

Integrating Community Services Within a NORC: The Park La Brea Experience

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Abstract

Naturally Occurring Retirement Communities (NORCs) are neighborhoods or buildings in which older people represent a significant proportion of the population, but for whom the communities were not planned to meet their needs. Bringing activities and services to these communities provides a mechanism for increasing access to needed resources and supports, enabling older adults to continue to reside within their community, or age in place. In 2003, Jewish Family Service of Los Angeles (JFS-LA) received funding to develop social services within Park La Brea, a 162-acre, private apartment complex consisting of 4,200 apartment units located in eighteen 13-story towers with approximately 1,500 senior residents. The program, termed LIFE (Living Independently in a Friendly Environment), was designed to involve organizations that could offer support, provide feedback, link the program to the wider community, and create innovative approaches. The development of the program included formative evaluation, program implementation, and outcome measurement. This article describes the process of engaging the private owners of the apartment community; methods employed to involve community residents on many levels, including conducting needs assessments, developing volunteer roles, and creating a leadership training program and an advisory council; and programs and services that were developed in response to these processes. The article also discusses implications for sustainability.

Background

This case study examines the efforts of a social service agency to develop services and programs in Park La Brea, a Naturally Occurring Retirement Community (NORC) in Los Angeles. Although this residential community had a large population of older adults, it was not planned to meet their needs and had no formal connections to services. A primary objective of the program was to identify and develop needed services to help maintain seniors in the community, create an opportunity for older people to act as resources, enable different generations to interact, and take advantage of the economies of scale to efficiently provide new services and activities. In many ways, the approach built on the NORC Supportive Services Program (NORC-SSP) model, pioneered by Fredda Vladeck and her colleagues in New York (Vladeck, 2004).

The process included achieving buy-in from the property management company, conducting a needs assessment of residents, and developing a range of services and activities, including opportunities for volunteering.

Park La Brea NORC Program: LIFE

In 2003, the Administration on Aging (AoA) awarded Jewish Family Service of Los Angeles (JFS-LA) a grant to develop services for NORCs. One site for the JFS NORC program, entitled LIFE (Living Independently in a Friendly Environment), was Park La Brea. Park La Brea is a 162-acre private development, managed by a for-profit company, consisting of 4,200 apartment units located in eighteen 13-story towers, with garden apartments ranging from one to three bedrooms. The towers resemble blocks of housing located around green spaces, inspired by the work of Le Corbusier, the internationally renowned French architect and planner.

Sometimes referred to as a “minicity,” Park La Brea has its own security patrol and recreation center. The apartments were initially planned and developed in the 1940s and 1950s as a residential community for moderate-income people by Metropolitan Life Insurance Company, which also built a “sister” complex with a similar street layout, Parkmerced in San Francisco, and other large communities, such as Stuyvesant Town and Peter Cooper Village in New York. In many ways it appears as an eastern model that has been transplanted to Southern California.

Park La Brea was partially gated in 1980. By 1995, to market the community as a more upscale setting, the owners had updated it by adding a community center, health club, pool, and café. Park La Brea also began to attract an increasing number of Korean Americans, partly drawn by its close proximity to shopping and a highly regarded nearby grammar school.

JFS staff considered Park La Brea a community where older people who were aging in place needed services, but from which very few residents sought assistance from its nearby Freda Mohr Senior Center. The exception was for Meals on Wheels. Staff thought that older Park La Brea residents either were unaware of the Freda Mohr Senior Center or perceived that it “was for poor people, but not for them.” Nevertheless, JFS considered the older residents of Park La Brea an untapped market whose lives would be improved considerably by the addition of services and activities.

In 2000, Park La Brea had a sizeable older population that totaled about 1,500 people over the age of 60, or 14 percent of its 11,000-resident population, many of whom were aging in place. The median income of residents aged 65 to 74 was \$34,926; for those aged 75 and older, it was \$30,167, with about 2.6 percent of people over the age of 65 living below the poverty level (U.S. Census Bureau, 2000).

NORC Structure

Three initial partners on the project included the Jewish Federation of Greater Los Angeles, a local medical center (Cedars-Sinai), and the Area Agencies on Aging (AAAs) of the city and county of Los Angeles. JFS, the grant recipient, was responsible for overall planning and implementation of the project. The medical center helped plan the initial needs assessment and provided health screenings, and the AAAs were available to receive referrals for services.

LIFE formed a steering committee, a service-provider coalition, and an advisory council at Park La Brea to guide and support the program. The steering committee, which consisted of more than 20 organizations, agencies, and political representatives, had the purpose of engaging community leaders and organizations in actively participating in the NORC program. The service-provider coalition was composed of local agencies and government departments that might provide services to residents and refer clients to LIFE. The advisory council consisted of local community residents charged with tasks such as helping to identify needs and recruiting members and volunteers.

Initially, LIFE owed its slow start to the relative newness of the program, the difficulty in recruiting residents to participate in the needs assessment, the absence of an advisory council, and the need to develop a trusting, positive relationship with property management and the existing tenant organization. In addition, few existing onsite services or programs were offered specifically for older people. The leaders (themselves older men) of the Park La Brea tenant organization, which predated the NORC, had been individually trying to assist tenants, but they were stretched beyond their capacity. Consequently, many residents in need were not receiving outside supportive services or assistance from community-based organizations and agencies. LIFE therefore introduced a unique set of programs and events into the community.

NORC Program Components

Management Buy-In

The relationship with the property's management is considered key to the success of a NORC. The greater the support and continued participation by management, the more successful the NORC will be at responding to residents' needs and concerns (MacLaren, Landsberg, and Schwartz, 2007). Because Park La Brea was relatively new territory for JFS and had a private owner with whom JFS had had no previous relationship, the extent of management support and participation was unknown. JFS assumed that older residents were not a priority for the management, because marketing of the complex targeted younger people, and many older residents lived in rent-stabilized units, keeping rents lower than they otherwise would have been. On the other hand, older people were considered relatively stable tenants who paid their rent on time, stayed for long periods of

time, and caused few disturbances. The small number of older people who had difficulties were those who needed help with social services or were isolated, both problems that the Park La Brea management and its security patrol felt unqualified to address.

Park La Brea management staff felt overburdened by the problems brought to them by older residents and dismayed about the prospect of having to evict older tenants who could no longer care for themselves or their apartments. Management bought into the concept of being part of a national demonstration project and the positive public relations this would provide as a senior-friendly community. As it turned out, Park La Brea staff were relieved to have the burden taken off them and pleased to have help in trying to meet older residents' needs. The management agreed to provide office space, offered priority use of their facilities for programming and activities, and brought in their activity director to partner on activity planning, which made branding of the program easier and facilitated access to program services.

Cooperation from the Park La Brea management staff was a key factor in the success of the project. In addition to providing space, management staff helped to publicize and distribute the needs assessment survey, introduced LIFE staff to key residents, and referred seniors to LIFE programs and services. This support was critical to ensure the ability to provide an onsite presence by LIFE, including designated office space, areas to run activities, and help from maintenance staff to set up spaces for meetings and large events.

Needs Assessment

The first phase of LIFE consisted of a comprehensive needs assessment process. The needs assessment process is critical to identifying the exact needs of communities, NORCs, and their residents. An assessment can determine or verify gaps or duplications in service coordination, locate missing linkages, determine the availability and accessibility of services, gauge resident awareness (or lack thereof) of services, identify the ways in which residents prefer to access service information, and can identify the most important needs of residents (Nolin et al., 2006). Programs can then be structured to respond to the identified needs.

The needs assessment conducted for LIFE included focus groups with older residents, a targeted survey of Park La Brea senior residents, and an assessment of the residents' perceived needs among service providers. The needs assessment, which was intended to drive the program, also served as an initial entrée into the community and a mechanism to involve seniors.

Before the formal needs assessment, JFS sent a survey asking older residents what types of activities they currently engaged in and if they already volunteered themselves or would like to. Respondents were recruited to participate in the formal needs assessment. Focus group data provided qualitative feedback from participants, and the needs assessment survey provided quantitative indication of needs and interests of these older community members. Data from the older residents were triangulated with survey results from the service providers to determine whether the needs existed because of gaps in service provision versus other possible barriers in accessing services (for example, knowledge, service eligibility, transportation).

Focus Groups

From June through July 2004, six focus group sessions were held with older adults residing in Park La Brea, involving 41 individuals. LIFE social workers conducted the focus groups, which were approximately 45 minutes long. The social workers, who conducted the focus groups in English, asked the following questions:

- What are the needs of older adults in your community?
- What would make it easier for you to participate in activities or access services?
- Identify one service you would create if you could select anything.
- Identify several features of your community that indicate that it is a good place to grow old.

All focus groups identified safety as a primary concern, including issues such as physical access (for example, wheelchair ramps, stairwell lighting), emergency preparedness (for example, earthquake, fire), personal emergencies, and emergency response systems. In addition, across the groups, participants identified needs such as transportation; emergency support and other services for frail, isolated older residents living alone; a resource directory; and social activities. They often cited both public and private transportation as needs, along with the availability of parking. They listed a reliable means for daily transportation and a need for emergency transportation from the hospital and other emergency care facilities. They identified daily telephone check-in programs for isolated older residents to ensure these residents' safety. Almost every group mentioned the need for centralized, comprehensive information or resource handbooks listing activities, events, and other services available to older adults. Participants used the focus groups as an information exchange opportunity. The final question from the assessment asked what community features residents thought contributed to making Park La Brea a good place to grow old. In response, residents consistently identified the safety and security of the complex, its convenient location, the beauty of grounds, and easy access to security and maintenance personnel for assistance.

Needs Assessment Survey

The needs assessment survey was anonymous and lengthy, about five pages long. Locating seniors to complete the needs assessment survey was challenging, despite the varied methods used to distribute the form (for example, via mail, senior-service providers, and focus groups). This challenge may have resulted from the lack of existing social networks of older adults within the Park La Brea community; hence, no existing groups or social structures existed for recruiting the older residents. In addition, the lengthiness of the survey may have been viewed as overly taxing for frail older adults. In fact, most (78 percent) of the needs assessment respondents were recruited from the focus groups. As a result, the respondents may not necessarily be a representative sample of the community at large and may represent an easier to access, healthier, more active segment of the population and not the frail or homebound senior residents of Park La Brea. This hypothesis was later confirmed as LIFE staff gradually became aware of the fairly large population of frail homebound seniors living in Park La Brea, a reality that became apparent only after the LIFE Program had an established and trusting relationship with both the community and the residents

association. No previous data described the activity limitations or disabilities of Park La Brea's older residents, so determining the representativeness of the respondents on these variables was not possible. (A HUD regulation in the Fair Housing Amendments Act of 1988 prevents property owners from collecting demographic characteristics of resident.¹)

Of the 63 residents of Park La Brea who completed the survey, most were female (83 percent). About one-half were widowed, and the mean age of respondents was 81 years, ranging in age from 63 to 96 years. Of those sampled, 75 percent lived alone. Among the remaining 25 percent of respondents living with another person, most (93 percent) lived with their spouse; 20 percent indicated they were taking care of someone.

Developed to elicit detailed information about the health, wellness, and needs of seniors living in the community, the needs assessment survey covered a variety of topics—current activities, activities interests, barriers to participation in activities, volunteer interests, supportive services currently used, need for supportive services, physical and emotional health status, use of medical services, fall prevention, transportation issues, exercise, and community perception.

Current Activities and Barriers to Participation

The survey included several questions regarding respondents' current activities and their interest in participating in those activities. Respondents reported current engagement in a number of activities, with more than one-half indicating that they watched TV and movies (64 percent) and read (56 percent). About one-third of the respondents reported that they currently used a computer;

Park La Brea needs assessment respondents reported interest in participating in the following top three activities:

- Concerts/theatre (57%)
 - Field trips (46%)
 - Lectures (43%)
-

went to concerts, theater performances, and museums; attended exercise classes; listened to the radio; talked with family; or traveled. Residents had significant levels of interest in participating in many of the activities, with the three top areas of interest being attending concerts and theater performances, going on field trips, or attending a lecture. In addition, almost one-third of the respondents ex-

pressed interest in travel, learning about and using the computer, involvement in political activity, and exercise. The primary barriers identified among the respondents in accessing activities were economic constraints, lack of transportation, and lack of awareness of activities.

Volunteering Interest

Although a considerable proportion of the respondents reported volunteering, the responses indicated a potential for much more involvement. An early version of the needs assessment survey did not include questions on volunteer interests; therefore, only 33 (52 percent) individuals were

¹ 24 CFR 100.202 (c); also see the Fair Housing Act, as amended, at 42 U.S.C. 3601 – 3619, which states “It shall be unlawful to make an inquiry to determine whether an applicant for a dwelling, a person intending to reside in that dwelling after it is so sold, rented or made available, or any person associated with that person, has a handicap or to make inquiry as to the nature or severity of a handicap of such a person.”

surveyed regarding what type of volunteer work they were currently involved in or interested in doing. About one-fourth of respondents reported that they currently assist other seniors with information, referrals, and services. Nearly all (88 percent) expressed interest in volunteering in at least one of the options listed. It appears that a core of respondents were interested in administrative support activities, such as helping with mailings (39.4 percent) and planning activities (39.4 percent). More than one-half (55 percent) were interested in more direct service involvement, such as providing information and referrals, checking on seniors, and counseling.

Supportive Service Needs

Among the respondents, only one-third reported needing some sort of supportive assistance. Housework was the most frequently reported need for assistance in terms of daily living, followed by going to appointments, laundry, and errands. This low level of in-home supportive needs may represent a response bias to the survey, because healthier, more active seniors in the community were more likely to participate in the needs assessment survey.

Service Provider Survey

In an effort to identify the needs of older adults and the potential barriers to service use as perceived by service providers, the JFS LIFE program engaged a master's level social work intern to help conduct interviews and focus groups with local service providers. JFS LIFE asked Park La Brea and the city of West Hollywood area organizations and private businesses to participate in a phone interview, an in-person interview, or a small focus group at their site. The intern conducted 15 interviews and 7 focus groups over a 2-month period. A total of 76 individuals participated, with 55 participating in focus groups and 17 participating in in-person or over-the-phone interviews. Participants represented myriad agencies, ranging from fire department and cab service to medical facilities and community case management agencies.

Results of this assessment revealed several gaps and barriers in service provision, including transportation; lack of coordinated and structured care; staff turnover and agency transition; social isolation and lack of social activities; diversity of populations served; and lack of awareness, education, and sensitivity about senior issues and available services.

Summary

Overall, triangulation of the three needs assessments revealed significant consistencies in identified needs. Transportation, population diversity issues, social activities, and lack of awareness of available services were identified among all three assessment techniques. Interestingly, social isolation was not identified through the senior populations surveyed; however, this response was clearly a reflection of the response bias for both survey and focus groups, and, as the program began to unfold and the frail populations began to be identified, the LIFE staff had concrete evidence of this hidden population.

Service Development

Providing and coordinating social services are key elements of NORCs; the social services include transportation, social activities, service coordination, personal care services, and physical and mental health services (Black, 2005). Most services, activities, and support that the LIFE program provided were in direct response to the identified needs of the community. Although the LIFE program did not directly address all the broader concerns identified in the needs assessment (for example, the issue of affordable housing), the programs and services that LIFE provided were generally consistent with what older people said they wanted.

Since the goal of the LIFE program was to maintain older adults in their community, addressing the concerns and interests expressed in the needs assessment process was critical. As a result of this process, the Park La Brea LIFE program developed a basket of services that improved access to information and referrals, including activities in the areas of health and wellness, social events, concerts, and day trips. Promotion of health and wellness was accomplished through educational lectures and workshops, health fairs conducted in partnership with a local medical center and other health collaborators, and a peer-to-peer senior Talkline. Also, the LIFE program created a drop-in center in Park La Brea, which held office hours to serve senior residents seeking assistance or information.

In addition, partnerships with other service providers brought activities to the community, including case management, transportation assistance, health monitoring, fitness, and disease prevention. For example, in an effort to address the issue of transportation, LIFE staff used existing JFS transportation services to provide rides to grocery stores and medical appointments. LIFE staff also referred homebound clients to social workers at the JFS Multipurpose Center, a previously existing JFS service at another location for ongoing case management services. They also created a resource directory to assist volunteers who provided information and referrals to Park La Brea residents.

Safety and Home Modifications

Although safety issues and access to Park La Brea facilities were primary areas identified in focus groups, access issues were not acted on because JFS considered it to be outside the agency's scope of expertise and too difficult to correct because of the age of the buildings, which had been constructed before the Americans with Disabilities Act (ADA) and the Fair Housing Amendments Act. Instead, JFS worked with residents and volunteers to overcome some of the access barriers by providing volunteers to help residents in their homes and to help them get to activities and medical appointments. One internal collaborator, JFS Home Secure Program, worked with management and residents to install grab bars, hand-held showers, and other small-scale equipment in apartments to help older residents carry out activities such as bathing and to prevent falls and accidents.

Educational Lectures and Workshops

In collaborations with multiple community service provider partners, the LIFE staff conducted numerous lectures and workshops on health topics, general interest and community information, emergency preparedness, benefits, and transportation. Health lectures included informational presentations on vision, depression, heart health, and physical activity. The program also provided

flu shots. LIFE staff identified general interest lecture themes by conducting annual community activity surveys and by gathering information from the constituent member activities committee. Community members and outside experts presented lectures on a variety of topics (for example, conservatorship, investments, and consumer fraud) and provided information on elections. The two other partners (Cedars-Sinai and AAA Steering Committee) and members of the service provider coalition often participated in these activities. Over the course of 3 years, they presented approximately 63 lectures. More than 100 people got their flu shots through the program. Combined, more than 760 individuals (duplicated) attended LIFE educational lectures and workshops during the project. Multiple collaborations with community groups provided opportunities for intergenerational sharing to benefit older adults, such as Spring Chore Day, when college students helped seniors turn their mattresses, and the Veterans History Project, in which local high school students came to Park La Brea to receive firsthand accounts of war from veterans residing at Park La Brea.

Health and Information Fairs

The LIFE staff held a health fair and several senior outreach events in conjunction with other community service partners, focusing on activities, health, and disaster preparedness. They provided health screenings, increased awareness of services and safety issues, and connected seniors with services and programs. The health fair attracted 115 older residents.

Talkline

A primary mechanism for providing ongoing information, referrals, and support was Talkline. The initial intent of Talkline was to (1) increase volunteer involvement and develop leadership capacity among senior volunteers, (2) increase access to services and community activities, and (3) provide ongoing support to seniors. Volunteers operated the Talkline phones. To advertise the availability of Talkline, the LIFE staff ran ads in local newspapers and distributed flyers to local senior-based service agencies. Between September 2005 and November 2006, the staff made 693 contacts, 48 percent of which were incoming calls to the Talkline. On average, Talkline volunteers spent 12 minutes (range: 2 to 90 minutes) per call. About one-half of the calls were outgoing to provide social support and specifics on upcoming activities and events and general information and referrals. Working on the Talkline represented about 39 percent of all volunteer hours.

Initially, Park La Brea's Talkline volunteers called older residents in response to messages that they left on Talkline's voice mail for information, referrals, and event RSVPs. The volunteers, however, saw the additional need for friendly support calls to LIFE members who were homebound, socially isolated, and frail. In addition to providing telephone support, volunteers also assessed the clients' needs and made appropriate referrals. Talkline therefore evolved to meet the needs of frail and homebound residents, serving as a bridge to LIFE social services, case management, and referrals.

Park La Brea Office Hours and Home Visits

The LIFE program established office hours in direct response to findings from focus groups that indicated the need for a centralized information source; those established hours became an important mechanism for increasing access to community resources. LIFE's social work staff, consisting of one full-time and one part-time social worker, kept regular office hours and provided services

such as information and referral, case management, and the development of care plans to help residents age in place. They made referrals to services such as home-delivered meals, home health, and home modification. They also assisted residents with a variety of other needs, such as crisis intervention, case management, grief counseling, and advocacy with medical services (U.S. Social Security Administration and government agencies that handled housing assistance). As the demand for these services increased, Park La Brea's social workers required additional support, which volunteers, who acted as case aides, provided. These volunteers received training and weekly supervision from the LIFE staff. Combined, social work office visits, home visits, friendly visitors, and peer counseling made more than 2,000 contacts and provided referrals and resources to Park La Brea residents, many of which involved home visits.

Transportation

Transportation was a high priority on the needs assessments of Park La Brea residents. The LIFE program established a JFS van service to provide local transportation to medical appointments, shopping, and LIFE program-related activities. Between September 2005 and February 2007, residents used transportation services for 2,628 one-way trips, 51 percent of which were for medical appointments, 45 percent for shopping, and 4 percent for LIFE-related activities. The program provided transportation to the activities center to attend LIFE events only if three or more residents requested services.

LIFE arranged transportation to—

- 1,353 medical appointments
 - 1,176 shopping trips
 - 99 LIFE activities
-

At the end of the grant period, funds were no longer available to subsidize the transportation service. JFS transportation services continued to provide transportation for errands and medical appointments at a cost of 50 cents each way through its city of Los Angeles

AAAs funding. The addition of a charge for this service did not affect general ridership; residents continued to use the van and did not complain about the cost. Transportation to LIFE events ceased, however. As a result, many Park La Brea members who were unable to drive and could not physically walk the distance from their apartment to the activities center found it difficult to attend activities.

Social Events and Day Trips

Throughout the course of the program, LIFE held a number of social events, ranging from picnics and barbecues to regular meetings of groups such as the coffee klatch and the crafts group. These groups increased social interaction among LIFE members and enhanced civic engagement as participants were drawn into discussions of the wider community. Day trips were one of the top identified desired activities in the needs assessment. In response, LIFE began organizing and offering day trips to residents for a nominal fee that ranged from \$5 to \$15 during the first year. As the range of activities increased over subsequent years, so too did the cost for participants, with some as high as \$35 to events such as the musical *Fiddler on the Roof*. The staff made a special effort to ensure that costs varied month to month so as not to exclude individuals unable to afford the more expensive trips. LIFE offered day trips monthly, with attendance ranging from 10 to 45 participants and with 24 day trips provided from November 2004 to February 2007.

NORC Membership

A core aspect of NORCs involves developing a membership of older people living in the community (Vladek, 2004). LIFE membership was a concept based on NORC models on the east coast, where members paid monthly or annual membership fees that entitled them to a basket of services. It also was viewed as a way to build identification with the program, a sense of camaraderie, and sustainability. Membership created a way to track participants in the program, create community buy-in, and attract and retain seniors. By becoming a member, an older adult would have full access to LIFE activities, lectures, transportation, and services.

The membership process evolved throughout the LIFE project, beginning informally and gradually developing into a formalized application process in 2005. Although LIFE enrollment initially was free, it was envisioned that, once seniors were engaged in LIFE services and programs, they would be willing to pay a membership fee. A total of 467 members were enrolled in LIFE from May 2004 to June 2007. Although the members paid no membership charges or dues during the 3 years of the LIFE program, at the end of the grant funding period, a group of residents at Park La Brea instituted a membership fee to help sustain the program. The committee recommended an annual membership fee of \$25, which was approved by the LIFE Advisory Board. The fee went into effect in July 2007. Since implementation, approximately 150 residents pay the \$25 annual dues. In addition, when day trip prices exceeded \$15 per trip, attendance decreased dramatically, but an increase in the price of the exercise class from \$2 to \$3 per session yielded no decline in participation. Thus, the implementation of dues had a somewhat negative effect on both membership and day trip participation, although smaller increases in weekly group activities did not seem to affect participation.

Volunteerism

Creating volunteer opportunities, building senior empowerment and ownership, and engaging seniors in leadership and governance roles, core features of successful NORCs (Vladek, 2004), were specific objectives of LIFE. Just as management's buy-in is important, so is buy-in by residents. Moreover, participation enables residents to take an active role in the decisionmaking process in their community (MacLaren, Landsberg, and Schwartz, 2007), further ensuring that community needs will be met. The importance of the role of volunteers, particularly in terms of program sustainability, contributed to the decision to evaluate the role and contribution of the LIFE volunteers.

LIFE volunteer roles fell into four areas: governance, individual support service, programmatic activities, and administrative and program development support. Volunteer governance roles included participation on advisory councils and various program committees. In addition, volunteers received leadership and advocacy training and helped to educate government officials on seniors' issues in their city, at the state capital, and at the federal level. Volunteers also led activities, staffed the office, helped with fundraising, and took on important roles in programmatic activities, such as Talkline, peer counseling, friendly visiting, and CONNECT (a volunteer-led program helping frail, older adults and adults with disabilities to access transportation). Total recorded volunteer hours from August 2004 through June 2007 were 2,215 hours (see exhibit 1).

Overall, volunteer involvement proved to be a critical element in the operation of the LIFE program. Not only did the number of volunteers increase over the course of the program, but the amount of time spent volunteering was also significant. Between March 2005 and August 2006, volunteers kept a log documenting the types of activities they conducted as volunteers and the time spent in each activity, with 866 volunteer hours logged.

Exhibit 2 lists specific LIFE activities in which volunteers contributed their time.

Exhibit 1

Total hours spent volunteering

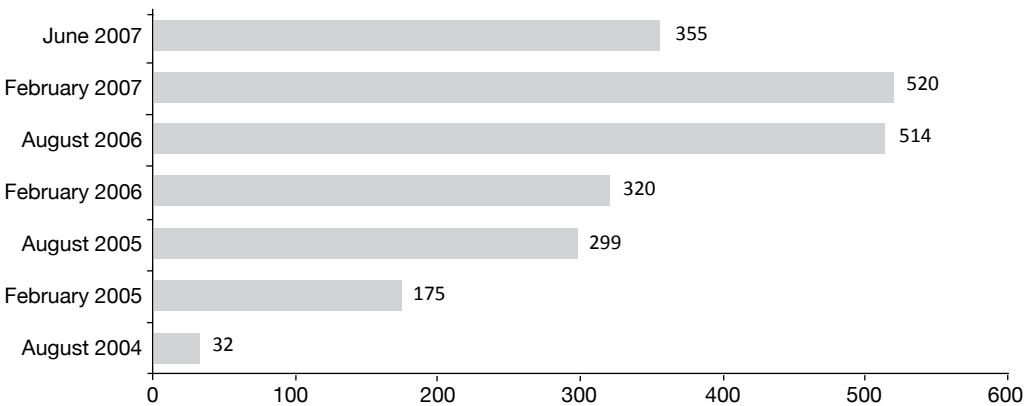


Exhibit 2

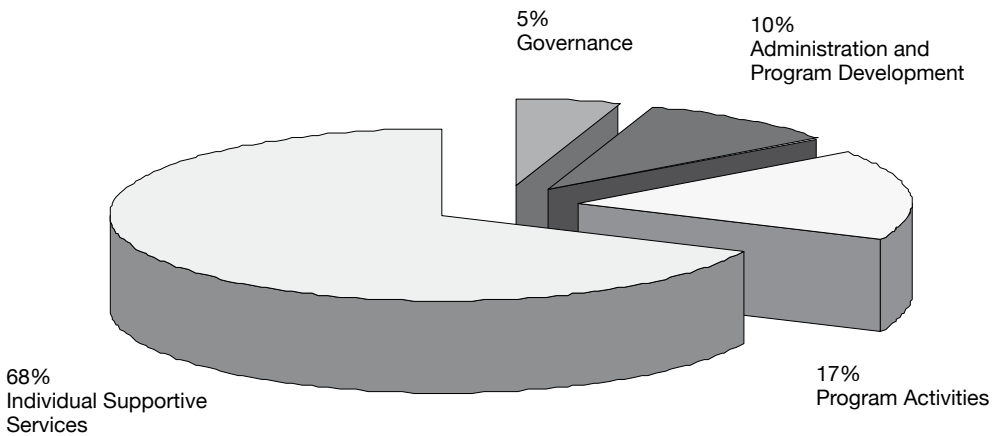
LIFE activities for which senior residents volunteered

- Governance**
- Advisory council meetings
- Activities committee meetings
- Resource development committee
- Individual Supportive Services**
- Senior Talkline
- Peer counseling
- Friendly visiting
- Case aid
- Program Activities**
- Educational lectures
- Game time group
- Coffee klatch
- Walking group
- Leading day trips
- Play reading group
- Administration and Program Development**
- Outreach
- Transportation meetings
- LIFE member needs assessment

Between February 2005 and September 2006, Park La Brea volunteer activities focused largely on providing individual supportive services (see exhibit 3). Within this category, volunteers spent a large segment of their time working on the Talkline, providing friendly visiting, conducting peer counseling, and serving as case aides by providing information and referrals to people who contacted the office. Leading activities was also a primary focus of volunteers. The highest number of hours spent volunteering related to providing individual supportive services, followed by conducting program activities in Park La Brea.

Exhibit 3

Percentage of time spent in specific volunteer categories: February 2005–September 2006



One of the greatest challenges in the volunteer segment of the LIFE program was the ability to recruit and retain LIFE volunteers. Most of the program's volunteers were 80 years old or older. Although the LIFE program provided an opportunity for older adults to remain active and involved in the community, their volunteer commitment was a variable because of health problems, health-care issues, and caregiving responsibilities. LIFE staff found that younger seniors, however, were reluctant to commit to regular, ongoing volunteer assignments or to engage in a regular volunteer job because of employment (many worked full time) or other commitments. Such barriers led LIFE staff to design flexible roles such as friendly visitors and disaster specialists. These types of assignments enabled volunteers to set their own schedules, often carrying out their responsibilities in the evening or on weekends. LIFE continued to struggle, however, with recruiting and retaining volunteers throughout the program period.

Sustainability

Securing funding for service provision and administrative staff has been a continuing challenge for NORC programs, many of which subsist on a combination of fundraising by resident organizers, service fees, family contributions, and government and foundation grants. Studying 17 NORC organizations, Wilden and Redfoot (2002) found that 16 received substantial funding

from residents, 6 were principally funded by Medicaid, and 6 were subsidized by gifts and donations from private organizations and federal, state, and county governments. Among the Administration on Aging-funded NORC programs, only 3 out of 41 NORCs had fees for membership. Some services were open only to members; others, to everyone.

Most of the long-running east coast NORC programs have sustained their programs and activities through internal support rather than external funding. Although many NORC programs began with an external funding base, as these funds began to diminish, they shifted to internal sources, including resident fees, costs for activities, and building manager and co-op fees. Given the lack of previous experience in developing of NORCs on the west coast, and the difference in culture and populations, issues of sustainability were critical to the program.

Residents and management alike highly valued the LIFE program at Park La Brea. As noted previously, Park La Brea management provided in-kind support by contributing office and program space. In addition to contributing their time, residents donated funds to the program and paid a membership fee (\$25 per year). These funding sources, however, were insufficient to pay for LIFE's core staff or service provision. The membership fee, for example, fell far below the \$600 to \$800 that Beacon Hill Village, a program in Boston, and its approximately 50 replicated programs charge. Created by residents aging in place in Boston's Beacon Hill, the Village provides its residents with a variety of services, the total cost of which covers about 60 percent of its operations, leaving it with the task of raising additional funds from private sources to fill the gap. Although the management of Park LA Brea was willing to continue and increase its in-kind support, it was not able to commit funds for staffing of the program nor was it willing to add a surcharge to resident rents to support the program. Fortunately, an anonymous donor through the Jewish Federation of Greater Los Angeles contributed \$100,000 to JFS that supported the LIFE Program and that was supplemented by the membership fee. In addition, in 2008, JFS was able to obtain another grant from the AoA.

Discussion

Overall, the LIFE program accomplished a great deal even with its many challenges. It developed a significant range of services and programs, and the number of members consistently grew each year. Members reported that LIFE increased their knowledge of community services and provided the appropriate amount of services in an effective manner. In addition, they believed that LIFE had a positive effect on their community. Connecting seniors to their community and developing a social network was a major success of LIFE. Recruiting and retaining volunteers, however, was a constant struggle. Nevertheless, LIFE was able to involve a substantial number of volunteers who themselves benefited from their participation and contributed to the well-being of others.

Initially, it was challenging to empower seniors. The strategy was to involve community residents on many levels, including needs assessments, developing volunteer roles, and creating a leadership training program and an advisory council. This approach was a radical shift in the service-delivery paradigm, requiring seniors to see themselves as partners in service delivery rather than just recipients. Gradually, resident participation and engagement increased. Residents gained an overall

sense that the services that LIFE developed and provided were in direct response to the needs that community members identified. Members identified strongly with LIFE and actually ran some of the programs. Advisory council members felt a strong commitment to LIFE and took their roles as representatives of other residents seriously.

Securing funding for service provision and administrative staff has been a continuing problem for NORC programs—LIFE has been no exception. By the time federal funding for LIFE ended, there was a concerted effort by both Park La Brea residents and LIFE staff to obtain funding to support continuation of the program. Fortunately, as mentioned earlier, the Jewish Federation of Greater Los Angeles was able to secure a donation to JFS that supported LIFE social work staff at the site, which was supplemented by membership fees referred to earlier. The direct funding from property management, however, for core staff support did not materialize as hoped.

Conclusion

JFS's LIFE program in Park La Brea represents a NORC-SSP in a large private development operated by property management staff. NORCs have a number of challenges, including obtaining buy-in from management, gaining residents' support and participation, accurately assessing residents' needs, creating breadth and flexibility of services, and securing long-term funding (Black, 2005). The experience with Park La Brea indicates that, in spite of these challenges, such a program can be successful in building a community, providing services to people in need, and engaging older people in both activities and helping each other. It can take several years, however, to build up the trust of both residents and management.

Bringing services directly to the community has enabled JFS to reach many older adults who were previously underserved. The successful recruitment and training of volunteers has enabled the program to serve many more seniors than traditional care management programs would, given the small professional staff. Using volunteers is a relatively low-cost way to help enable older adults to remain independent, a meaningful way to involve them in giving back to their community, and an approach that ensures that residents have a say in the types of services that will enable them to remain independent.

Despite the multiple benefits associated with NORC-SSPs, significant challenges remain in sustaining these models following the expiration of grant funding. This experience clearly illustrates the ongoing need for a trained professional social work presence and the need for continuity in leadership with the program. Although community volunteers can administer and maintain significant aspects of the NORC, the role of the professional paid program administrator is critical in maintaining the volunteer base, securing ongoing funding support, and coordinating numerous activities that include interacting and coordinating with health and community service organizations.

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References

Black, Kirsten J. 2005. "A Conceptual Model of the Evolution of NORCs and Their Associated Supportive Services Program." Annual Meeting of the Gerontological Society of America, Orlando, Florida, November 22, 2005.

MacLaren, Catharine, Gerald Landsberg, and Harry Schwartz. 2007. "History, Accomplishments, Issues, and Prospects of Supportive Service Programs in Naturally Occurring Retirement Communities in New York State: Lessons Learned," *Housing for the Elderly: Policy and Practice Issues*: 127–144.

Nolin, JoAnn, Sharon T. Wilburn, Kenneth T. Wilburn, and Dax Weaver. 2006. "Health and Social Service Needs of Older Adults: Implementing a Community-Based Needs Assessment," *Evaluation and Program Planning* 29: 217–226.

U.S. Census Bureau. 2000. "Summary File 3, Table P56." In: *2000 Decennial Census*. <http://factfinder.census.gov> (accessed August 31, 2009).

Vladeck, Fredda. 2004. *A Good Place To Grow Old: New York's Model for NORC Supportive Service Programs*. A special report from United Hospital Fund. New York: United Hospital Fund.

Wilden, Robert, and Donald L. Redfoot. 2002. *Adding Assisted Living Services to Subsidized Housing: Serving Frail Older Persons with Low Incomes*. Washington, DC: AARP, Public Policy Institute.

Additional Reading

Carpenter, Brian D., Dorothy F. Edwards, Joseph G. Pickard, Janice L. Palmer, Susan Stark, Peggy S. Neufeld, Nancy Morrow-Howell, Margaret A. Perkinson, and John C. Morris. 2007. "Anticipating Relocation: Concerns About Moving Among NORC Residents," *Housing for the Elderly: Policy and Practice Issues*: 165–184.

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics. 2001. National Health Interview Survey.

Hunt, Michael E., and Leonard Ross. 1990. "Naturally Occurring Retirement Communities: A Multi-Attribute Examination of Desirability Factors," *The Gerontologist* 30 (5): 667–673.

United Hospital Fund. N.d. "NORC Blueprint." <http://www.norcblueprint.org> (accessed August 2009).
