AND POSTERS) – 40 MIN**

**Brochures**

**Overall (10 min)**

- Participants are asked to read the ADRC brochure and given 5 minutes to do so. After everyone is finished reading, the brochures will be collected and participants will be given a slip of paper with two questions on it:
  
  - If you had to explain to a friend what an ADRC is, what would you say?
  - Who do you think this brochure is geared toward?

- Participants will have 2 minutes to write their answers on the paper.

- The facilitator will ask about their answers to these questions. (Not all participants have to answer both questions. After we have discussed, the facilitator will collect all the papers)
  
  - If you had to explain to a friend what an ADRC is, what would you say?
  - Who do you think this brochure is geared toward?
GENERAL FOCUS GROUP SCRIPT

- Why?

Content (10 min)

- Now we would like to talk about the specific content of the brochure. (The facilitator will hand the brochures back to participants)

- What questions did you have after reading this brochure?
  - What other information would you want to know before accessing the ADRC?

- Based on a 1-5 rating system (1 being unreliable and 5 being reliable, how reliable does the ADRC appear based on the content of the brochure?

Look (10 min)

- Now we would like to talk about the look of the brochure.

- Participants are given a half sheet of paper with a survey on it. The survey has a 1-5 scale on it with 1 being “Dislike it a lot” and 5 being “Like it a lot” Participants are asked to rate the following characteristics:

<table>
<thead>
<tr>
<th></th>
<th>1 Dislike it a lot</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 Like it a lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Photographs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Readability (font size, font color, placement of text)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization of Material</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clarity of Content (easy to understand)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- After everyone is finished the facilitator will ask debrief questions:
  - What did you rate the cover of the brochure? Why?
  - What changes would help you to rate it higher?
GENERAL FOCUS GROUP SCRIPT

- Debrief all the areas with the same questions.

- The debrief questions will depend on the responses. For example, if everyone rates the cover a 4, the facilitator will spend less time talking about it than if it was rated a 1 by everyone.

- The facilitator will collect all the forms before moving on to the next section.

Posters (this section can go short depending on time) – (10 min)

- All three posters will be hung up or presented on a board to the participants.

- What is your overall impression of these posters?
  - What do you like about the posters (only ask if people are having trouble giving their impressions)?
  - What do you dislike about the posters (only ask if people are having trouble giving their impressions)?

- Now that you know more about the ADRC, what is the one change you would make to the poster to make it a “6” (off the scale) for you?

Healthy Living Website – 30 min

- So far you have reviewed brochures and posters for the ADRC. Another part of the ADRC will be a website with the same goal of trying to give people resources to stay safe, healthy, and independent.
  - One part of the website will be a Healthy Living Website which will provide some basic information on topics related to healthy living (like healthy eating) but will primarily be a way to link people to community resources and programs.

- The four resource areas that might be covered on the site are physical activity, healthy eating, managing our health, and staying connected. (These four resource areas will be written on a flip chart for the participants to see.) Each of the four topic areas will be explored one by one using each of the following questions:
  - What kinds of resources and programs would you want to find under this category?
  - Where do you find out about programs and resources that support Healthy Living and these 4 areas now?
  - Would you use the ADRC website for this kind of information? Why not?
GENERAL FOCUS GROUP SCRIPT

- Are there other components of Healthy Living that are important to you and your family, and that you’d want to find resources for on this site?

WRAP-UP – 5 MIN

- Those are all the questions we have today. Is there anything else you would like to say about the ADRC or the materials you’ve seen today?

- Thank you for your participation. Again, this information will be used to revise the marketing materials for this important community resource and create a useful Healthy Living Website.

- Here is your gift bag. Ask everyone to write their name on a sheet of paper, put them into a bowl and draw for the gift card.