

2005

Kent County Advantage Initiative: 2004 Survey Results


Community Research Institute-Johnson Center

Follow this and additional works at: <https://scholarworks.gvsu.edu/jcppubs>

ScholarWorks Citation

Community Research Institute-Johnson Center, "Kent County Advantage Initiative: 2004 Survey Results" (2005). *Research, Reports, and Publications*. 97.
<https://scholarworks.gvsu.edu/jcppubs/97>

This Article is brought to you for free and open access by the Dorothy A. Johnson Center for Philanthropy at ScholarWorks@GVSU. It has been accepted for inclusion in Research, Reports, and Publications by an authorized administrator of ScholarWorks@GVSU. For more information, please contact scholarworks@gvsu.edu.



Kent County AdvantAge Initiative: 2004 Survey Results

**A project of the Grand Rapids Community Foundation
and the Area Agency on Aging of Western Michigan**

Community Research InstituteSM

Supporting Community Improvement Through Research and Data Sharing



DOROTHY A. JOHNSON CENTER FOR PHILANTHROPY AND NONPROFIT LEADERSHIP



About the Community Research Institute

The Community Research Institute (CRI) at Grand Valley State University, a partnership between the Dorothy A. Johnson Center for Philanthropy and Nonprofit Leadership and the Grand Rapids Community Foundation, serves the Greater Grand Rapids nonprofit and philanthropic community. CRI's mission is to assist nonprofit organizations with acquisition of information and technical skills that will help them to understand the evolving needs of the community, plan programs, solve problems, and measure outcomes.

CRI engages in applied research and Geographic Information Systems (GIS) projects and is a clearinghouse for community data. The CRI web site provides a comprehensive overview of community indicators at www.cridata.org. Questions about the AdvantAge Initiative Survey may be directed to Korrie Ottenwess at 331-7585 or ottenwko@gvsu.edu

Table of Contents

Executive Summary	4
Introduction	6
Methodology	7
Domain 1 - Addresses Basic Needs	8
Indicator 1 - % of People Age 65+ who Spend >30%<30% of their Income on Housing	8
Indicator 2 - % of People Age 65+who Want to Remain in their Current Residence and are Confident they will be Able to Afford to Do So	10
Indicator 3 - % of Householders Age 65+ in Housing Units with Home Modification Needs	13
Indicator 4 - % of People Age 65+ who Feel Safe/Unsafe in their Neighborhood	16
Indicator 5 - % of People Age 65+ who Report Few/Multiple Problems in their Neighborhood	18
Indicator 6 - % of People Age 65+ who are Satisfied with their Neighborhood as a Place to Live	19
Indicator 7 - % of People Age 65+ who Report Cutting the Size/Skipping Meals	22
Indicator 8 - % of People Age 65+ who do not know who to Call if they Need Information about Services in their Community	24
Indicator 9 - % of People Age 65+ who are Unaware of Selected Services in their Community	24
Indicator 10 - % of People Age 65+ with Adequate Assistance in ADL and/or IADL Activities	27
Domain 2 - Optimizes Physical and Mental Health and Well-being	29
Indicator 11 - Rates of screening and vaccination for various conditions among people 65 +	29
Indicator 12 - % of People Age 65+ who thought they Needed the Help of a Health Care Professional because they felt Depressed or Anxious	31
Indicator 13 - % of People Age 65+ whose Physical/Mental Health Interfered with Activities	34
Indicator 14 - % of People Age 65+ who Report being in Good to Excellent Health	34
Indicator 15 - % of People Age 65+ who Participate in Regular Physical Exercise	36
Indicator 16 - % of People Age 65+ with a Usual Source of Care	39
Indicator 17 - % of People Age 65+ who Failed to Obtain Needed Medical Care	41
Indicator 18 - % of People Age 65+ who had Problems Paying for Medical Care	41
Indicator 19 - % of People Age 65+ who had Problems Paying for Prescription Drugs	42
Indicator 20 - % of People Age 65+ who had Problems Paying for Dental Care or Eyeglasses	43
Indicator 21 - % of People Age 65+ who know whether Palliative Care Services are Available	44
Domain 3 - Maximizes Independence for the Frail and Disabled	45
Indicator 22 - % of People Age 65+ who have access to public transportation	45
Indicator 23 - % of People Age 65+ with adequate assistance of daily living (ADLs)	47
Indicator 24 - % of People Age 65+ with adequate assistance in IADLs	49
Indicator 25 - % of People Age 65+ who provide health to the frail or disabled	52
Indicator 26 - % of People Age 65+ who get respite/relief from their care giving activity	55
Domain 4 - Promotes Social and Civic Engagement	56
Indicator 27 - % of People Age 65+ who Socialized with Friends or Neighbors in the Past Week	56
Indicator 28 - % of People Age 65+ who Attended Church, Temple, or other in the Past Week	58
Indicator 29 - % of People Age 65+ who Attended Movies/Sports Events/Clubs/Group Events	60
Indicator 30 - % of People Age 65+ who engaged in at least 1 Social, Religious, or Cultural Activity	62
Indicator 31 - % of People Age 65+ who Participate in Volunteer Work	64
Indicator 32 - % of People Age 65+ who Live in "Helping Communities"	66
Indicator 33 - % of People Age 65+ who would like to be Working for Pay	68
Bibliography	70

Executive Summary

In Kent County, we are just beginning to mine the rich information we obtained from the AdvantAge Initiative survey. Currently community interpretive partners are in the process of analyzing the full meaning of the results. However, team members have been intrigued by a number of preliminary findings.

For example, one of the most striking findings is that 95 percent of older people in Kent County want to continue living in their own homes, in their own communities, for as long as possible. That's consistent with AdvantAge Initiative survey findings across the country where an average of 91 percent of older Americans indicated a desire to *age in place*. Nine out of ten older adults in Kent County are satisfied with their neighborhoods, 95 percent feel safe where they live, and only eight percent feel their homes need to be modified for them to continue to live there – all about the same or more positive than national averages.

The Kent County AdvantAge Initiative survey results seem to reinforce recent findings by the Michigan Department of Community Health that older Kent County residents are healthier than their counterparts throughout Michigan. On all 11 AdvantAge Initiative health indicators, Kent County older residents scored the same or higher than the national average. For example, the AI survey found that:

- Seventy-seven percent of older adults in Kent County report being in “excellent, very good, or good” health, compared to 75 percent nationally.
- Seventy-one percent of older adults in Kent County say they participate in some form of physical activity, compared to 62 percent nationally.

We also learned that older adults living in Kent County tend to be more socially engaged than in other communities, as indicated by:

- Ninety-three percent of Kent County older adults indicated that they had engaged in at least one social activity in the past week, compared with the national average of 89 percent and as low as 81 percent in one New York community.
- More than 42 percent of Kent County residents age 65 or more say they volunteer in the community, significantly more than the national average of 36 percent. Older volunteers in Kent County represent a cross-section of the older adults in terms of educational and income level, age, gender, ethnicity and health status.
- Twenty percent of people age 65 or more in Kent County are providing help for someone who is frail or disabled – again, slightly higher than the national average of 19 percent.

Two Older Kent Counties?

These findings are clearly very positive: Kent County efforts to create a healthy environment for older adults – through the Senior Millage and a broad array of support services and opportunities – appear to be making a difference for the majority of aging residents. However, we also see preliminary indicators that we may have “two older Kent County’s” as well – a “fortunate majority” and a “frail fraction” who may not be doing well on a number of fronts. For example:

- Although the vast majority wish to age in place and feel good about where they live, a disturbing 34 percent of older adults in Kent County doubted that they would be able to remain in their current homes as long as they'd like.
- Almost half - 45 percent - felt that they did not have enough money to meet basic needs (e.g., food, clothing, shelter).

We also see indications that the most frail in our community may not be receiving the support they need. The survey asked respondents if they needed assistance with “activities of daily living” (e.g., taking a bath or shower, eating, dressing, etc.) or “instrumental activities of daily living” (e.g., doing light housework, going outside the home, taking medications, etc.). These are issues that often limit people’s independence and their ability to remain in their homes, and ultimately can lead to isolation and decline if not addressed. Some of the initial findings signal reason for concern:

- Two-thirds of those who need assistance with activities of daily living reported one or more unmet need.
- More than half of those who need assistance with instrumental activities of daily living reported one or more unmet need.
- More than a third of those who felt they needed the help of a professional because they felt depressed or anxious reported they had not obtained help for this condition.
- More than 25 percent of older adults in Kent County do not know whom to call if they need information about services – a figure considerably higher than the 20 percent of older adults nationally who do not know whom to call.

Who are these older adults who are struggling in Kent County? Are the people who are questioning their ability to continue to live in their homes the same ones who report an unmet need for help with meals, dressing, doing housework, or going to the store? Are they also living in ill health or feeling financially insecure? Do they cluster by ethnic background, race, educational background or other characteristics? These are all questions Creating Community for a Lifetime participants will be exploring in the months ahead.

The AdvantAge Initiative survey of older adults in Kent County has yielded significant data which will contribute to creating a fuller picture of our community from the perspective of older adults who live here. As community partners continue to probe the meaning of the full results of this important survey, we will begin to gain a sense of what areas call for our community’s immediate attention, building upon solid research a countywide blueprint for action.

Introduction

The AdvantAge Initiative is a community-building effort focused on creating vibrant and elder-friendly communities that are prepared to meet the needs and nurture the aspirations of older adults.

At the heart of the AdvantAge Initiative is a comprehensive survey of community-residing older adults. Consumer-derived information is integral to this project because it:

- Complements the "top-down" perspectives of institutions and professionals
- May challenge organizational and individual assumptions
- Enables stakeholders to hear a range of community voices, engages citizens in a dialogue about aging issues, and builds support for action plans

The AdvantAge Initiative survey provides a "data snapshot" of how well seniors are currently faring in their communities. Community organizations within Kent County intend to use the survey results to help build broader awareness about aging, inform service and other planning efforts, and spur needed community-wide action in the not-for-profit, public, and private sectors.

The AdvantAge Initiative survey focuses on four key areas, or domains, where communities can make a difference in the lives of older people:

- Domain 1 - Basic needs for housing and security
- Domain 2 - Maintenance of physical and mental health
- Domain 3 - Independence for the frail, disabled, and homebound
- Domain 4 - Opportunities for social and civic engagement

Through the AdvantAge Initiative, communities strive to become better places to live, not only for older adults, but also for people of all ages.



Methodology

The 2004 Kent County Advantage Initiative Survey, a random digital dial (RDD) telephone survey of countywide representative sample of non-institutionalized adults age 65 and older, was conducted during July- August 2004. The survey consisted of 35-minute telephone interviews. Survey results were analyzed by staff of the Community Research Institute.

The survey questionnaire was translated into Spanish and the interviewers were available to conduct interviews in that language when requested by the respondent.

The sample was weighted by gender, age, race, and education using the Current Population Survey (CPS) from the U.S. Census Bureau to produce representative results for the 62,102 non-institutionalized adults aged 65 and older in Kent County.

The margin of error for the overall sample is +/- 4.45%. Subgroup responses will have a larger margin of error, depending on the size of the group.

Dimension 1

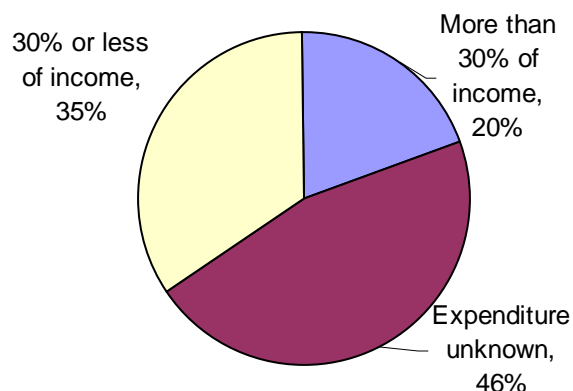
Affordable Housing is Available to Community Residents

As the largest expense of most households, housing costs are an important issue to older adults. This is especially true of seniors whose fixed incomes do not allow them to pay for the in-home care they need or the repairs their homes require. This is also true of seniors whose wealth is not liquid but is instead tied up in the equity of their homes (Hull, 2002).

Indicator 1) Percentage of people age 65+ who spend >30%/<30% of their income on housing

In 2004 HUD stated, “Families who pay more than 30% of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation and medical care.” In Kent County, 1 out of 5 older adults (65+) reported spending more than 30% of their income on housing¹.

Exhibit 1.1 – Housing Cost Burden
Percentage of People Age 65+ Who Spend >30%/<30 Percent of their Income on Housing¹
Kent County 2004



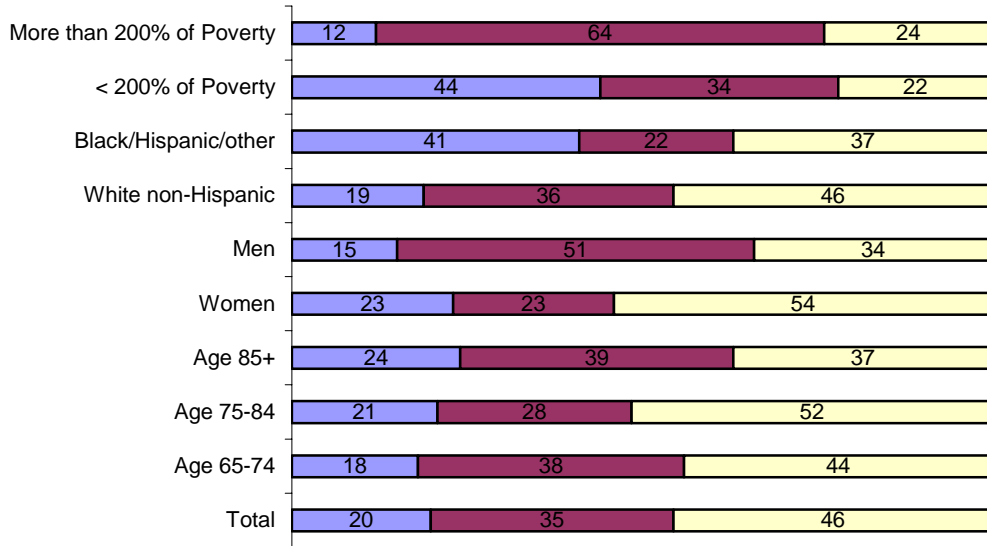
Unweighted N = 554 Weighted N = 62,102

Certain demographics tend to be at higher risk for housing cost burden than others. In Kent County, older adults who lived alone, were struggling with poverty, or were of a Black, Hispanic and Other racial/ethnic background were more than twice as likely to report being burdened by housing costs than those who did not live alone, were more than 200% above the poverty level or were white.

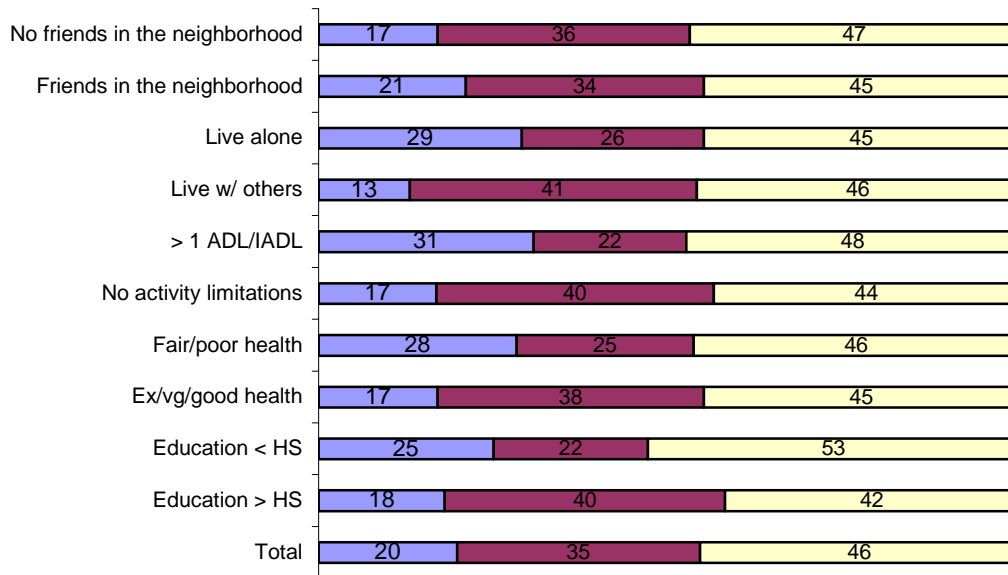
¹ Annual housing expenses were calculated based on reported outlays for rent or mortgage, real estate taxes, association/condo fees, and utilities as a percentage of income. People for whom sufficient information was not available were classified in the category of expenditure unknown. Percentages may not add up to 100% due to rounding and/or missing information.

Exhibit 1.2 – Housing Cost Burden by Selected Demographic Characteristics
Percentage of People Age 65+ Who Spend More Than 30 Percent of their Income
on Housing¹, by Demographics
Kent County 2004

■ More than 30% of income ■ 30% or less of income □ Expenditure unknown



■ More than 30% of income ■ 30% or less of income □ Expenditure unknown

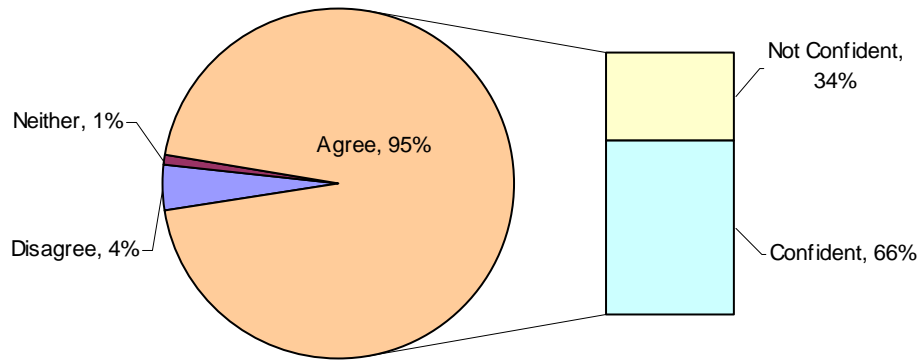


Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 2) Percentage of people age 65+ who want to remain in their current residence and are confident they will be able to afford to do so

Older adults often consider their home to be an important symbol of independence and their most valuable asset. Despite this, a significant amount of older adults find their home to be too costly to retain as they age (Commission on Affordable Housing and Health, 2002). Nearly all (95%) of Kent County residents over age 65 wished to remain in their home for as long as possible, 1/3 of these seniors are not confident they will be able to continue to live in their present residence.

**Exhibit 2.1 - Percentage of People Age 65+ Who Want to Remain in Their Current Residence and are Confident They will be Able to Do So²
Kent County 2004**

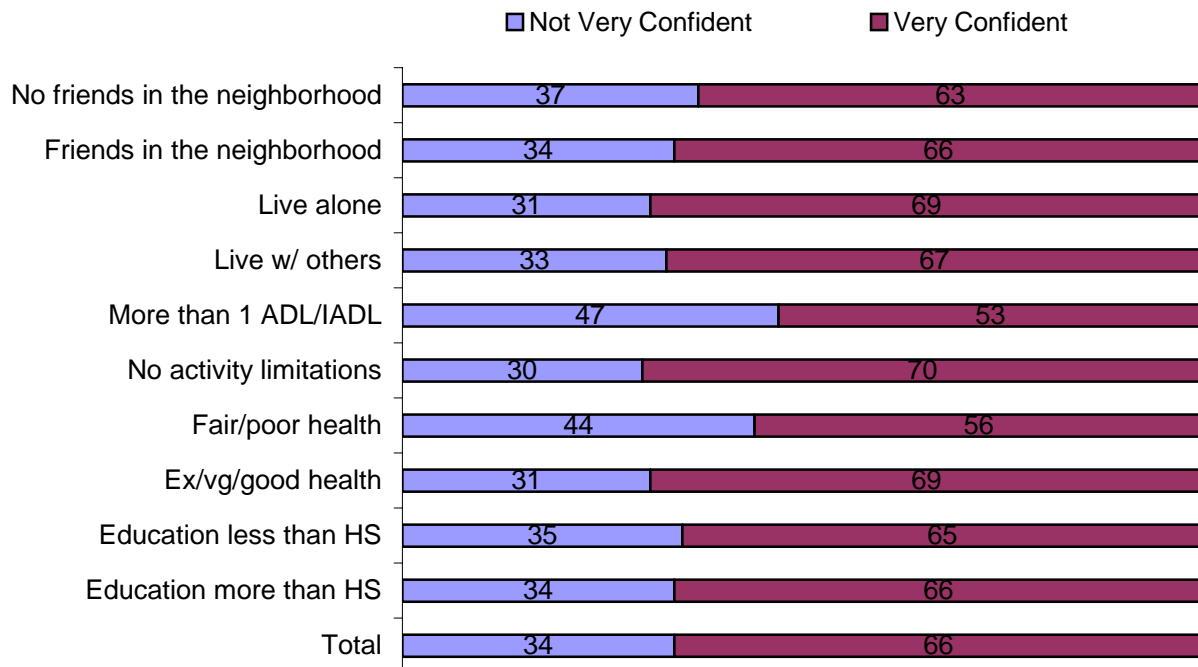
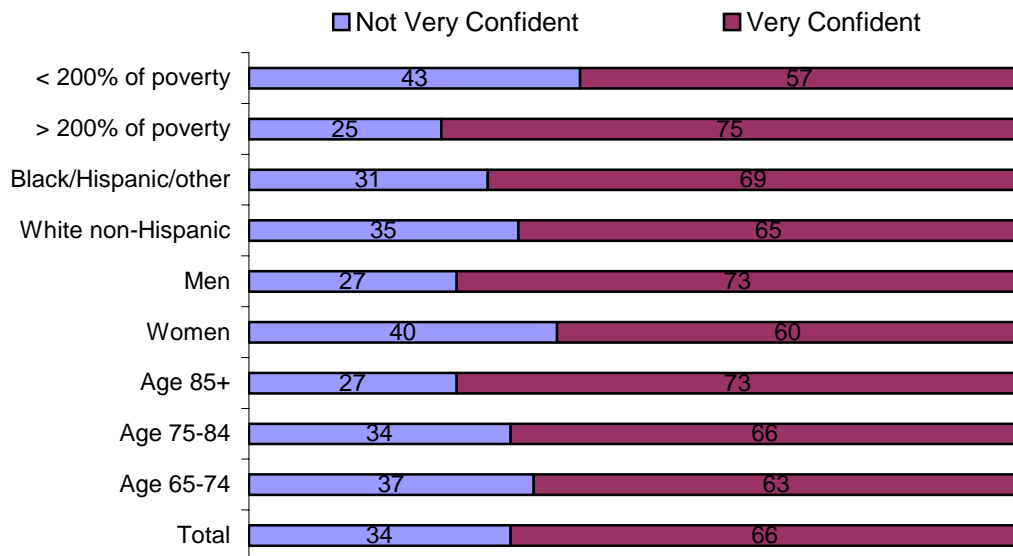


Unweighted N = 554 Weighted N = 62,102

Confidence levels decreased as age increased. Women, those struggling with poverty, and those experiencing health problems or activity limitation also showed significant discrepancies in their confidence levels.

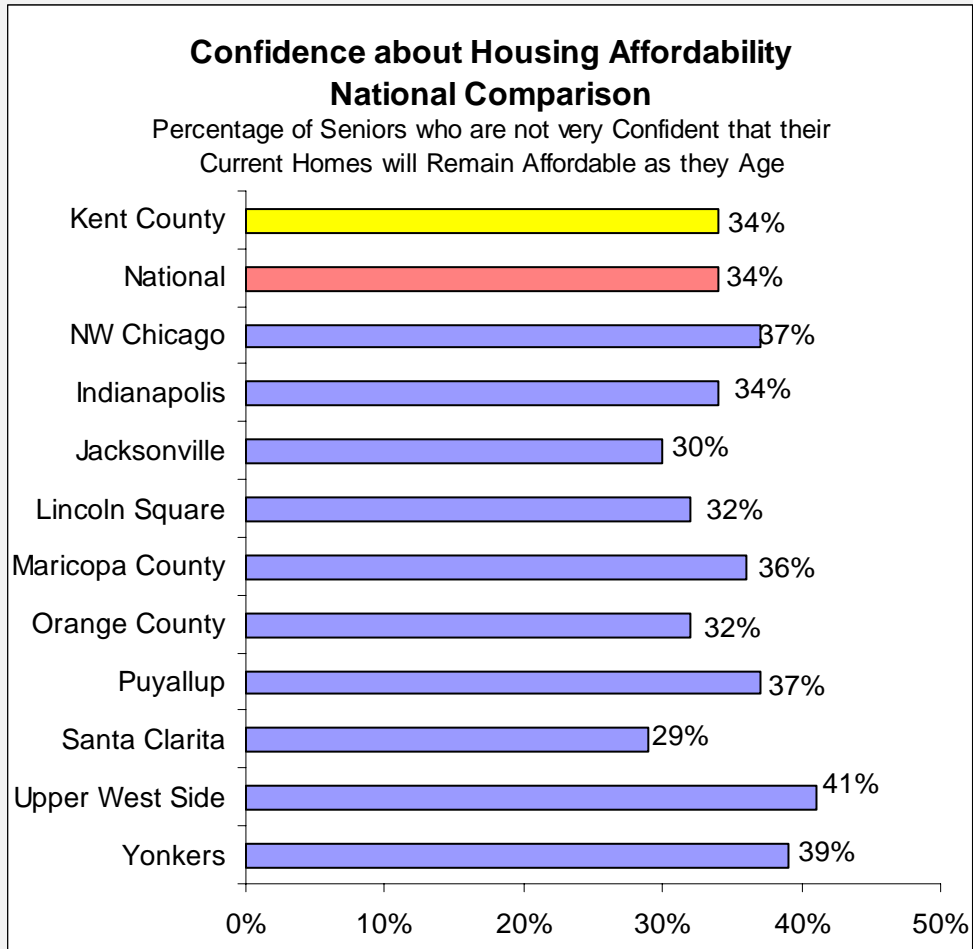
² We asked respondents whether they agree or disagree with the following statement: “What I’d really like to do is stay in my current residence for as long as possible.” For people who answered “agree” we calculated the percentage of adults age 65+ who were confident/not confident that they will be able to afford to live in their current residence for as long as they would like. Agree includes those who said “Strongly agree” or “Somewhat agree”. Not confident that they can remain in their current residence includes those who said “Somewhat confident”, “not too confident”, “Not confident at all”, “Don’t know”, or “Refused”. Percentages may not add up to 100% due to rounding and/or missing information.

Exhibit 2.2 - Percentage of People Age 65+ Who Want to Remain In Their Current Residence and are Confident They Will Be Able To Do So², By Demographics



Margin of Error ranges from 4.5% - 20% depending on sample size

How Does Kent County Compare?



Dimension 2

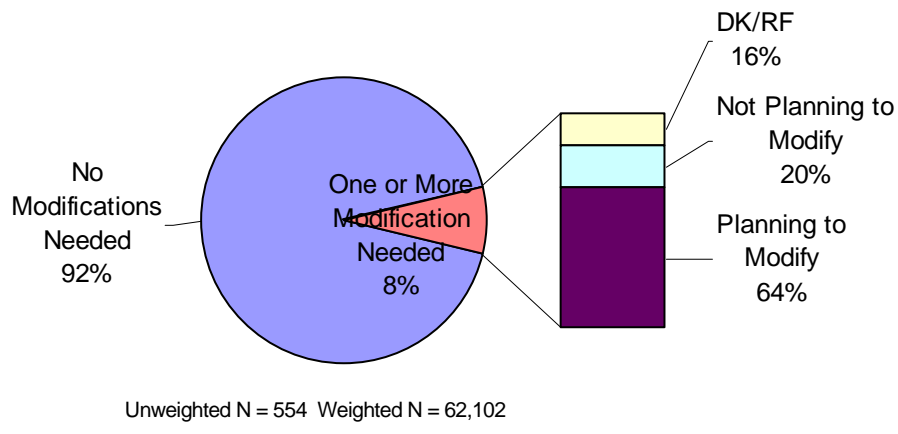
Housing is Modified to Accommodate Mobility and Safety

“The number and proportion of older people in the United States is increasing at a rapid pace. Surveys continue to show that older Americans want to remain in their homes, but many of their existing homes do not provide safe, comfortable and convenient environments for them as they age (National Center for Senior’s Housing Research, 2001).” Research by the National Centers for Disease Control and Prevention shows that home modifications and repairs may prevent 30% to 50% of all home accidents among seniors, including falls that take place in these older homes (Administration on Aging, 2003).

Indicator 3) Percentage of householders age 65+ in housing units with home modification needs

In Kent County, 8% of older adults live in homes that need modifications in order to improve their ability to live there over the next five years. Less than two thirds (64%) of those needing modifications have plans to address those needs.

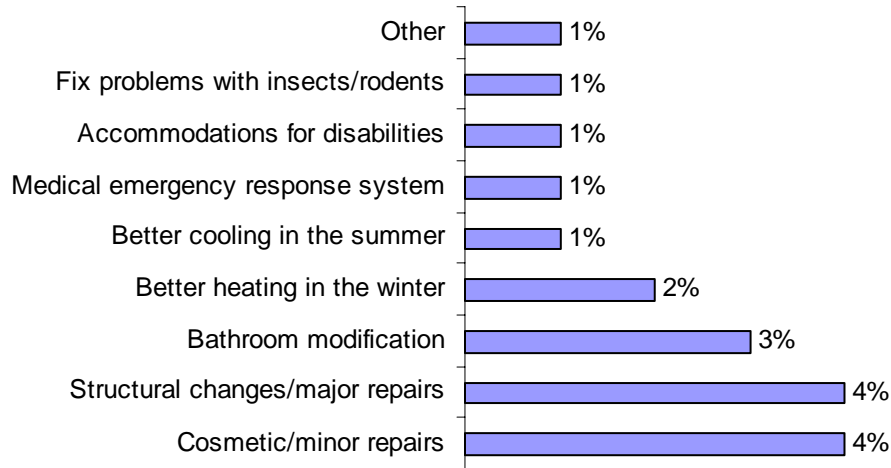
**Exhibit 3.1 - Percentage of Householders Age 65+ in Housing Units with Home Modification Needs³
Kent County 2004**



When asked to specify what modifications were needed, the most commonly identified modifications were structural changes and cosmetic repairs.

³ People were asked whether their current residence needs any significant repairs, modifications, or changes to improve their ability to live there over the next five years. People who said their homes need modification were asked if they plan to make the change over the next five years. Percentages may not add up to 100% due to rounding and/or missing information.

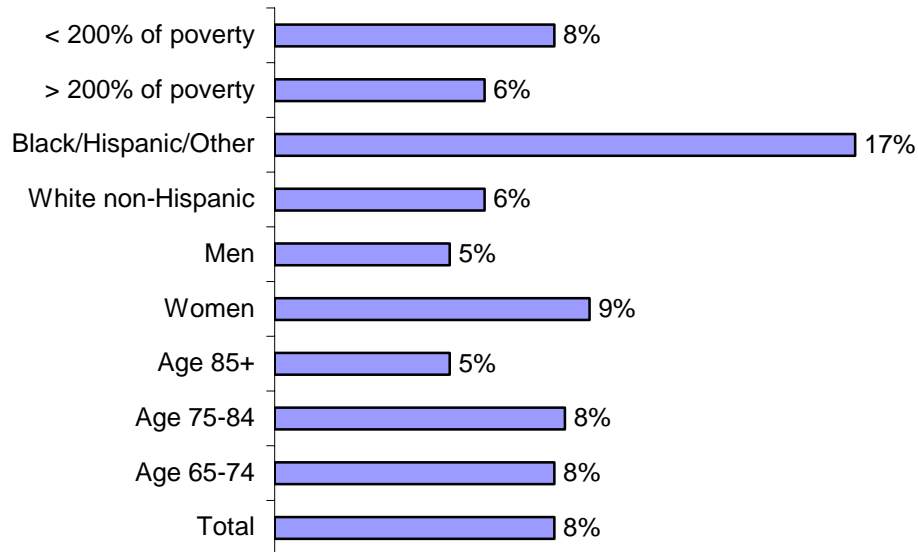
Exhibit 3.2 - Type of Modification Needed Kent County 2004

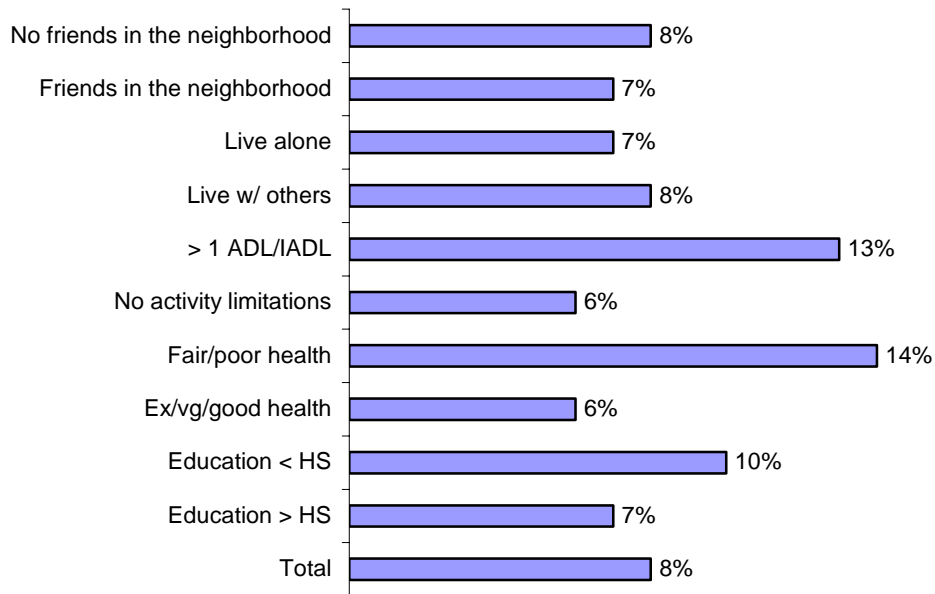


Unweighted N = 554 Weighted N = 62,102

Survey results indicate a relationship between health and the need for home modifications. Those with 1 or more ADL/IADL limitations and those in Fair/Poor Health were twice as likely to live in a housing unit with home modification needs. In addition, those of Black, Hispanic and other racial/ethnic backgrounds seemed to have greater need for home modifications than Whites.

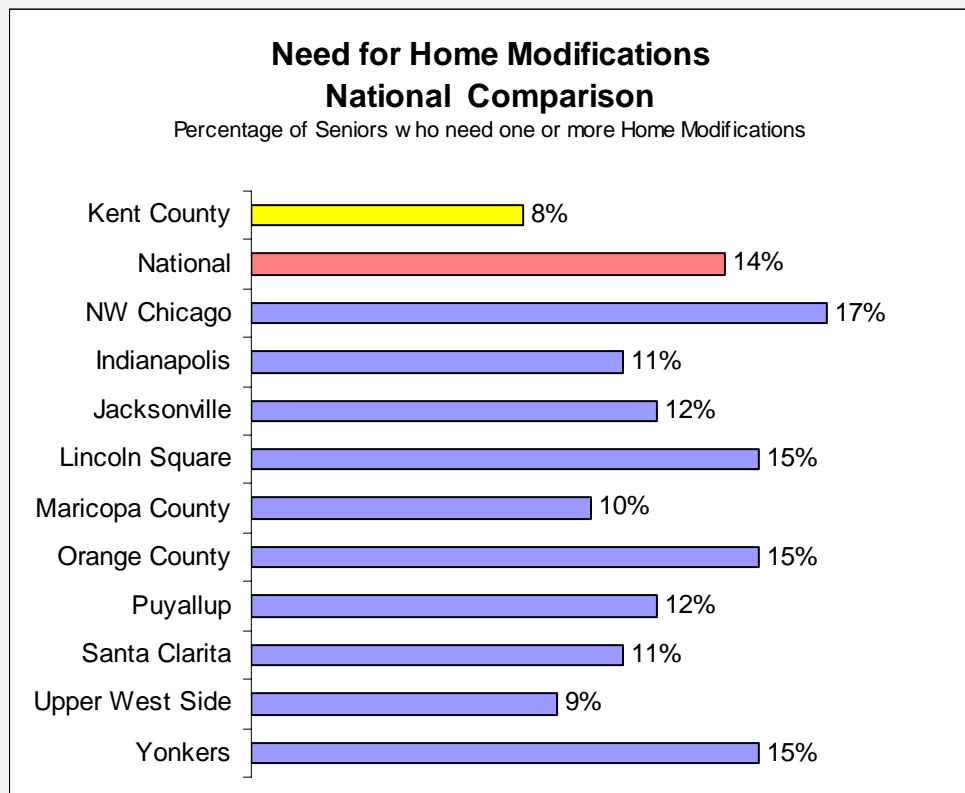
Exhibit 3.3 - Percentage of Householders Age 65+ in Housing Units with Home Modification Needs³, By Demographics Kent County 2004





Margin of Error ranges from 4.5% - 20% depending on sample size

How Does Kent County Compare?



Dimension 3

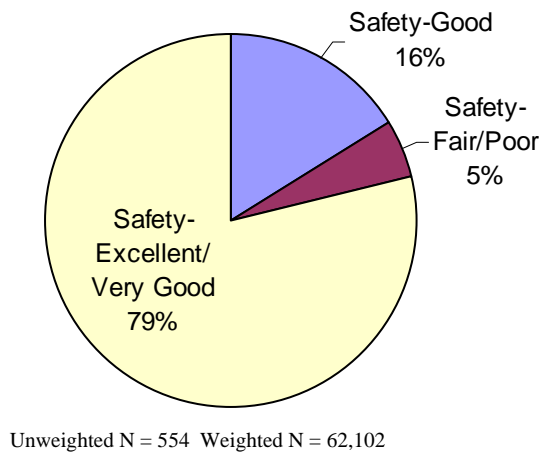
The Neighborhood is Livable and Safe

According to a report published by the FBI, “The results of victimization have lasting and unhappy consequences for an older person who may be limited physically, emotionally, and financially. The elderly may not recover with the same agility as when they were younger. A broken hip as the result of a mugging, the frightening encounter with a criminal bent on harm, or the loss of savings to a con artist may diminish an older person’s quality of life and make some elderly live the last of their years in fear and distress (Jordan, 2002).”

Indicator 4) Percentage of people age 65+ who feel safe/unsafe in their neighborhoods

Although national crime statistics show that younger people are more likely to experience a violent crime, safety is frequently a concern of seniors because they tend to feel more vulnerable. “In fact, for many seniors, the fear of crime may alter their lifestyles. Even if this fear remains an extreme reaction or is based on an imagined, rather than an actual, situation, it proves no less debilitating or stressful. The fear of crime denotes a disturbing element in the existence of many older people (Jordan, 2002).” Survey results tell us that, one in five seniors in Kent County have safety concerns in their own neighborhood.

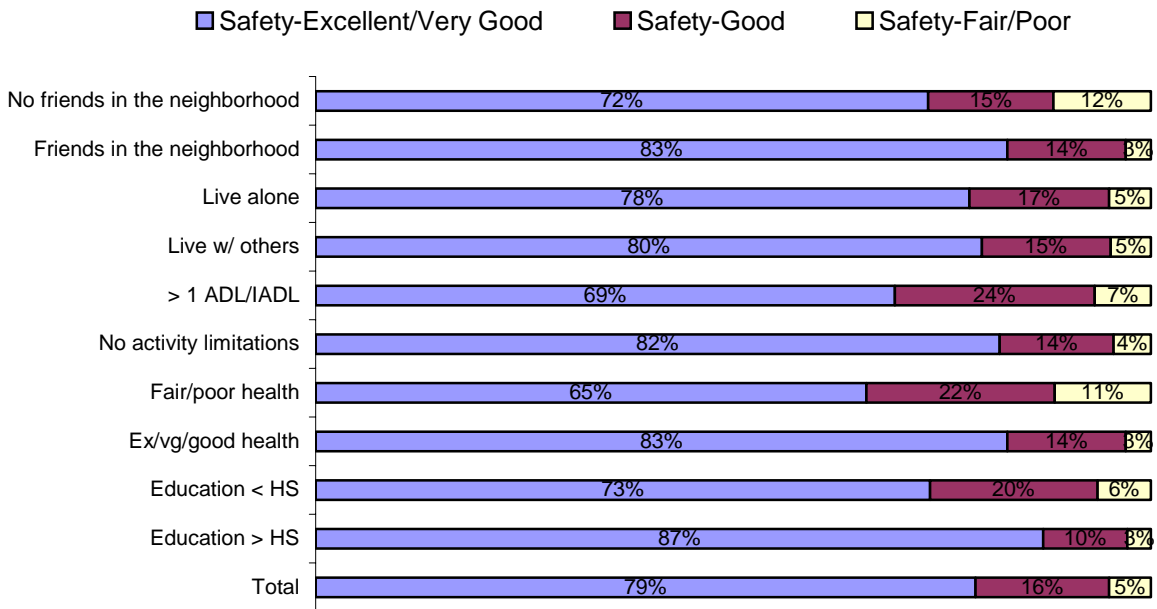
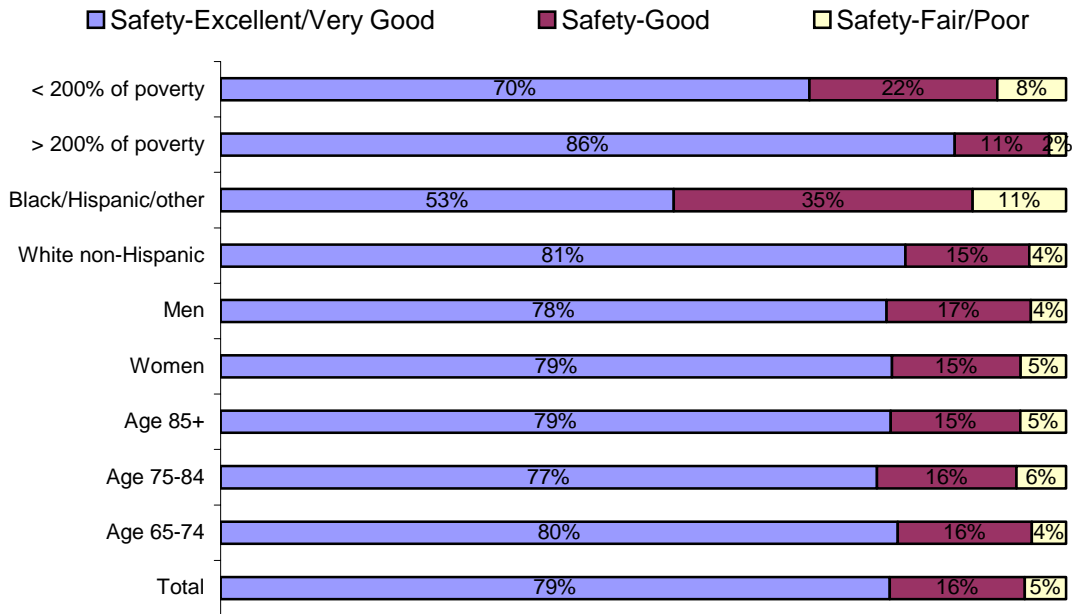
**Exhibit 4.1 - Percentage of People Age 65+ who Feel Safe/Unsafe in their Neighborhood⁴
Kent County 2004**



Survey results show that vulnerable populations including those who do not have friends in the neighborhood, those who are in fair/poor health, and those who are living in poverty were more likely to report feeling unsafe in their neighborhood.

⁴ People were asked whether safety in their neighborhood is excellent, very good, good, fair, or poor. Percentages may not add up to 100% due to rounding and/or missing information.

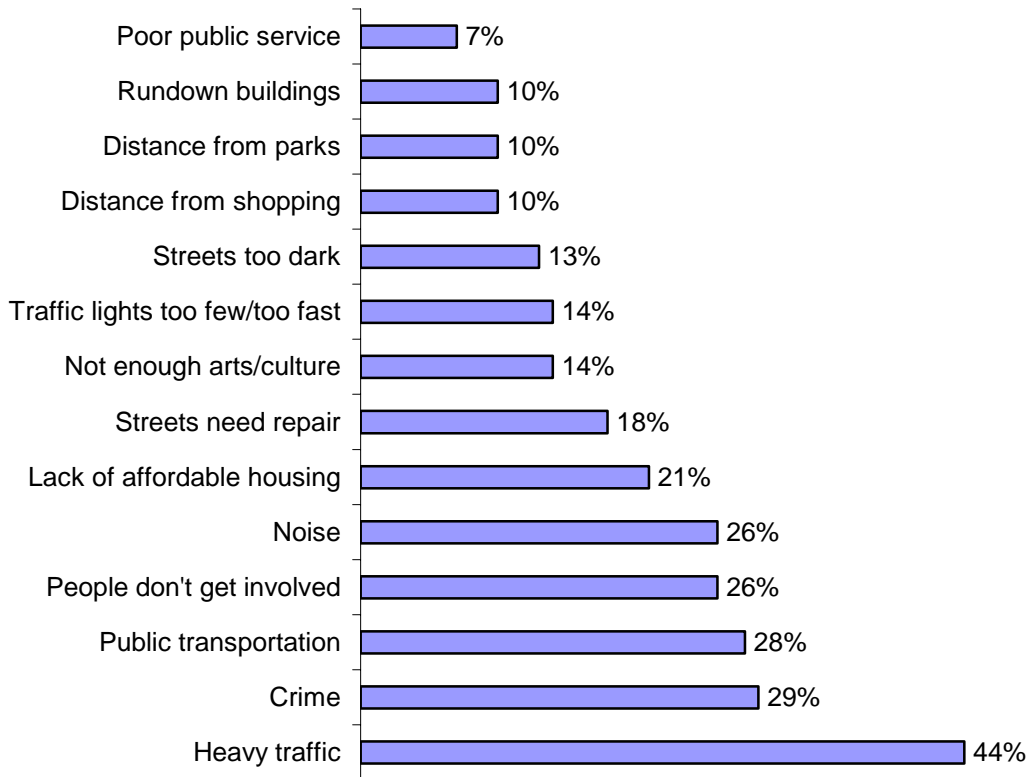
**Exhibit 4.2 - Percentage of People Age 65+ Who Feel Safe/Unsafe in their Neighborhood⁴, By Demographics
Kent County 2004**



Indicator 5) Percentage of people age 65+ who report few/multiple problems in their neighborhood

Kent County seniors experience a number of problems in their neighborhood that affect their quality of life. Nearly half (44%) of the seniors who were surveyed felt heavy traffic was a problem and over one quarter feel that access to public transportation, crime, lack of community involvement, and neighborhood noise is a concern.

**Exhibit 5.1 - Prevalence of Perceived Neighborhood Problems⁵
Kent County 2004**



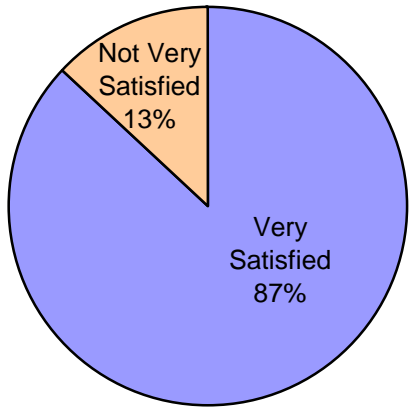
Unweighted N = 554 Weighted N = 62,102

⁵ People were read a list of fourteen neighborhood problems and were asked to indicate whether each item posed a big problem, small problem or no problem in their neighborhood.

Indicator 6) Percentage of people age 65+ who are satisfied with their neighborhood as a place to live

Nearly 9 out of 10 (87%) seniors in Kent County feel that their neighborhood is a satisfactory place to live. Despite the fact that nearly one third (29%) of seniors see crime as a problem, seniors generally still feel good about their homes and neighborhoods.

**Exhibit 6.1 - Percentage of People Age 65+ Who Are Satisfied with their Neighborhood as a Place to Live⁶
Kent County 2004**

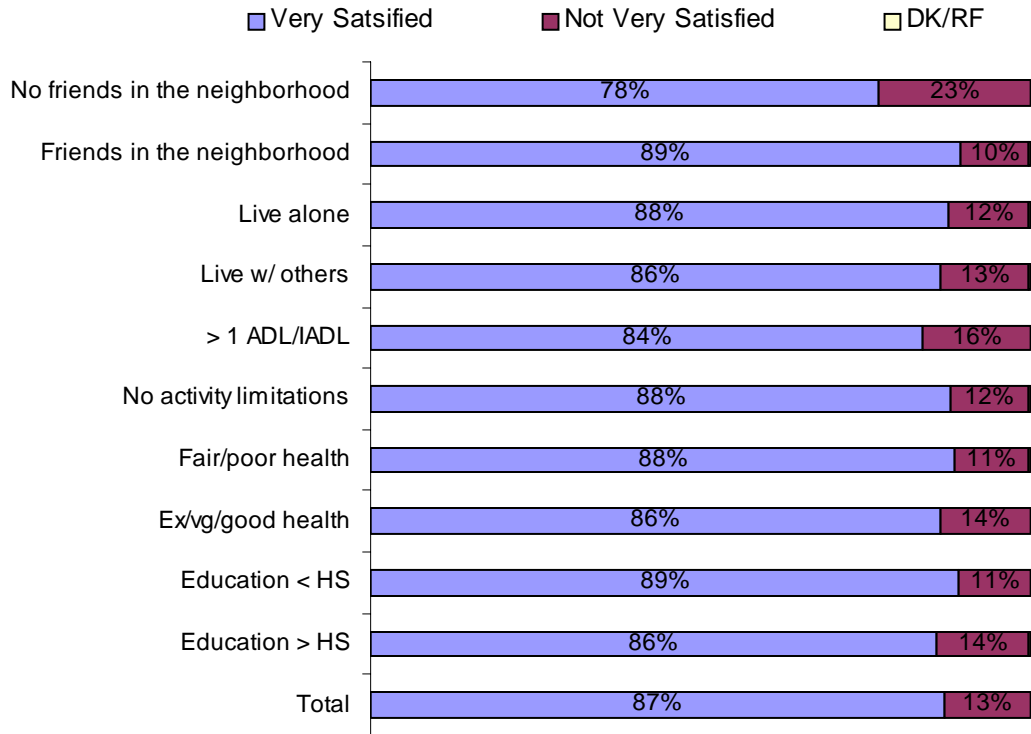
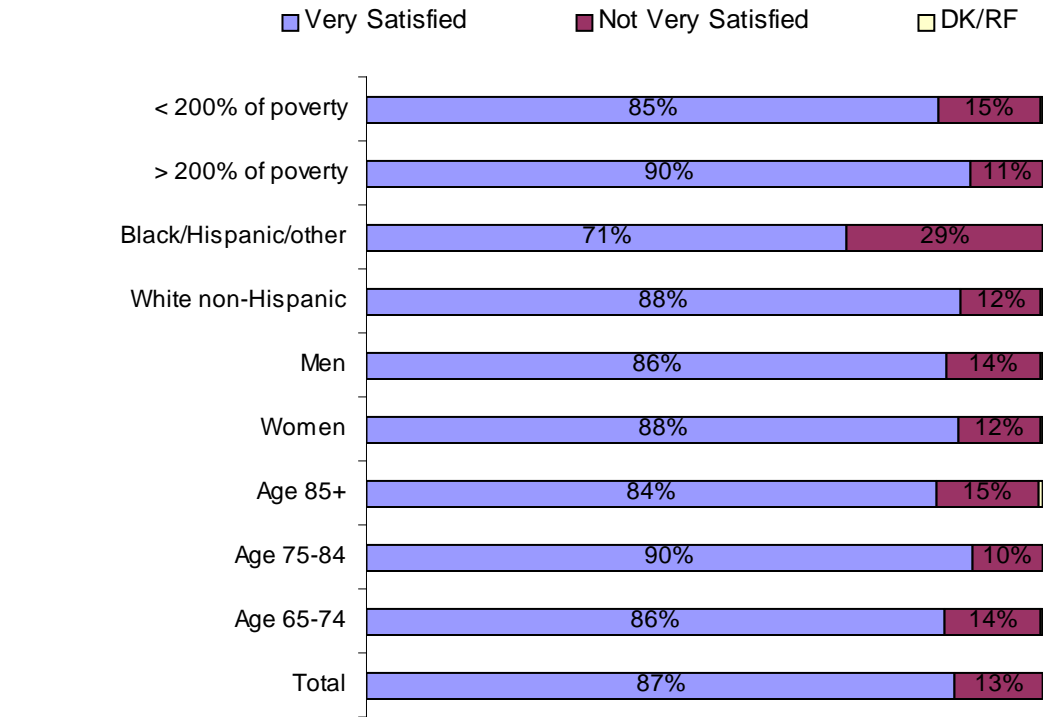


Unweighted N = 554 Weighted N = 62,102

Those most likely to be unsatisfied with their neighborhood were people with no friends in their neighborhood. In addition, Black, Hispanic and respondents of other racial/ethnic backgrounds were more likely to report being unsatisfied than Whites.

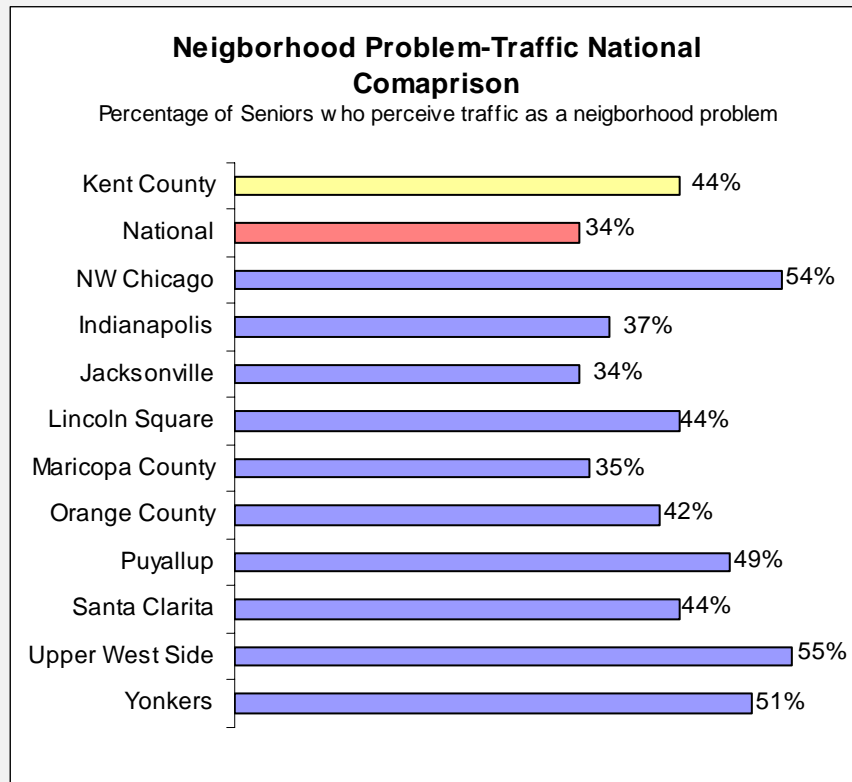
⁶ People were asked how satisfied they are with their neighborhood as a place to live. The category not very satisfied includes those who said they were “somewhat satisfied”, “somewhat dissatisfied”, or very disappointed with their neighborhood.

Exhibit 6.2 – Percentage of People Age 65+ who are Satisfied with their Neighborhood as a Place to Live, by Demographics⁶



Margin of Error ranges from 4.5% - 20% depending on sample size

How Does Kent County Compare?



Dimension 4 People Have Enough to Eat

“As individuals age, they can face a number of barriers when trying to maintain a nutritious diet. Life changes such as loss of a spouse or a diminished sense of taste and smell can reduce an individual’s appetite. They may also deal with increased frailty, making it difficult to prepare meals, or medical conditions that may necessitate special dietary restrictions. A lack of income can compound all these problems by making nutritious foods hard to afford (Kassner, 2003).”

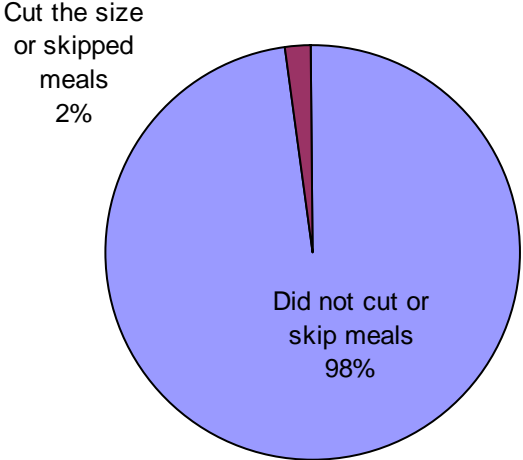
“Despite the existence of federal programs such as the Food Stamp Program, Congregate Meals, Home – Delivered Meals, the Commodity Supplemental Food Program (CSFP), the Child and Adult Care Food Program (CACFP), The Emergency Food Assistance Program (TEFAP), and various local food and nutrition resources,

the U.S. Department of Agriculture estimates that some 1.4 million households with elderly members experience “food insecurity.” This term pertains to persons who have limited or uncertain access to safe, nutritionally adequate food. Food insecurity can lead to malnutrition, which has numerous adverse health consequences (Kassner, 2003).”

Indicator 7) Percentage of people age 65+ who report cutting the size of or skipping meals due to lack of money

Reducing portions or eliminating meals due to monetary hardships creates a domino effect starting with hunger and leading to malnutrition and other adverse health effects. One in fifty Kent County seniors reported having reduced meal sizes or skipping meals because there wasn’t enough money for food in the past year.

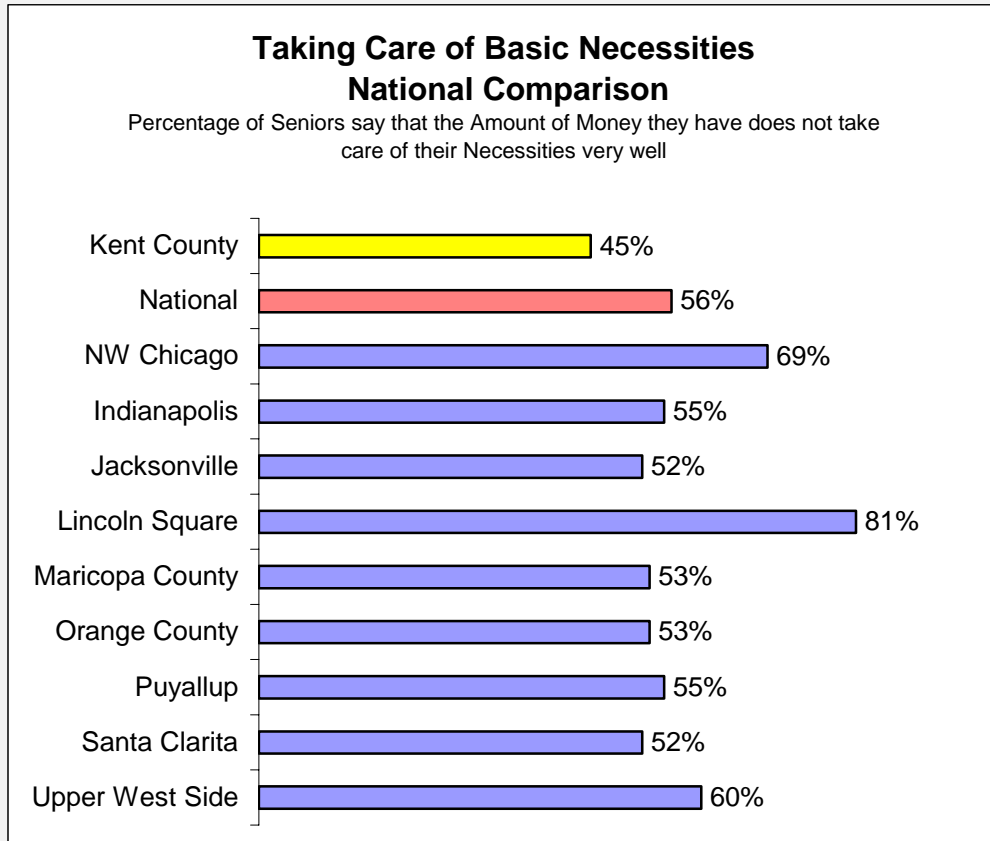
**Exhibit 7.1 - Percentage of People Age 65+ Who Report Cutting the Size of or Skipping Meals Due to Lack of Money⁷
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

⁷ People were asked if in the past 12 months they or another adult in their household cut the size of or skipped meals because there wasn’t enough money or food. Percentages may not add up to 100% due to rounding and/or missing information.

How Does Kent County Compare?



Dimension 5

Assistance Services are Available and Residents Know How to Access Them

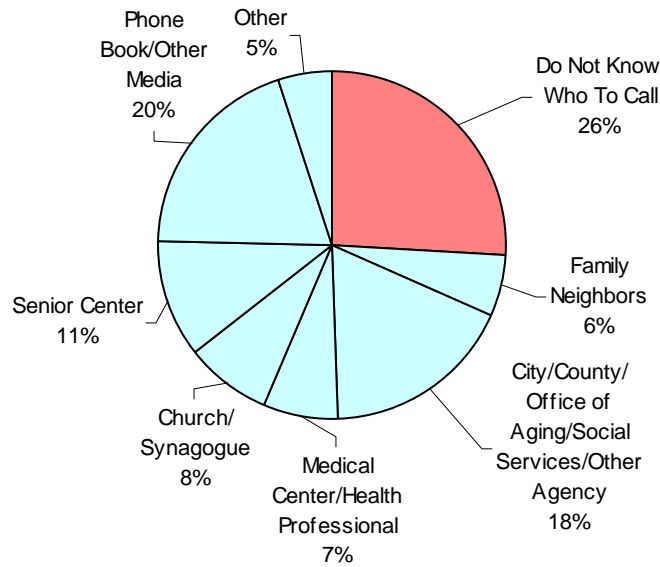
As older adults age, they face declining health which can threaten their ability to live independently. Older adults who live alone, lack family support, are unable to drive, or are confined due to a disability are at risk for becoming isolated from needed services and from the enjoyment of social interactions so vital to their sense of dignity and well-being. “For those fortunate enough to have caring families nearby, their caregivers may face more stress than they can endure. When family, friends or caregivers search for help, they often encounter confusing requirements and eligibility standards as well as exorbitant costs. Those in rural areas face a dearth of available services, and the high cost of travel inhibits the use of what services are available (Commission on Affordable Housing and Health, 2002).”

Sometimes linking an older adult with a daily nutritious meal or a home health care aide who can provide personal care assistance a couple of hours a day is the difference between living at home and at a nursing home (Mokler and Brackenhoff, 2000).

Indicator 8) Percentage of people age 65+ who do not know whom to call if they need information about services in their community

More than a quarter (26%) of seniors in Kent County aged 65 and above do not know whom to call if they need information about services in their community. Kent County seniors most commonly indicated the best resource for service information was the phone book (20%), followed by public and non-profit service agencies (18%).

**Exhibit 8.1 - Percentage of People Age 65+ Who Do Not Know Who To Call if They Need Information About Services in Their Community⁸
Kent County 2004**



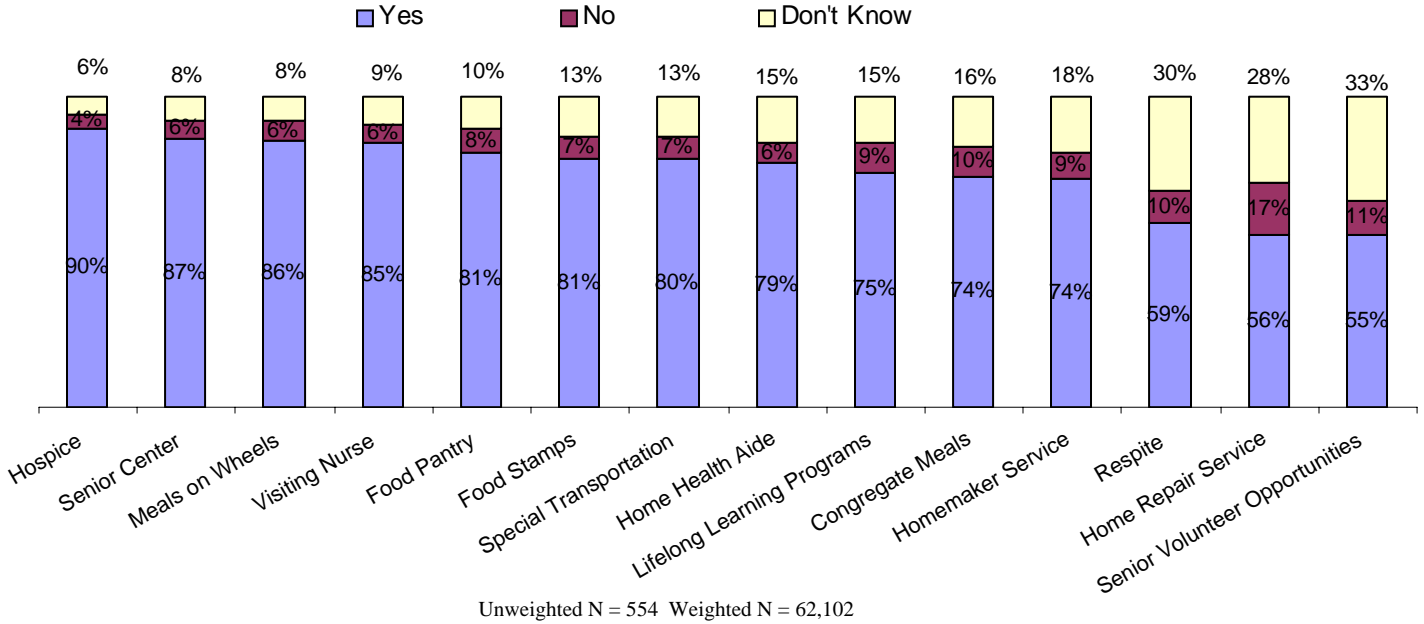
Unweighted N = 554 Weighted N = 62,102

Indicator 9) Percentage of people age 65+ who are aware/unaware of selected services in their community.

In general, Kent County seniors have a high level of awareness when it comes the services in their community. The services they are least familiar with are respite services (59%), home repair services (56%) and Senior Volunteer opportunities (55%).

⁸ People were asked to indicate the best resource, such as a person or an organization, in their city, town, or county to get information on various services. Percentages may not add up to 100% due to rounding and/or missing information.

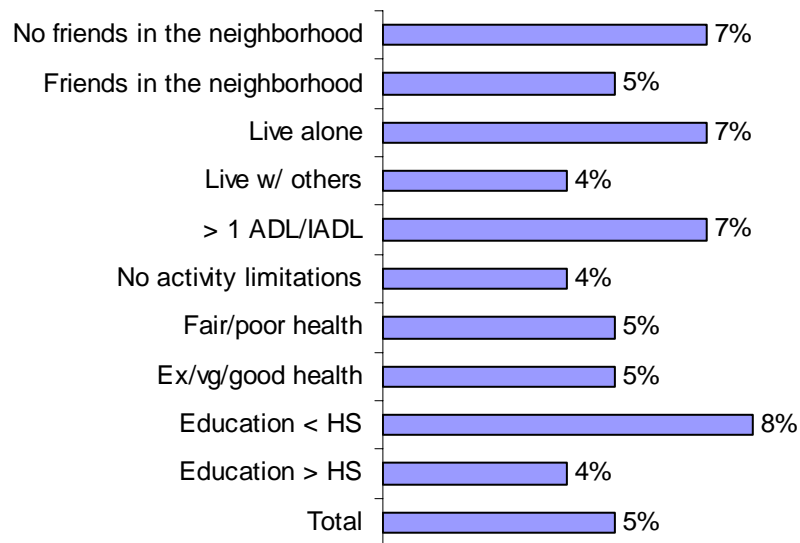
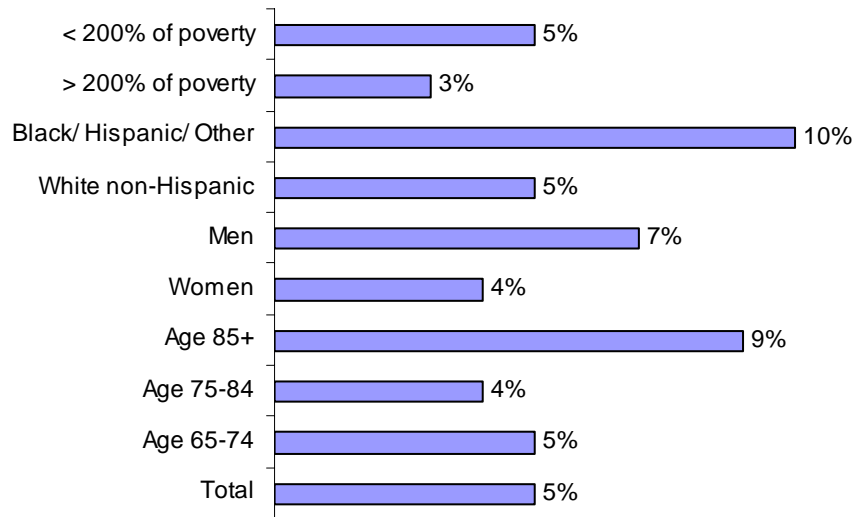
**Exhibit 9.1 - Percentage of People Age 65+ Who are Aware/Unaware of Selected Services in their Community⁹
Kent County 2004**



Those most likely to be unaware of services are the very elderly (85+) and those who have less than a high school education. In addition, Blacks, Hispanics and those of other racial/ethnic backgrounds were less likely to report being aware of services than Whites.

⁹ Respondents were asked whether these 10 services are available in their area. Percentages may not add up to 100% due to rounding and/or missing information.

**Exhibit 9.2 - Percentage of People Age 65+ who Are Unaware of Most Selected Services in their Community⁹, By Demographics
Kent County 2004**

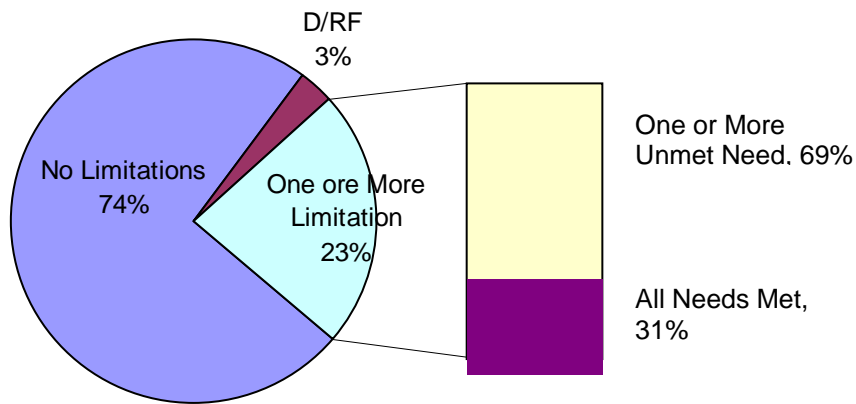


Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 10) Percentage of people age 65+ with adequate assistance in ADL and/or IADL activities

In Kent County, 1 in 4 seniors reported needing assistance with ADL and/or IADL needs. Of those seniors with ADL/IADL needs, less than a third are receiving the assistance they need.

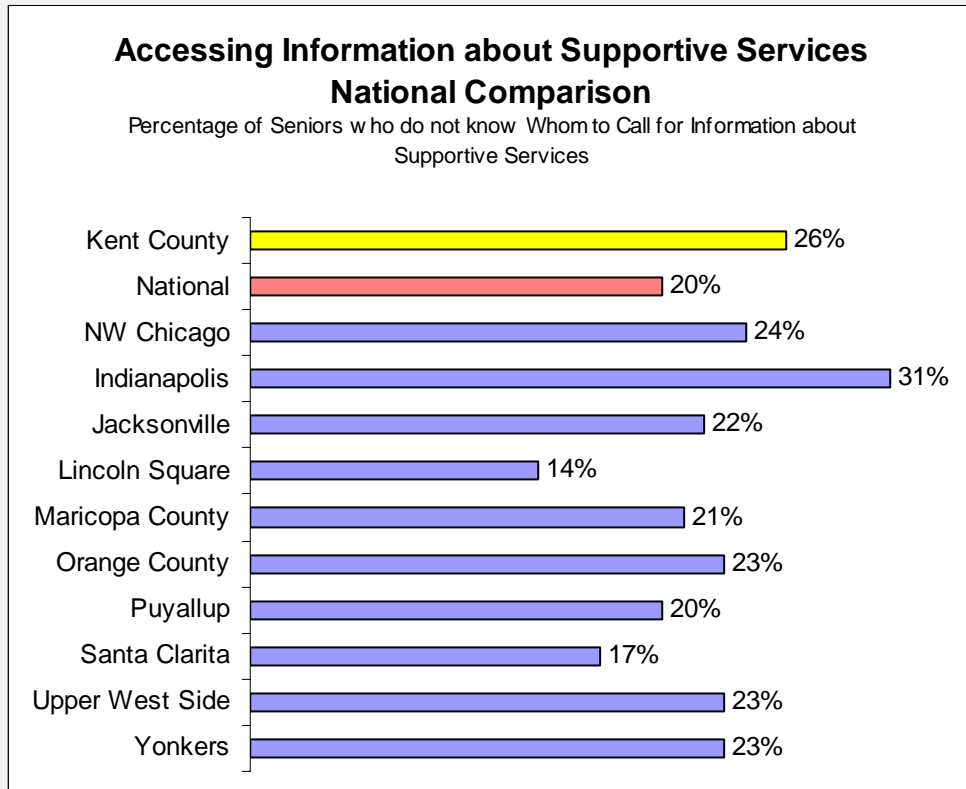
**Exhibit 10.1 - Percentage of People Age 65+ with Adequate Assistance in ADL and/or IADL Activities¹⁰
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

¹⁰ People were asked whether they need assistance with the following activities: ADLs – taking a bath or shower, dressing, eating, getting in/out of bed/chair, using/getting to a toilet, getting around inside the home and IADLs – going outside the home, doing light housework, preparing meals, driving a car/using public transportation, taking the right amount of prescribed medication, keeping track of money and bills. People who answered “yes” were asked whether they get enough assistance with these activities. Unmet need was defined as not getting help or not getting enough help for one or more ADL and/or IADL for which assistance was needed.

How Does Kent County Compare?



Dimension 6

Community Promotes and Provides Access to Necessary & Preventative Health Services

Today, America's older adults can expect to live significantly longer lives than they have in the past. In fact, adults older than 85 years are the fastest-growing part of the population; by 2030, they are expected to number 8.5 million. The increasing number of older Americans is expected to strain this country's resources and capacity to care for them all. Already, those older than 65 account for about one third of our national health care spending. By 2030, it is estimated an additional \$400 to \$500 billion will need to be spent on health care for this older population.

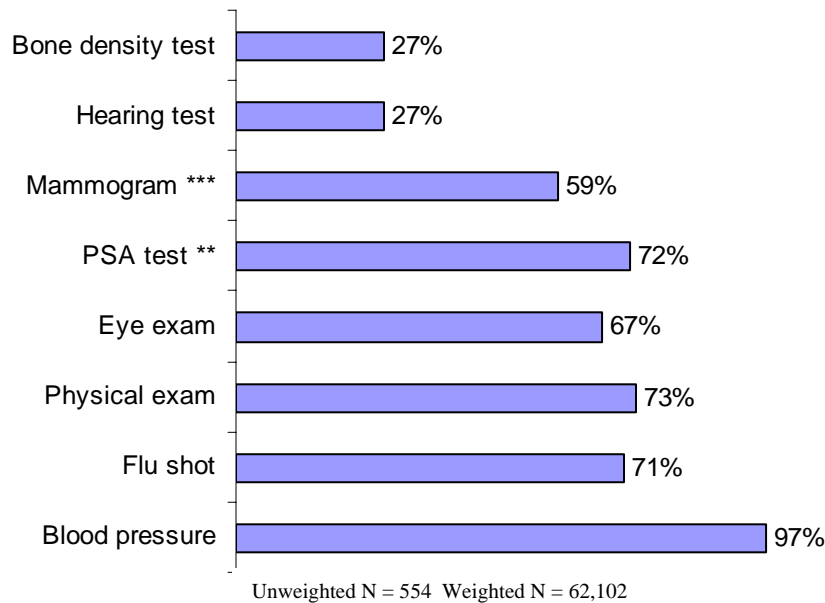
Increased longevity is due, in part, to a declining number of deaths from heart disease and stroke. However, there is a growing number of elderly who report functional and activity limitations or experience dementia. In many cases, these "extra" years of life are neither healthy nor active ones. However, according to the Center for Disease Prevention and Health Promotion, lifestyle changes and an increased emphasis on preventative health services could reverse the trends of increasing chronic disease, disability, and death.

Indicator 11) Rates of Screening and Vaccination for Various Conditions among People 65+

In 2004, the Center for Disease Prevention and Health Promotion reported that many preventative health services including flu immunizations, mammograms, and colorectal cancer screenings are under utilized by seniors. Therefore, a community that makes preventative health services easily accessible to seniors could increase the quality of many lives.

In Kent County, adults aged 65 years and older received the following preventative services over the past year. While the vast majority (97%) had their blood pressure taken, only 27% of seniors had their hearing tested within this past year.

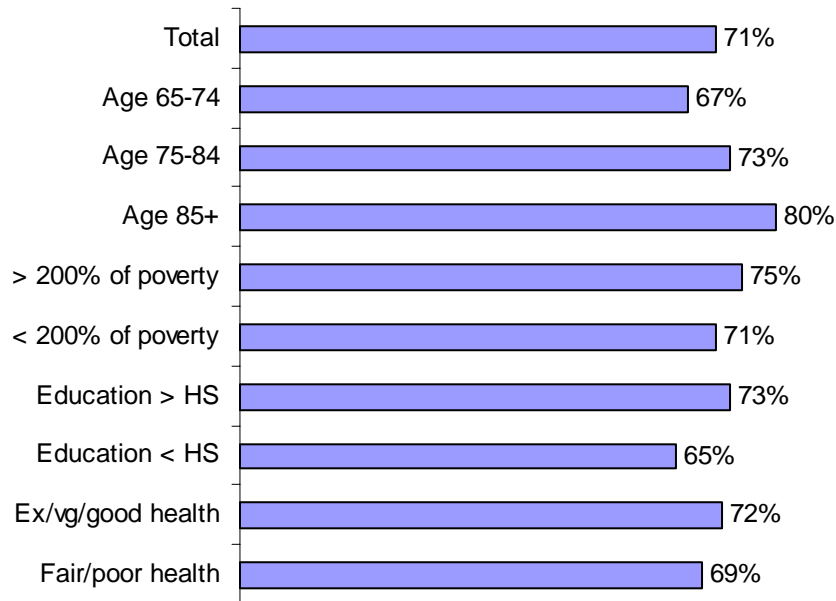
**Exhibit 11.1 - Rates of Screening and Vaccinations for Various Conditions
among People Age 65 and Older¹¹
Kent County 2004**



Influenza, or the flu, is a highly contagious viral infection. Influenza is easily spread from person to person. Annually, between 10% - 20% of the population contract the flu. Influenza may lead to hospitalization or even death, especially among the elderly. According to a fact sheet developed by the National Coalition for Adult Immunization, the flu vaccine can prevent up to 50%-60% of hospitalizations and 80% of deaths from influenza-related complications among the elderly (National Foundation for Infectious Diseases, 2004). In Kent County over this past year, 71% of the people 65 years of age and older received a flu vaccination. Those most likely to have gotten a flu shot were people age 85 and older.

¹¹ People were asked whether they had any of the preventative measures or tests above in the past 12 months. **PSA (Prostate Cancer Screening) test was only asked of men. ***Mammogram was only asked of women.

**Exhibit 11.2 - Percentage of People Aged 65+ who had a Flu Vaccination
in the Past Year, by Demographics
Kent County 2004**



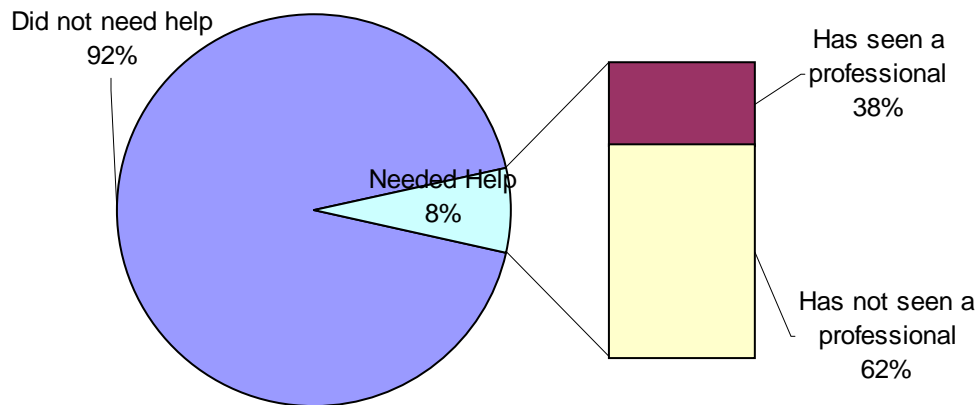
Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 12) Percentage of people age 65+ who thought they needed the help of a health care professional because they felt depressed or anxious and have not seen one.

According to a report by the Federal Interagency Forum on Aging Related Statistics, depression in older Americans is an important indicator of general well-being and mental health. Higher levels of depressive symptoms are associated with higher rates of physical illness, greater functional disability, and higher health care resource utilization (Federal Interagency Forum on Aging-Related Statistics, 2000).

The majority of Kent County’s senior population (92%) did not require the help of a health professional or a counselor to treat depression or anxiety over this past year. For the remaining 8% that noted needing help; 62% sought professional care while 38% did not.

**Exhibit 12.1 - Percentage of People Age 65+ who thought they needed the Help of a Health Care Professional because they felt Depressed or Anxious and have Not Seen One (for those symptoms)¹²
Kent County 2004**

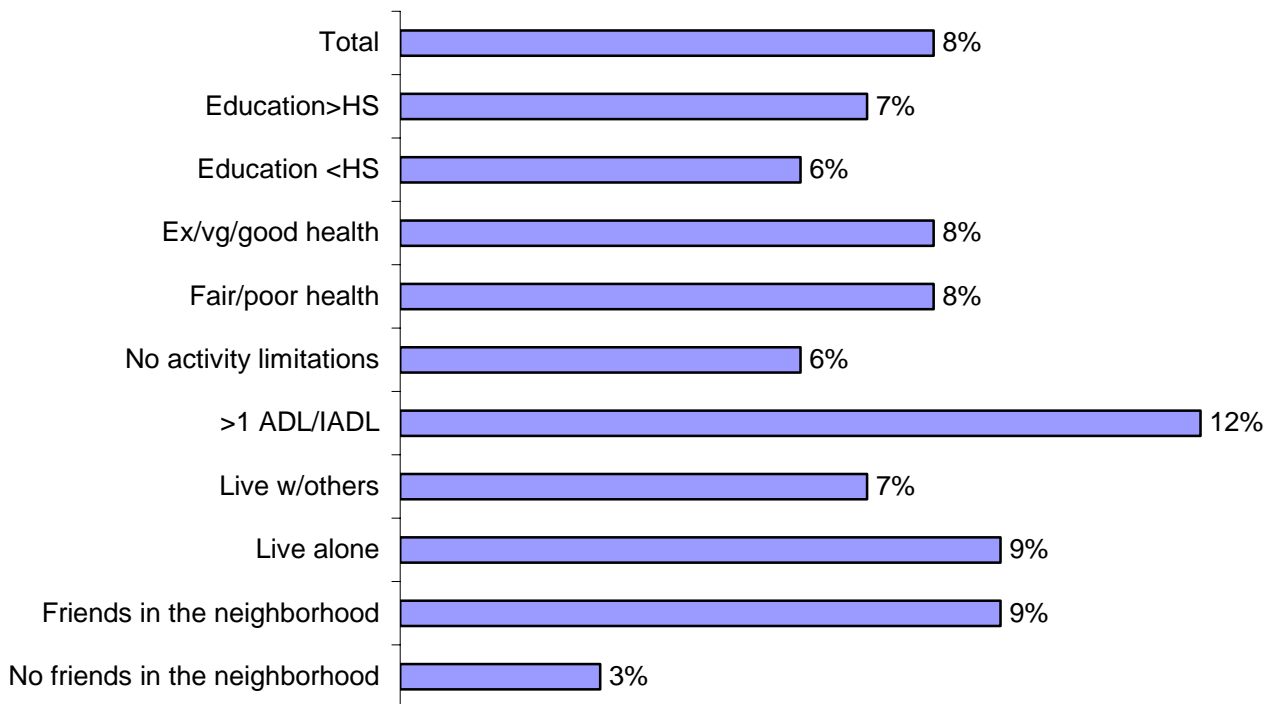
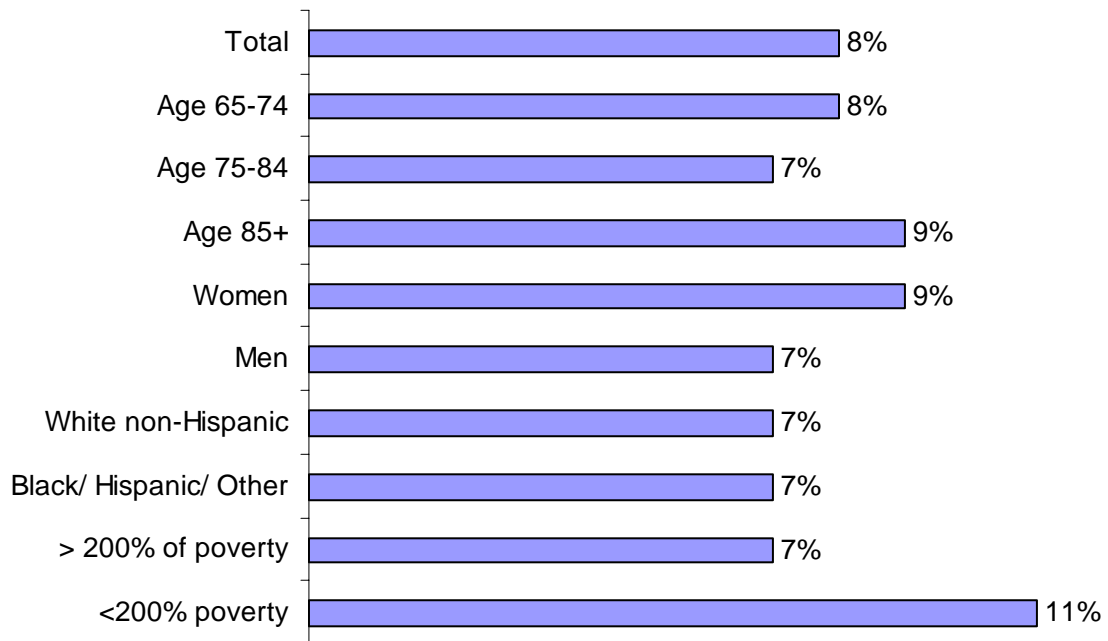


Unweighted N = 554 Weighted N = 62,102

Comparing those with ADL/IADL limitations to those without ADL/IADL limitations, twice as many of those with limitations reported needing help. Somewhat unexpectedly, a higher percentage of those needing help reported having friends in the neighborhood as opposed to those with friends.

¹² People were asked whether in the past year, there was a time when they thought they needed the help of a health professional or counselor because they felt depressed or anxious. People who answered “yes” were asked whether they obtained the professional help or counseling they needed. Percentages may not add up to 100% due to rounding or missing information. It should be noted that this question asked in a manner consistent with the Center For Disease Control’s Behavioral Risk Factor Survey.

**Exhibit 12.2 - Number of People 65+ Who Thought they needed the Help of a Health Professional or Counselor due to Depression or Anxiety, by Demographics²
Kent County 2004**



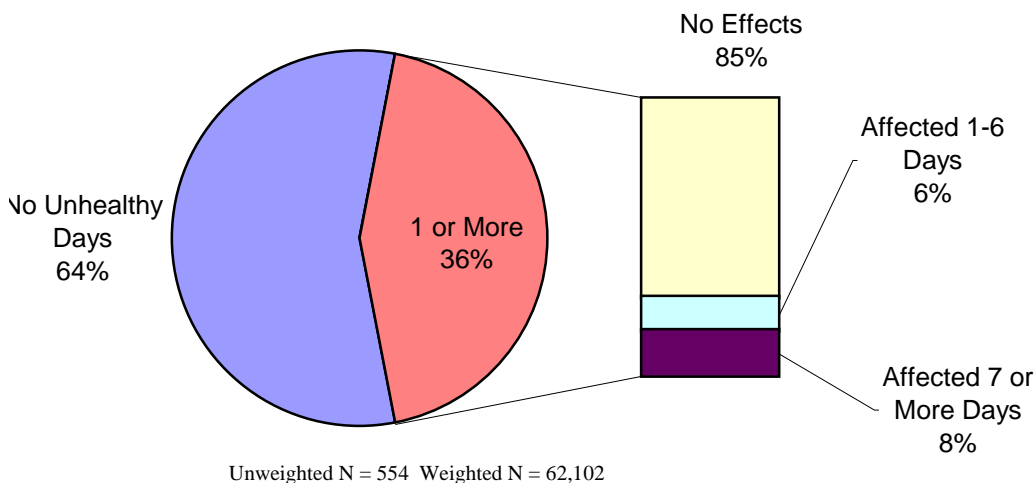
Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 13) Percentage of people age 65+ whose physical or mental health interfered with their activities in the past month.

Functioning in later years may be diminished if illness, chronic disease, or injury limits physical and/or mental abilities. Changes in disability rates have important implications for work and retirement policies, health and long-term care needs, and the social well-being of the older population. By monitoring and understanding these trends, policymakers are better able to make informed decisions (Federal Interagency Forum on Aging-Related Statistics, 2000).

Fourteen percent of Kent County respondents reported experiencing one or more unhealthy days over the past month where their mental or physical health interfered with their activities.

**Exhibit 13.1 - Percentage of People Age 65+ whose Physical or Mental Health Interfered with their Activities in the Past Month¹³
Kent County 2004**

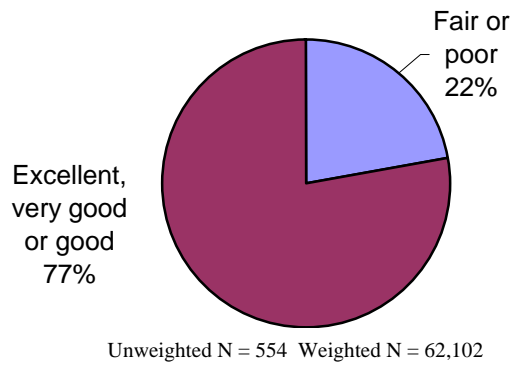


Indicator 14) Percentage of people who report being in good to excellent health.

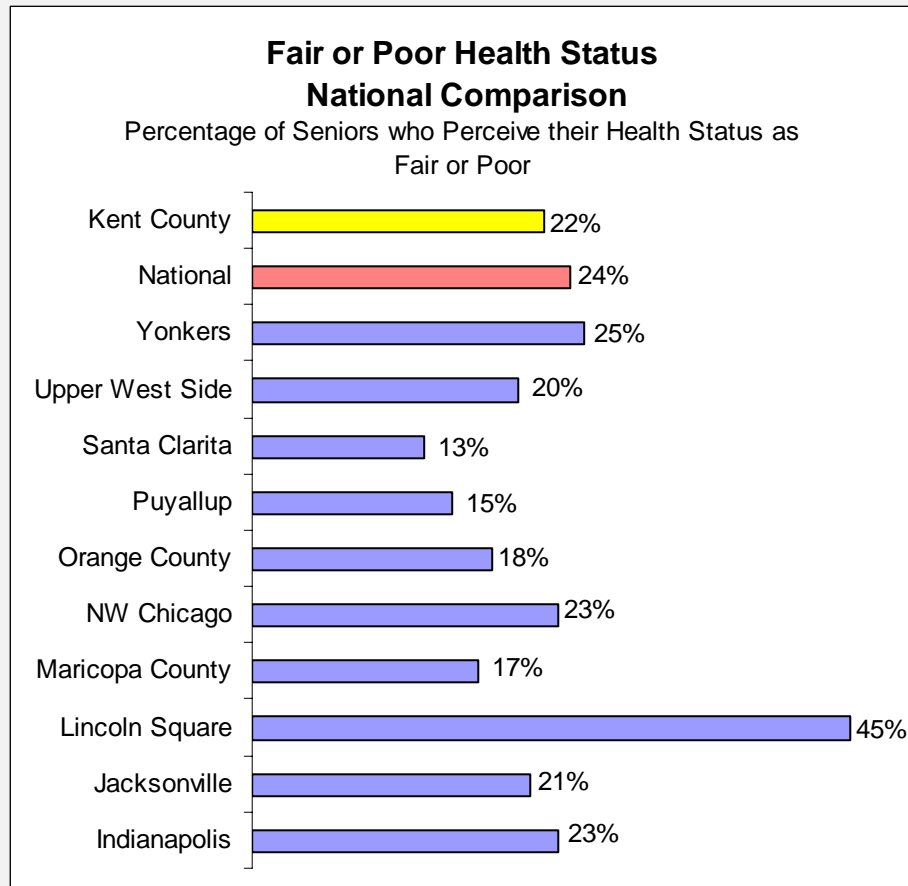
A self-rated health status is frequently captured on surveys. Researchers have found that self-reports of “good” to “excellent” health correlate with a lower risk of mortality. In Kent County, 77% of older adults report being in “excellent, very good, or good” health.

¹³ The number of “unhealthy days” is based on a summary index from the following two questions: 1. “Now, thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?” and 2. “Now, thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?” People who had one or more “unhealthy” days were asked “During the past 30 days, for how many days did poor physical or mental health keep you from doing your usual activities, such as self care, work, or recreation? Percentages may not add up to 100% due to rounding and/or missing information.

**Exhibit 14.1 - Percentage of People who Report Being in Good to Excellent Health¹⁴
Kent County 2004**



How Does Kent County Compare?



¹⁴ People were asked: "Would you say that, in general, your health is Excellent, Very good, Good, Fair, Poor or Very Poor?"

Dimension 7

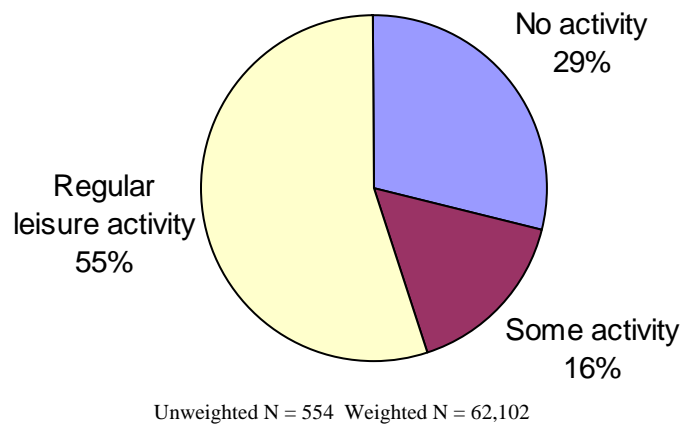
Opportunities for Physical Activity are Available and Used

According to the National Center for Disease Prevention and Health Promotion, physical activity is one of the most important steps older adults can take to maintain physical and mental health, and their quality of life. Staying active can help reduce the risk of obesity, high blood pressure, diabetes, osteoporosis, stroke, depression, colon cancer, and premature death. Additional benefits of cardiovascular and strength training for seniors include: helping seniors maintain the ability to live independently, reducing the risk of falling and fracturing bones, reducing symptoms of anxiety and depression and fostering improved mood and feeling of well-being. In addition, exercise helps maintain healthy bones, muscles, and joints and helps control joint swelling and pain associated with arthritis.

Indicator 15) Percentage of people age 65+ who participate in regular physical exercise

Research has shown that even among frail and very old adults, mobility and functioning can be improved through physical activity (Federal Interagency Forum on Aging-Related Statistics, 2000). Most (71%) of the seniors in Kent County report participation in some form of physical activity.

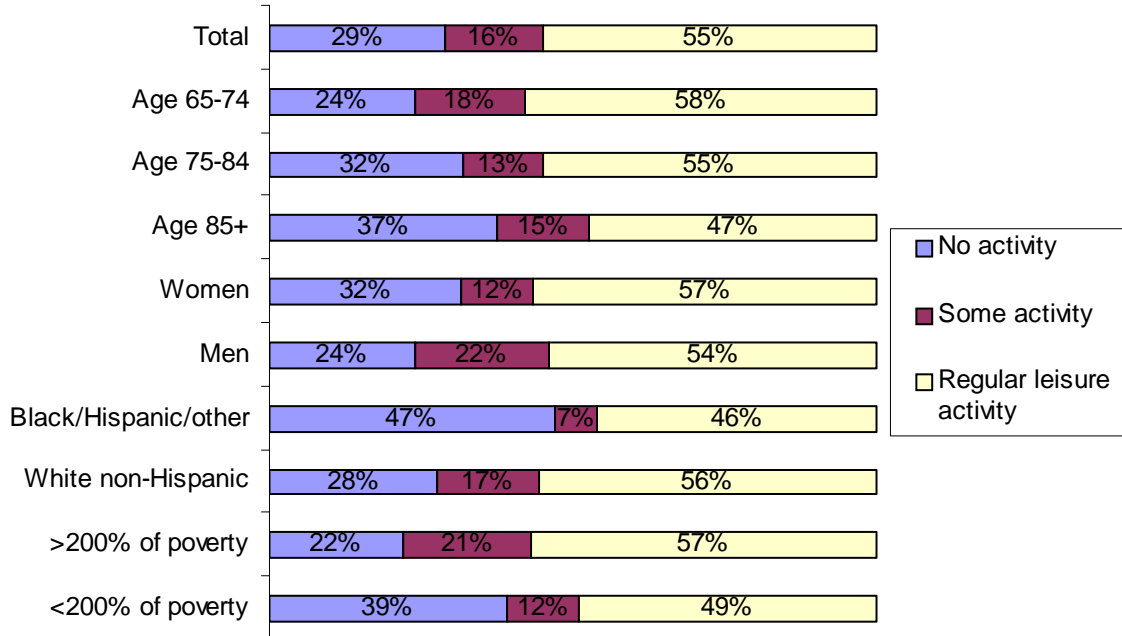
**Exhibit 15.1 - Percentage of People Age 65+ who Participate in Regular Physical Exercise¹⁵
Kent County 2004**



In general, leisure activity on a regular basis decreased with age. In addition, seniors living in poverty and Blacks, Hispanics and those of other racial/ethnic backgrounds were less likely to engage in physical activity than Whites and those living above the 200% above poverty mark.

¹⁵ “Regular leisure time activity” is defined as 1) light or moderate activity that causes light sweating or a light to moderate increase in breathing or heart rate and occurs five or more times per week for at least 30 minutes each time, and/or 2) vigorous activity that causes heavy sweating or large increases in breathing or heart rate and occurs three or more times per week for at least 20 minutes each time. People who engage in combinations of the two types of physical activities described above are included in the category “some activity.” Those who are unable to or do not engage in physical activity are included in the category “no activity.”

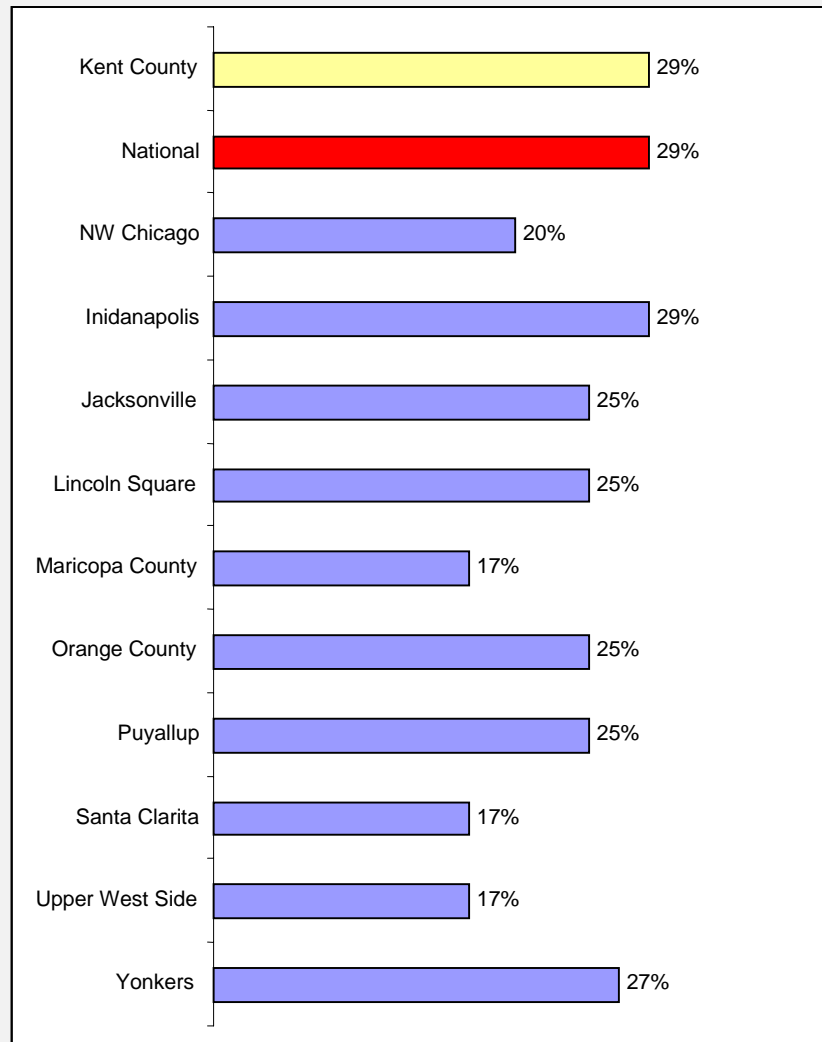
**Exhibit 15.2 - Percentage of People Age 65+ who Participate in Regular Physical Exercise⁵, by Demographics
Kent County 2004**



Margin of Error ranges from 4.5% - 20% depending on sample size

How Does Kent County Compare?

Percentage of Seniors who Seldom or Never Engage in Regular Physical Exercise
National Comparison



Dimension 8

Obstacles to Use of Necessary Medical Care are Minimized

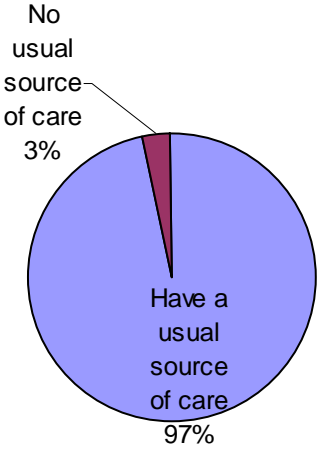
Life expectancies have increased for U.S. residents. With this increased life expectancy comes an increase in the number of people who live with chronic illness and disability. According to the Center for Disease Control, at least 80% of seniors live with at least one chronic condition. Fifty percent of seniors report having at least two (US Census Bureau, 2002).

An increase in the number of people living with chronic illness and disability and the increase in life expectancy has created an upward pressure on health care costs. According to the Center for Disease Control, health care expenditures for a 65 year old are four times those for a 40 year old (Center for Disease Control, 2004). Low-income seniors, or those without adequate health insurance, are at highest risk for not receiving needed medical care. A survey conducted by National Public Radio, the Kaiser Family Foundation, and Harvard’s Kennedy School of Government, found that many families in America reported problems with the health care system including 22% who reported postponing seeking health care, 21% who had problems paying their medical bills, and 15% who did not get a prescription drug they needed. The survey found that families who had no insurance, were low income or had less education were most likely to report problems with access to health care (Kennedy School of Government, 2002).

Indicator 16) Percentage of people age 65+ with a usual source of care.

According to National Center for Health Statistics, the majority of elderly persons utilize a private doctor for their regular care. NCHS’s studies have revealed that the most common reason for having no usual source of care is “Do not need doctor”. Other reasons cited by NCHS include lack of availability, knowledge, inconvenience of care, lack of insurance and mistrust of doctors. A vast majority (97%) of those aged 65 years and older in Kent County have a usual source of care.

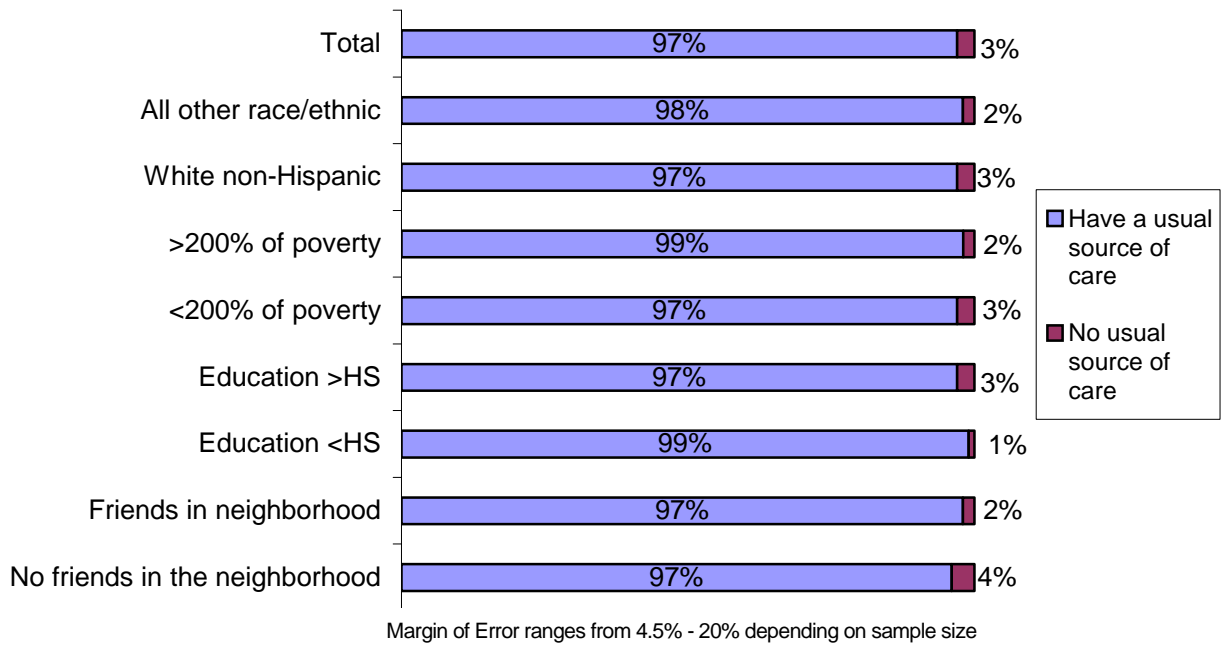
**Exhibit 16.1 – Percentage of People Age 65+ with a Usual Source of Care¹⁶
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

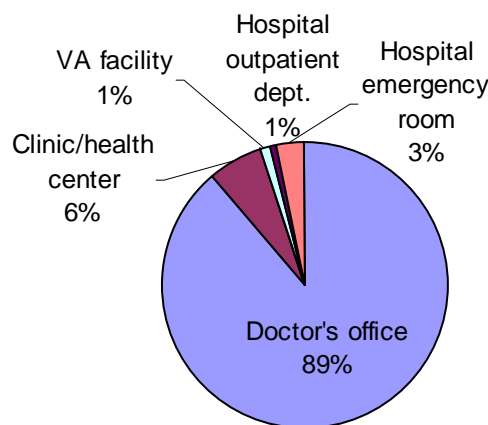
¹⁶ People were asked whether there is a place that they usually go when they are sick or need advice about their health

**Exhibit 16.2 – Percentage of People Age 65+ with a Usual Source of Care, by Demographics⁶
Kent County 2004**



Like the national findings, a majority (89%) of these individuals identified a private doctor as their regular source of care. Ninety percent of female and 88% of male respondents noted having a private doctor as their regular source of care.

**Exhibit 16.3 - Source of Care Most Regularly Used¹⁷
Kent County 2004**



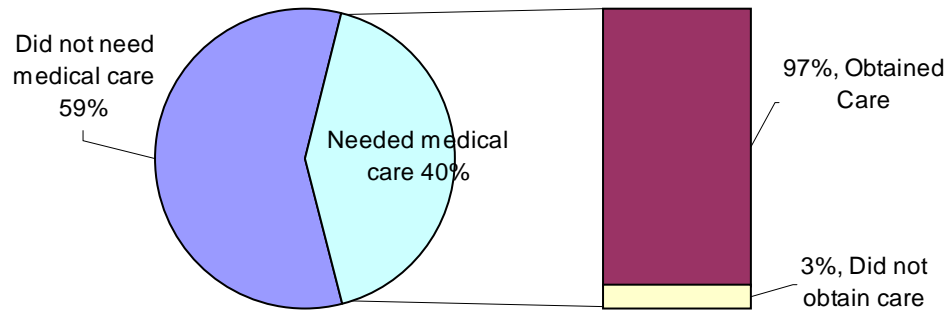
Unweighted N = 554 Weighted N = 62,102

¹⁷ People were asked what kind of place they go to most often – a clinic, doctor’s office, emergency room, or some other place

Indicator 17) Percentage of people age 65+ who obtained needed medical care.

Forty percent of Kent County respondents affirmed needing medical care in the past year. Of that 40%, the vast majority (97%) sought a medical professional when feeling sick.

**Exhibit 17.1 - Percentage of People Age 65+ who Obtained Needed Medical Care¹⁸
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

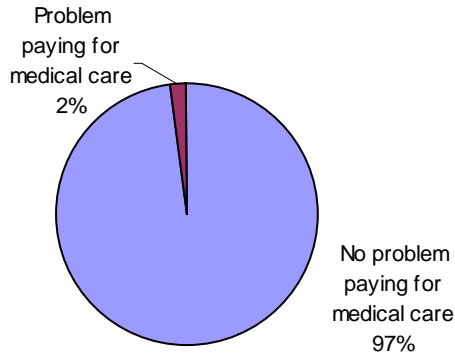
Indicator 18) Percentage of people age 65+ who had problems paying for medical care

Health care can be a major expense for older Americans, especially for individuals with limited income who have a chronic condition or disability. Expenditures on health care include the cost of physicians' services, hospitalizations, home health care, medications and any other goods and services used in the treatment or prevention of disease. The amount of money older Americans spend on health care and the type of health care they receive provide an indication of the health status and needs of older Americans in different age and income groups (Federal Interagency Forum on Aging-Related Statistics, 2000).

Though approximately 97% of Kent County seniors have no problem paying for medical care, 2% reported that they were struggling.

¹⁸ People were asked whether in the past year there was a time when they thought they needed medical care because they felt sick. People who answered "yes" were asked whether they saw a medical professional when they felt sick.

**Exhibit 18.1 - Percentage of People Age 65+ who had Problems Paying for Medical Care, by Demographics¹⁹
Kent County 2004**

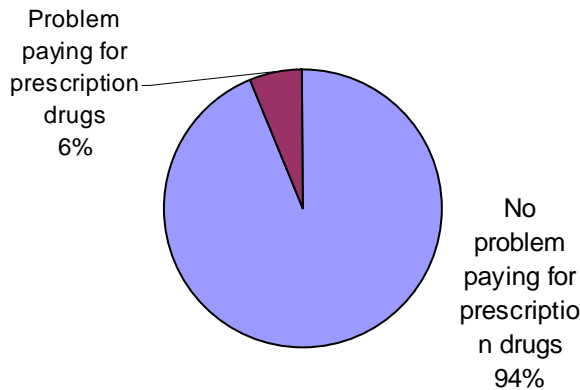


Unweighted N = 554 Weighted N = 62,102

Indicator 19) Percentage of people age 65+ who had problems paying for prescription drugs.

According to the Monthly Labor Review, out-of-pocket spending on prescription drugs increased 411% between 1970 and 1997. Prescription drugs represent the second largest component of out-of-pocket spending on health care, after health insurance premium payments (Fan, J., Sharpe, D., and Hong, G., 2003). While 94% of Kent County respondents have no problem paying for prescription medications, the 6% who do are more likely to be a member of a minority population; in fair or poor health; or needing assistance with their activities of daily living.

**Exhibit 19.1 - Percentage of People Age 65+ who had Problems Paying for Prescription Drugs, by Demographics²⁰
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

¹⁹ People were asked whether there was a time in the past 12 months when they did not have enough money to follow up on tests or treatment recommended by a doctor. Percentages may not add up to 100% due to rounding and/or missing information.

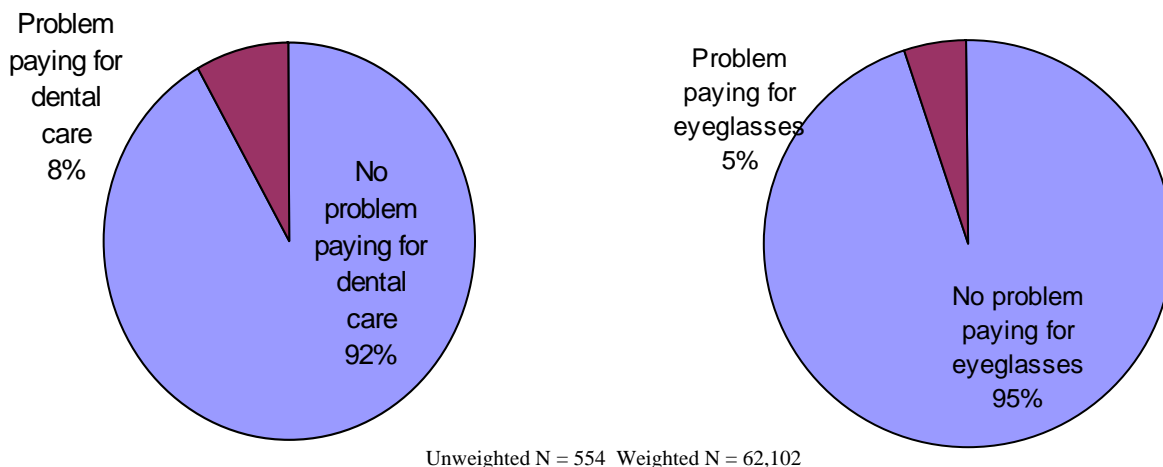
²⁰ People were asked whether there was a time in the past 12 months when they did not have enough money to fill a prescription for medicine.

Indicator 20) Percentage of people age 65+ who had problems paying for dental care.

Oral health and vision are important but often overlooked components of an older adult's general health and well-being. Oral health problems can cause pain and suffering as well as, difficulty in speaking, chewing, swallowing, and maintaining a nutritious diet (Center for Disease Control 1999). Likewise, vision impairments affect nearly all of life's daily activities.

In Kent County 8% of people aged 65 years and older report struggling to pay for dental care and 5% reported struggling to pay for eyeglasses.

Exhibit 20.1 - Percentage of People Age 65+ who had Problems Paying for Dental Care²¹ or Eyeglasses²² Kent County 2004



Dimension 9 Palliative Care Services are Available and Advertised

Palliative care is often associated with the hospice movement that began in the United States in the 1970s. Palliative medical care does not focus on the cure of disease, instead it focuses on the management of medical issues such as pain control. In addition, it seeks to address the patient's psychological, social and spiritual concerns. Barriers to accessing appropriate palliative care could include failure of the medical community to offer the option, policy and regulatory barriers, and finally, patient's own resistance to focusing on end of life care (Jennings et al., 2003).

²¹ People were asked whether in the past 12 months they did not have enough money to obtain dental care (including checkups)

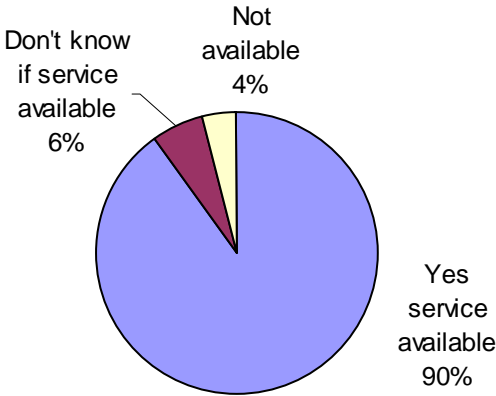
²² People were asked whether there was a time in the past 12 months when they did not have enough money to obtain eyeglasses.

Indicator 21) Percentage of people age 65+ who know whether palliative care services are available.

National Hospice Foundation reports that many people are not aware that there is an all inclusive hospice care benefit available to Americans through the Medicare program. This service enables Americans and their families to receive quality end of life care that provides comfort, compassion and dignity.

Perhaps prior to understanding the intricacies of the hospice mission or the hospice care benefit comes the fundamental realization of whether end of life or hospice services are even available. In Kent County 90% of respondents reported being aware that this type of palliative care is available.

**Exhibit 21.1 - Percentage of People Age 65+ who Know whether Palliative Care Services are Available²³
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

In the last 12 months, approximately 2% of those who knew about hospice services reported using those services.

²³ People were asked whether end of life or hospice care service is available in their area

Dimension 11

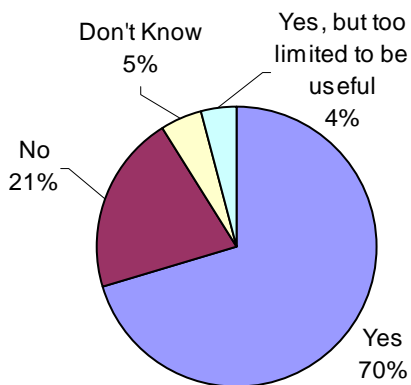
Transportation is Accessible and Affordable

Across the United States, transportation is one of the most common needs vocalized by older people. Senior transportation programs make it possible for individuals who do not drive or whose physical condition prohibits them from using public transportation for essential day-to-day trips, such as medical appointments, business errands, shopping and senior activities. The ability to move freely from place to place, while often taken for granted, is crucial to the well-being of older people. While some older adults rely on family and friends for transportation, others rely on public and volunteer transportation alternatives to maintain their mobility and independence (Administration on Aging, 2004).

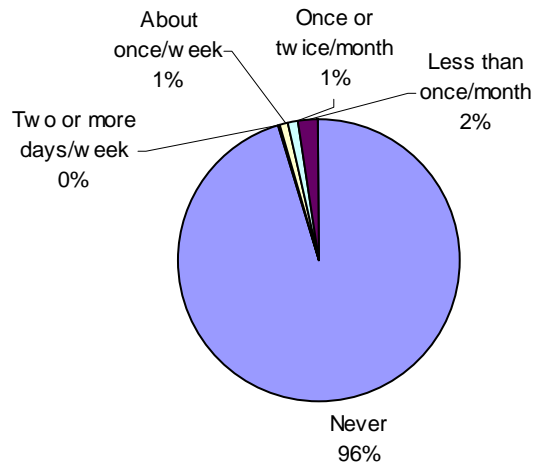
Indicator 22) Percentage of People Age 65+ who have Access to Public Transportation

Most (70%) people in Kent County reported that public transportation service, excluding taxi service, is available in the community although less than 1% of seniors report using it weekly. Despite the fact that Kent County’s population of older adults is largely aware of public transportation’s availability, only four percent reported utilizing the services in the past two months.

**Exhibit 22.1 - Access to Public Transportation in the Community
Kent County 2004**



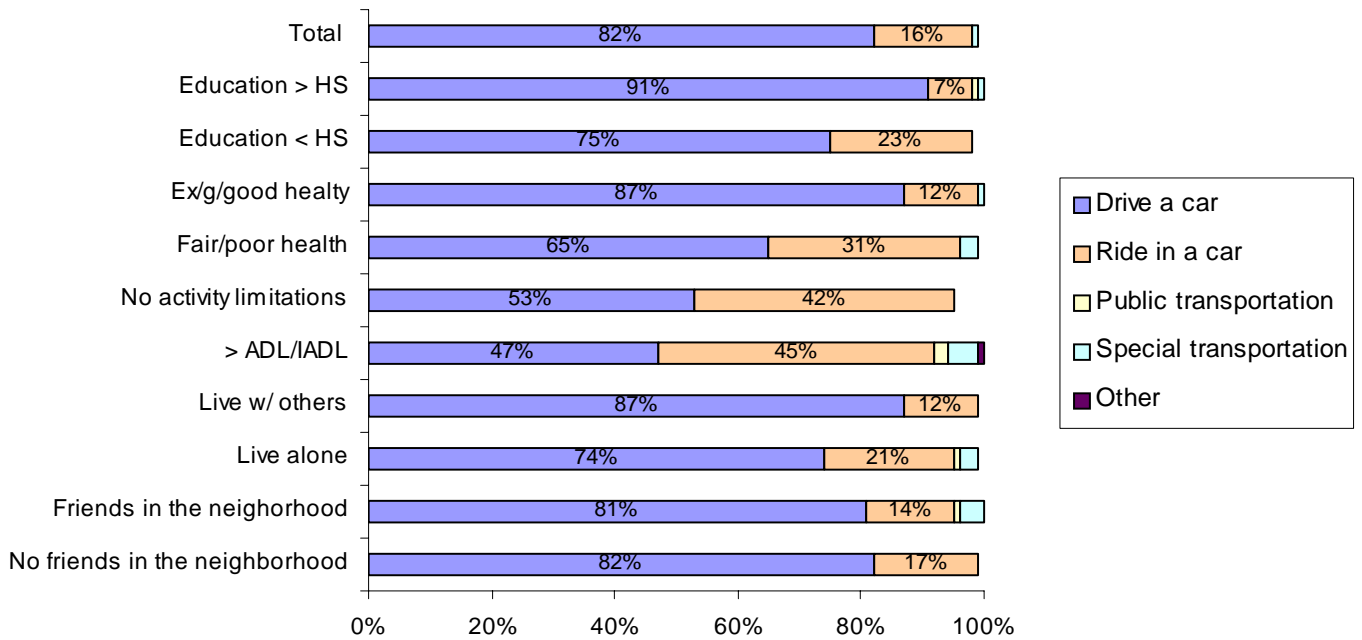
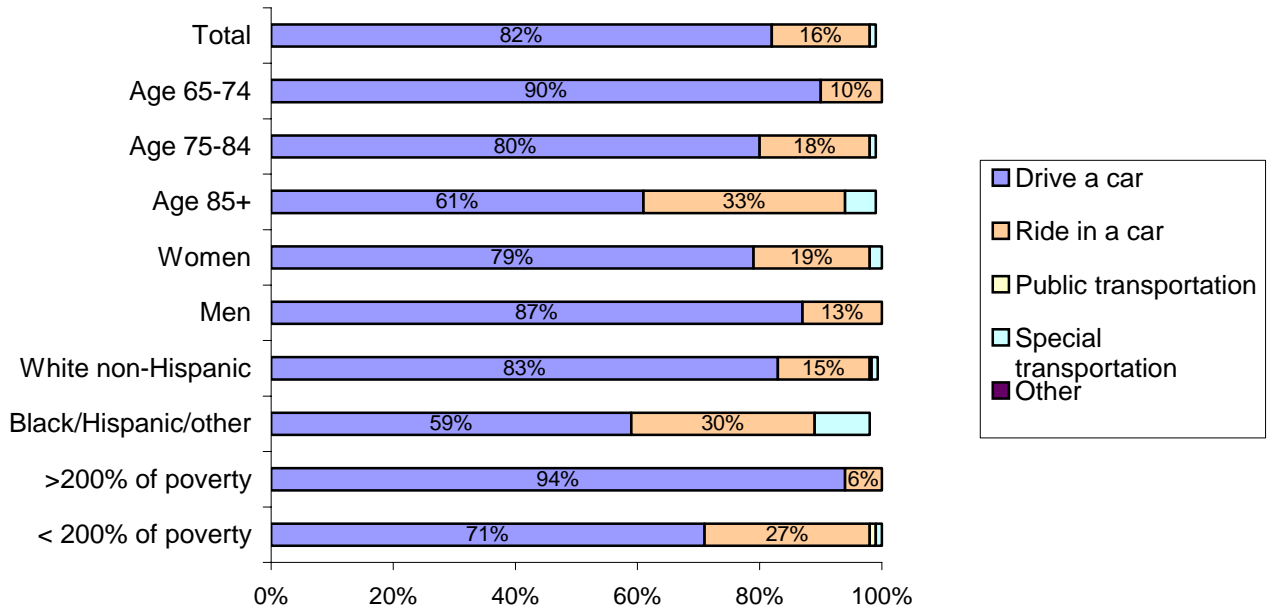
**Exhibit 22.2 - Frequency of Use of Public Transportation in the Past 2 Months
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

Those most likely to use public transportation are those living below the 200% above poverty mark and those who have 1 or more ADL/IADL limitation.

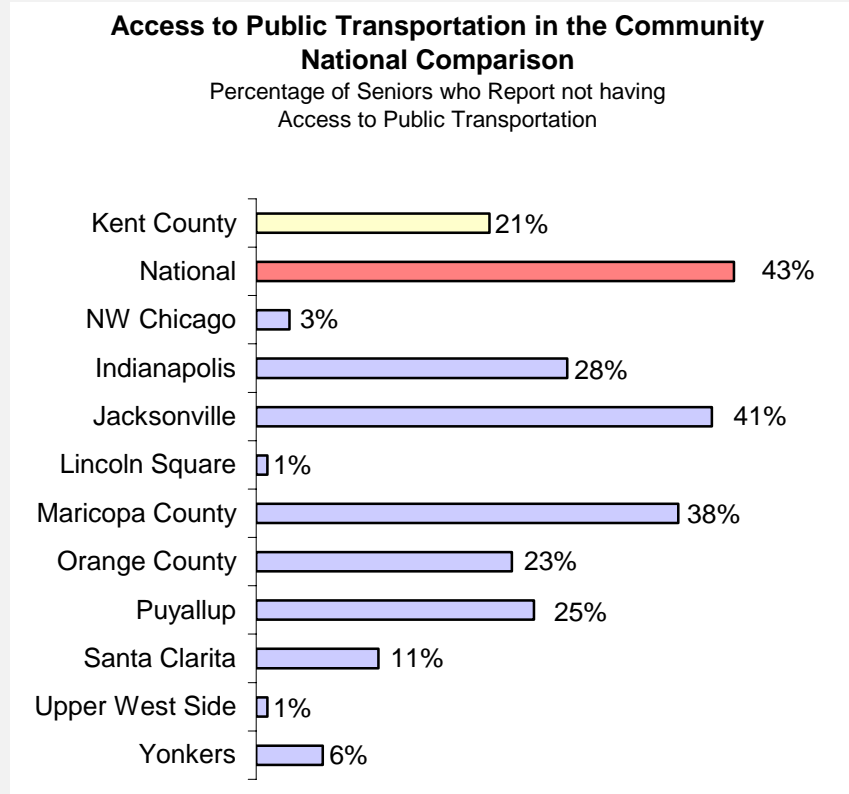
**Exhibit 22.4 - Means of Transportation Used Most Frequently by Demographics²⁴
Kent County 2004**



Margin of Error ranges from 4.5% - 20% depending on sample size

²⁴ People were asked which means of transportation they use most frequently.

How Does Kent County Compare?



Dimension 12

The Community Service System Enables People to Live Comfortably and Safely at Home

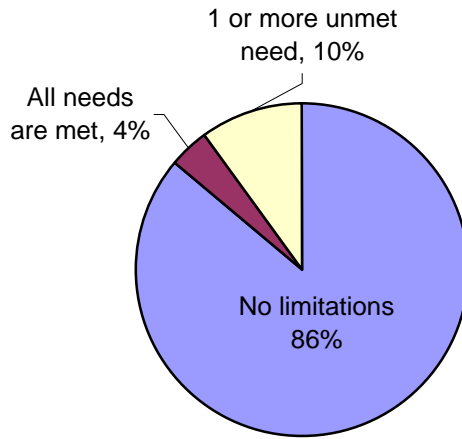
According to the Administration on Aging, every public opinion survey of older adults indicates that the vast majority desire to remain in their own home as long as possible, as one's own home represents security and independence. Most housing is designed for young, active and mobile people. Homes suitable for younger adults are not necessarily easy and safe for older adults to carry out their daily activities in.

Indicator 23) Percentage of People Age 65+ with adequate assistance in Activities of Daily Living (ADL)

The term "Impairments in Activities of Daily Living" is defined as the inability to perform one or more of the following six activities of daily living without personal assistance, stand-by assistance, supervision or cues: eating, dressing, bathing, toileting, transferring in and out of bed/chair, and walking. Most (86%) older Kent County residents report no limitations in performing activities of daily living. Seven out of every 10 people

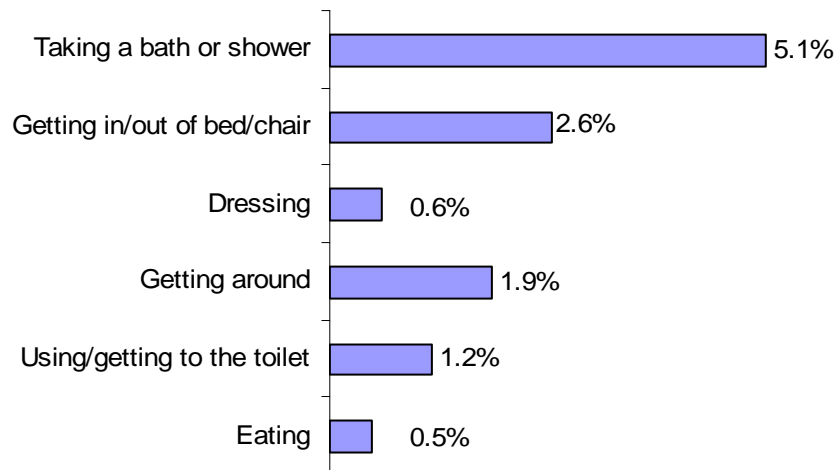
who need assistance are not getting their needs met. The biggest need for help is for assistance in bathing, followed by getting in and out of bed or chairs.

**Exhibit 23.1 - Percentage of People Age 65+ with Adequate Assistance in Activities of Daily Living²⁵
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

**Exhibit 23.2 - Percentage of People Age 65+ who need Assistance with each Activity of Daily Living²⁶
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

²⁵ People were asked whether they need assistance with the following activities (ADLs): taking a bath or a shower, dressing, eating, getting in/out of bed/chair, using/getting to a toilet, getting around inside the home. Those who answered “yes” were asked whether they get enough assistance with these activities. Percentages may not add up to 100% due to rounding and/or missing information.

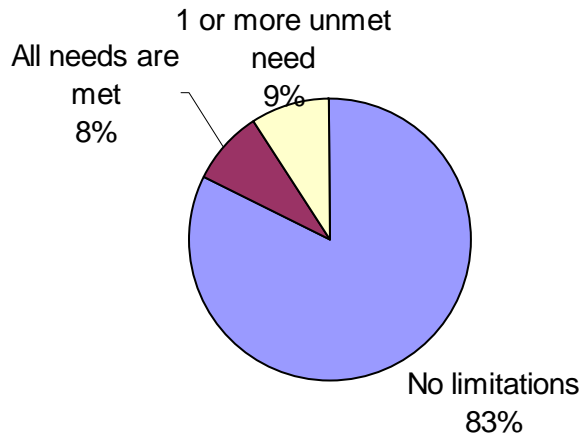
²⁶ People were asked whether they have a problem or need help with each of the above activities.

Indicator 24) Percentage of People Age 65+ with Adequate Assistance in Instrumental Activities of Daily Living (IADL)

“Impairments in Instrumental Activities of Daily Living” is defined as the inability to perform one or more of the following eight instrumental activities of daily living without personal assistance, or stand-by assistance, supervision or cues: preparing meals, shopping for personal items, medication management, managing money, using telephone, doing heavy housework, doing light housework and transportation ability.

Nine percent of Kent County respondents report that they have unmet needs for assistance in instrumental activities of daily living. Housework, transportation, and keeping track of money or bills are the activities most likely to require assistance.

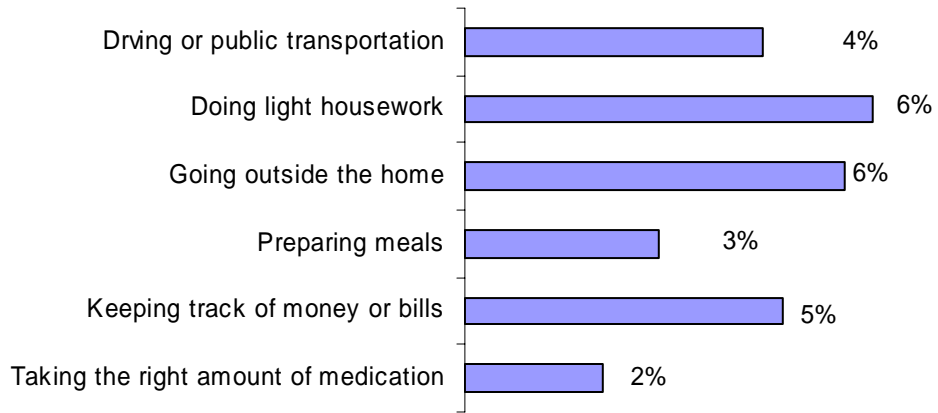
**Exhibit 24.1 - Percentage of People Age 65+ with Adequate Assistance in Instrumental Activities of Daily Living (IADL)²⁷
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

²⁷ People were asked whether they need assistance with the following activities (IADLs): going outside the home, doing light housework, preparing meals, driving a car/using public transportation, taking the right amount of prescribed medication, keeping track of money and bills. Those who answered “yes” were asked whether they get enough assistance with these activities. Percentages may not add up to 100% due to rounding and/or missing information.

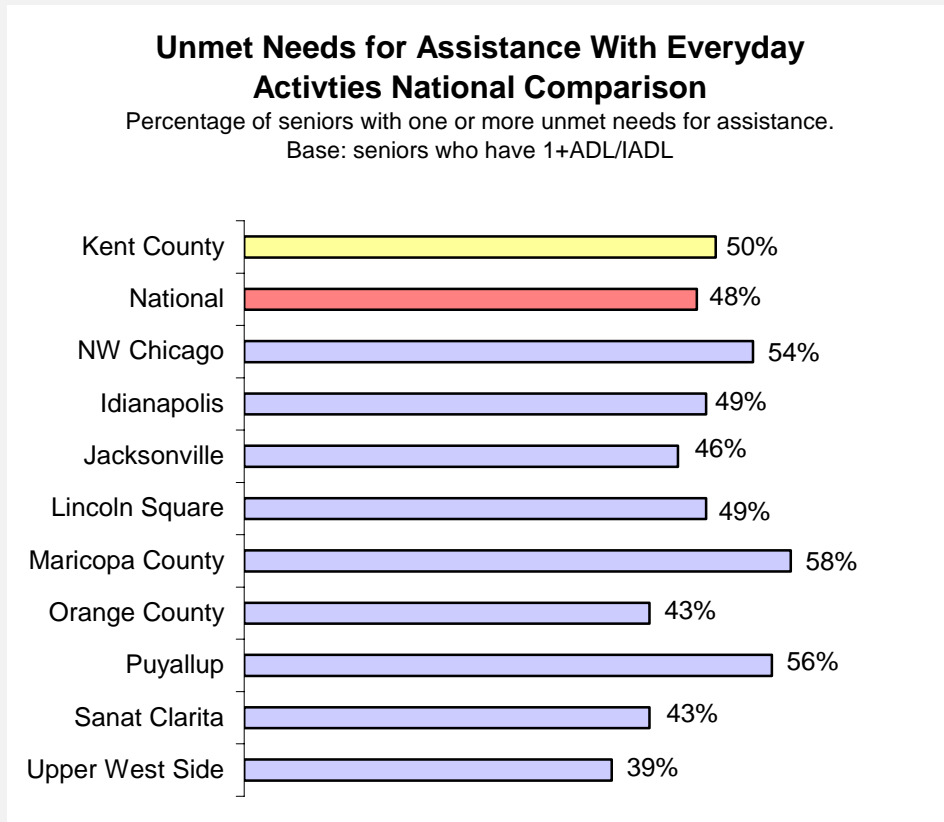
**Exhibit 24.2 - Percentage of People Age 65+ who Need Assistance
with each Instrumental Activity of Daily Living²⁸
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

²⁸ People were asked whether they have a problem or need help with each of the above activities.

How Does Kent County Compare?



Dimension 13

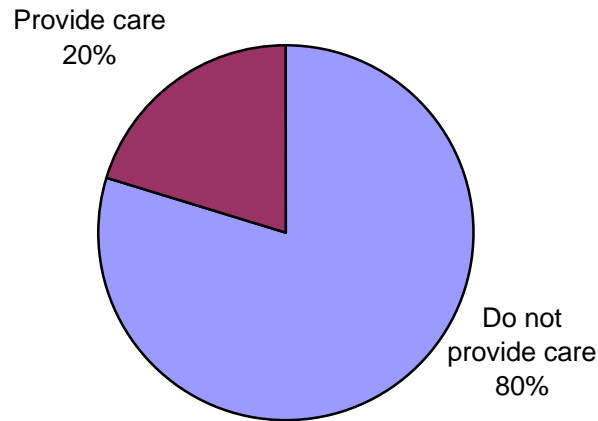
Caregivers are Mobilized to Complement the Formal Service System

The term ‘caregiver’ refers to anyone who provides assistance to someone else who is in some degree incapacitated and needs help. ‘Informal caregiver’ and ‘family caregiver’ are terms that refer to unpaid individuals such as family members, friends and neighbors who provide care. These individuals can be primary or secondary caregivers, full time or part time, and can live with the person being cared for or live separately. ‘Formal caregivers’ are volunteers or paid care providers associated with a service system. The majority of older persons receive assistance from spouses, adult children, and family members. Most of this care is informal and unpaid, although there is an increasing number of older adults who are relying on a combination of informal and formal long-term care. The growing aging population is expected to increase the demand for long term care. This increased demand raises an important question about who will provide this care (Federal Interagency Forum on Aging-Related Statistics, 2000).

Indicator 25) Percentage of People Age 65+ who Provide Help to the Frail or Disabled

Twenty percent of Kent County seniors are providing help for someone who is frail or disabled.

**Exhibit 25.1 - Percentage of People Age 65+ who Provide Help to the Frail or Disabled²⁹
Kent County 2004**

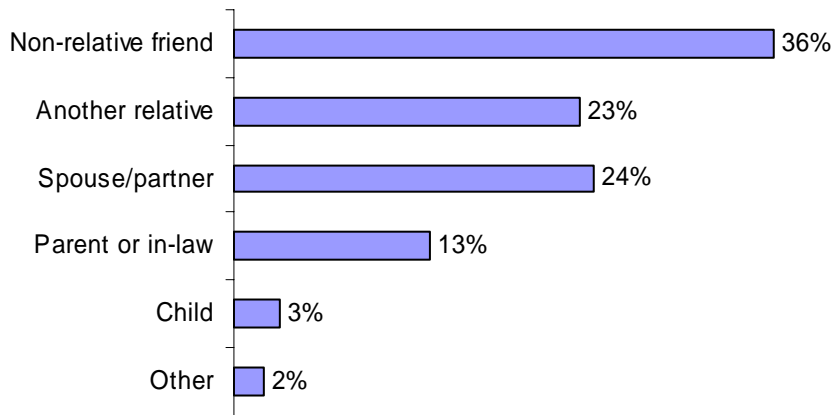


Unweighted N = 554 Weighted N = 62,102

²⁹ People were asked whether they provide help or care, or arrange for help or care, for a relative or friend who is unable to do some things for him/herself due to illness or injury. Percentages may not add up to 100% due to rounding and/or missing information.

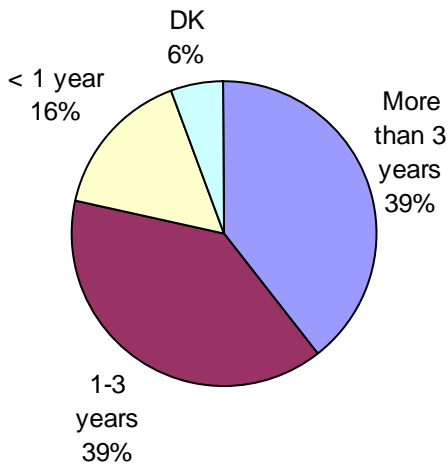
These caregivers are providing assistance for spouses/partners (24%), parents or in-laws (13%), child (3%), other relatives (23%), or friends (36%).

**Exhibit 25.2 - Relationship between Caregivers Age 65+ and Care Recipients³⁰
Kent County 2004**

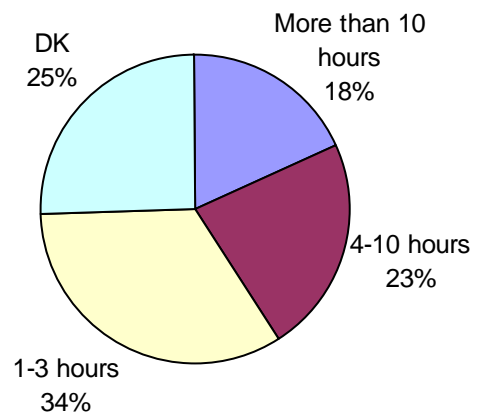


Most caregivers have been providing assistance for at least a year. The amount of time per week dedicated to providing assistance varied greatly.

**Exhibit 25.3 - Percent of Caregivers Age 65+ who Provide Help to the Frail or Disabled among those who Provide Help³¹
Kent County 2004**



**Exhibit 25.4 - Number of Hours per Week Spent on Caregiving among People Age 65+ who Provide Help to the Frail or Disabled
Kent County 2004**

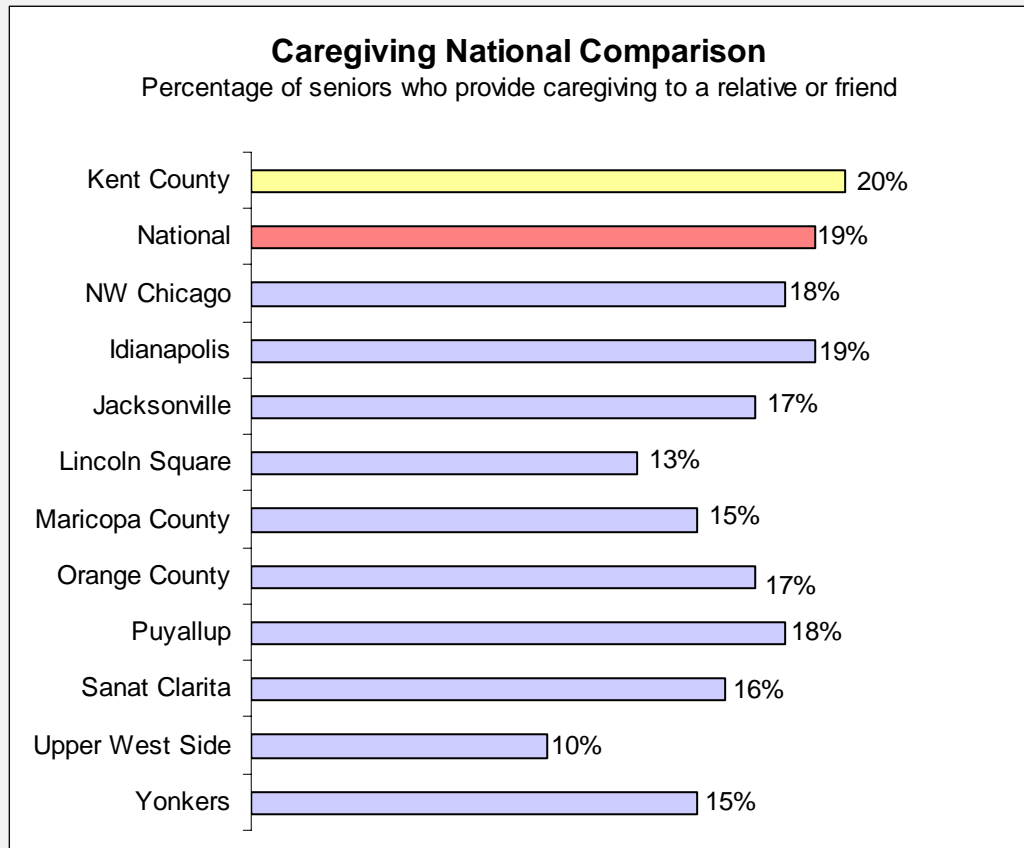


³⁰ People who said they provide care were asked “what is this person’s relationship to you?”

³¹ People who said they provide care were asked “In total, how long have you been caring for...” Percentages may not add up to 100% due to rounding and/or missing information.

How Does Kent County Compare?

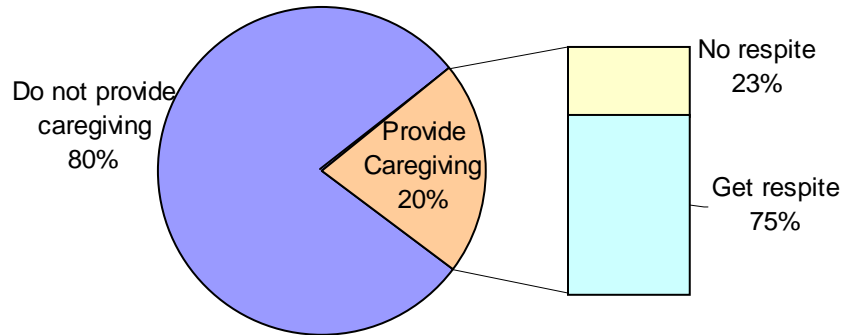
Kent County is slightly above the national average in the proportion of seniors who provide caregiving assistance to a relative or friend. Twenty percent of Kent County seniors are caregivers compared to 19% of seniors across the country.



Indicator 26) Percentage of People Age 65+ who get Respite/Relief from their Caregiving Activity

It is obvious to anyone who has provided care that respite is a vital service. In other words it is a necessity, not a luxury. Despite this, 1 out of 4 older adults who are providing care for a friend or relative report that they are not getting relief from their caregiving duties. Due to the number of people indicating that they provide care, any demographic analysis would be inappropriate because the sizes of the groups are too small.

**Exhibit 26.1 - Percentage of People Age 65+ who get Respite/Relief from their Caregiving Activities³²
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

³² People were asked whether they provide help or care, or arrange for help or care, for a relative or friend who is unable to do some things for him/herself due to illness or disability. People who answered "yes" were asked whether they get relief from their caregiving responsibilities. Percentages may not add up to 100% due to rounding and/or missing information.

Dimension 14

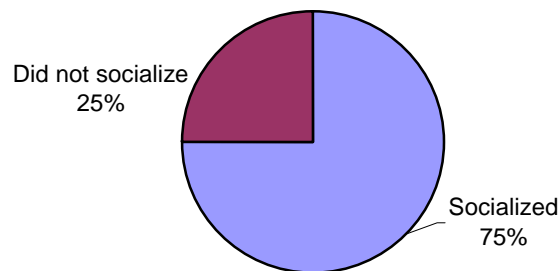
Residents Maintain Connections with Friends and Neighbors

As adults age, social activity takes on new importance. Those who continue to interact with others tend to be healthier, both physically and mentally, than those who become socially isolated. Interactions with friends and family can provide emotional and practical support that enable older persons to remain in the community and reduce the likelihood they will need formal health care services (Federal Interagency Forum on Aging-Related Statistics, 2000).

Indicator 27) Percentage of People Age 65+ who Socialized with Friends or Neighbors in the Past Week

Three out of four people who responded to the survey reported that they had socialized with friends or neighbors in the last week.

**Exhibit 27.1 - Percentage of People Age 65+ who Socialized with Friends or Neighbors in the Past Week³³
Kent County 2004**

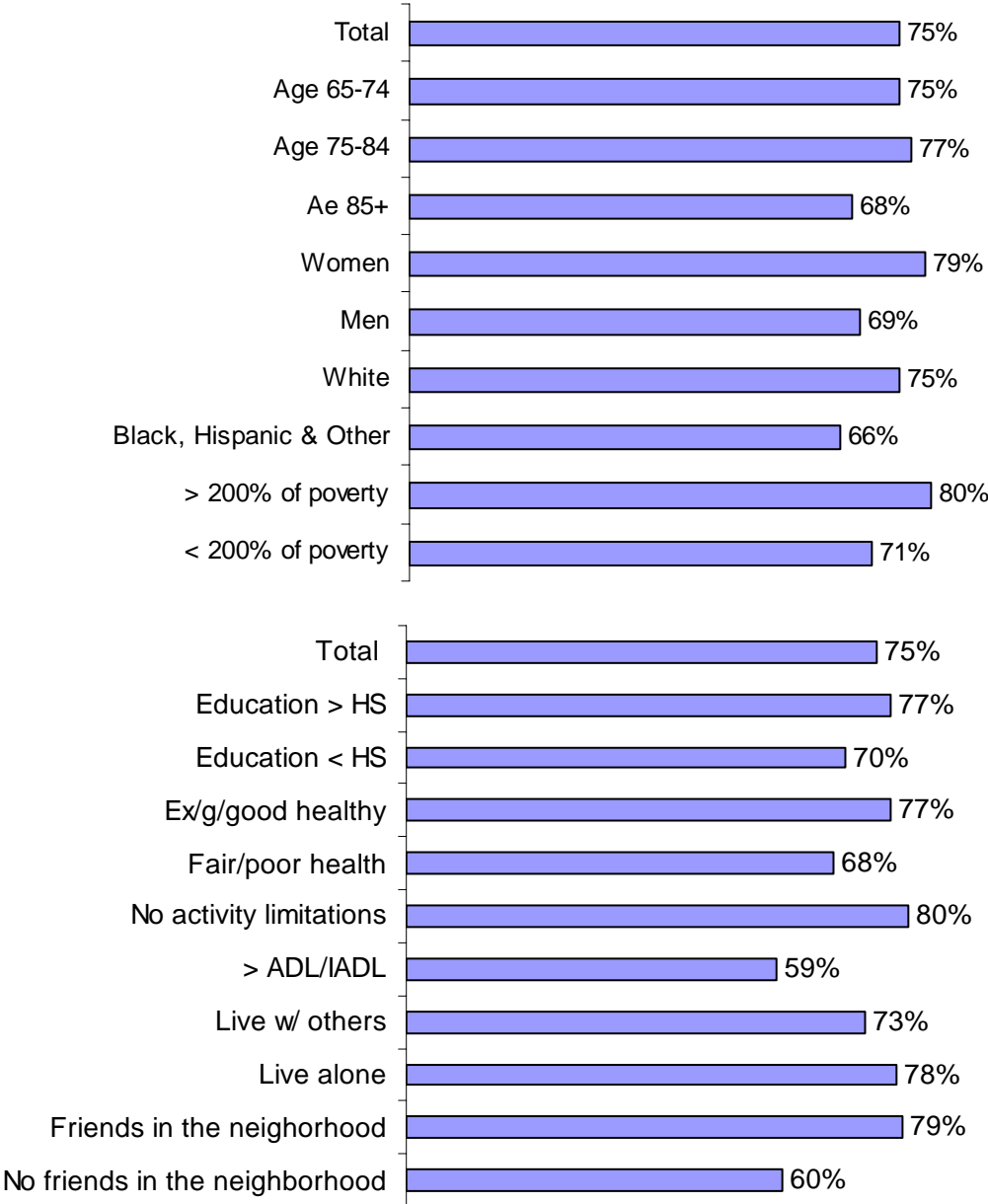


Unweighted N = 554 Weighted N = 62,102

One can see differences in that activity rate when it is viewed by demographic groups. For example, a higher percentage of women than men, reported such activity (79% compared to 69%). Slight differences can be seen between the age groups 65-74 and 75-84, however, activity drops off sharply in the 85+ age group. The largest differences in percentage by demographic categories were by friendships and activity limitations. People with some friends reported social activity at a higher percentage than those with none (79% to 60%) and people with no activity limitations indicated a higher rate of activity than those with such limitations.

³³ People were asked whether they got together with friends or neighbors during the past week. Percentages may not add up to 100% due to rounding and/or missing information.

**Exhibit 27.2 - Percentage of People Age 65+ who Socialized with Friends or Neighbors in the Past Week, by Demographics¹
Kent County 2004**



Margin of Error ranges from 4.5% - 20% depending on sample size

Dimension 15

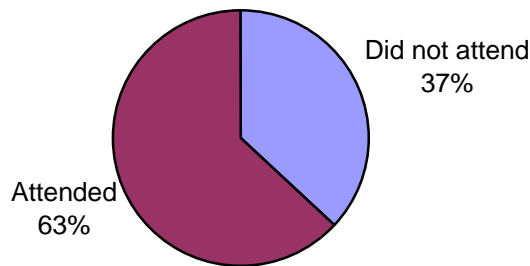
Civic, Cultural, Religious, and Recreational Activities include Older Adults

Participation builds community by generating trust and connections among its members. Social interactions can benefit individuals, especially seniors, by decreasing social isolation, increasing support networks, and providing enriching and satisfying life experiences.

Indicator 28) Percentage of People Age 65+ who Attended Church, Temple or Other in the Past Week

With few demographic exceptions, Kent County residents age 65+ indicated in this survey that they attended church, temple or other place of worship in the past week. Over all, six out of ten said “yes” they had attended.

**Exhibit 28.1 - Percentage of People Age 65+ who Attended Church, Temple, or Other in the Past Week³⁴
Kent County 2004**

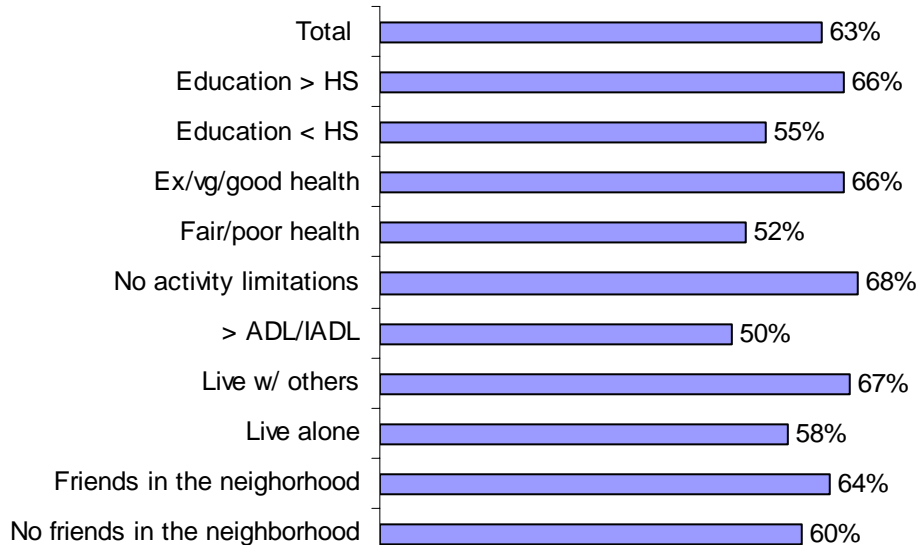
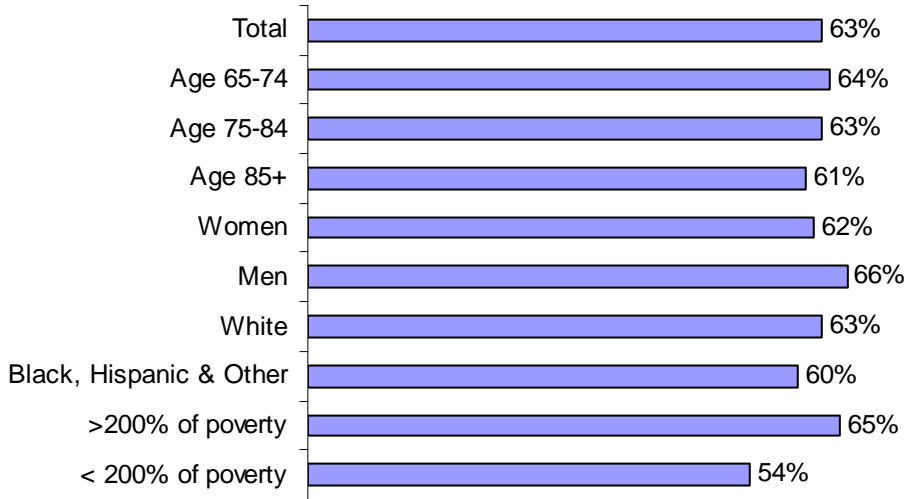


Unweighted N = 554 Weighted N = 62,102

Age, gender, race, and friends appear to have a relatively small impact on religious participation. A larger difference was witnessed between people who indicated they have excellent/very good or good health (66%) and those with fair/poor or very poor health (52%) as well as those with no activity limitation (68%) and those with such limitations (50%). People who had more education attended at a higher percentage than those with less as did people with higher incomes and those who lived with others. People who live with someone appear to attend at a high percentage as to those who reported having some friends in the neighborhood.

³⁴ People were asked if they went to church, temple, or another place of worship for service or other activities during the week. Percentages may not add up to 100% due to rounding and/or missing information.

**Exhibit 28.2 - Percentage of People Age 65+ who Attended Church, Temple or other
in the Past Week, by Demographics²
Kent County 2004**

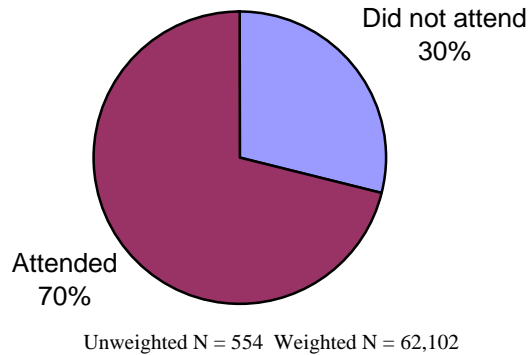


Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 29) Percentage of People Age 65+ who Attended Movies, Sports Events, Clubs, or Group Events in the Past Week

More than twice as many people age 65+ attended a movie, sporting event, club or group event than did not in the week prior to this survey. The percentage of those attending (70%), when compared to the 30% not attending, would seem to indicate an active group of individuals.

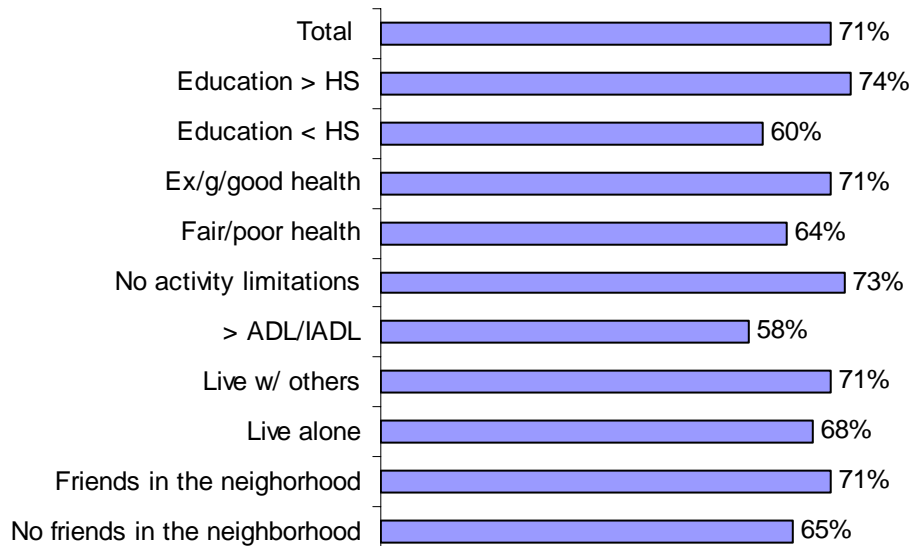
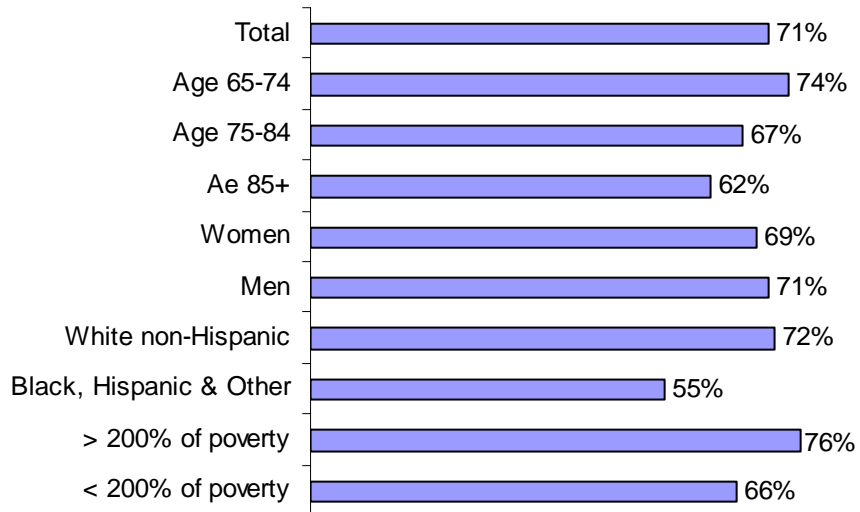
**Exhibit 29.1 - Percentage of People Age 65+ who Attended Movies, Sports Events, Clubs or Group Events in the Past Week³⁵
Kent County 2004**



The results show that as Kent County’s population ages, their reported participation in common recreational activities is likely to decrease. There is no major difference by gender as 71% of the men attended an event and 69% of the women. The differences were similarly small between those living with others (71%) and those living alone (68%). The differences are larger, however, when race, income, education or health/activity limitations are considered. There is a ten percentage point difference in reported attendance to events between those with higher income (76% reported attendance) and those with lower income (66% attendance). The difference is even greater when comparing various races/ethnicities and those with a “high school or more” education are compared to those with less than high school. When people with excellent/very good or good health are compared to those with fail/poor or very poor health, those with “better” health appear to be in attendance at events in a greater rate and those with out activity limitations attending at a rate of seven out of 10 compared to a rate of just under 6 out of 10 for those with limitations.

³⁵ People were asked if they went to a movie, play, concert, restaurant, sporting event, club meeting, card game, or other social activity during the past week. Percentages may not add up to 100% due to rounding and/or missing information.

Exhibit 29.2 - Percentage of People Age 65+ who Attended Movies, Sports Events, Clubs or Group Events in the Past Week³ Kent County 2004

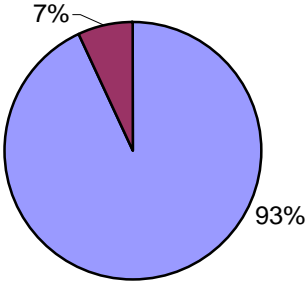


Margin of Error ranges from 4.5% - 20% depending on sample size

Indicator 30) Percentage of People Age 65+ who Engaged in at least one Social, Religious, or Cultural Activity in the Last Week

Kent County people age 65+ seem to be overwhelmingly active according to the responses to this survey. Ninety-three percent indicated that they had been engaged in at least one social, religious or cultural activity in the week prior to participating in the study.

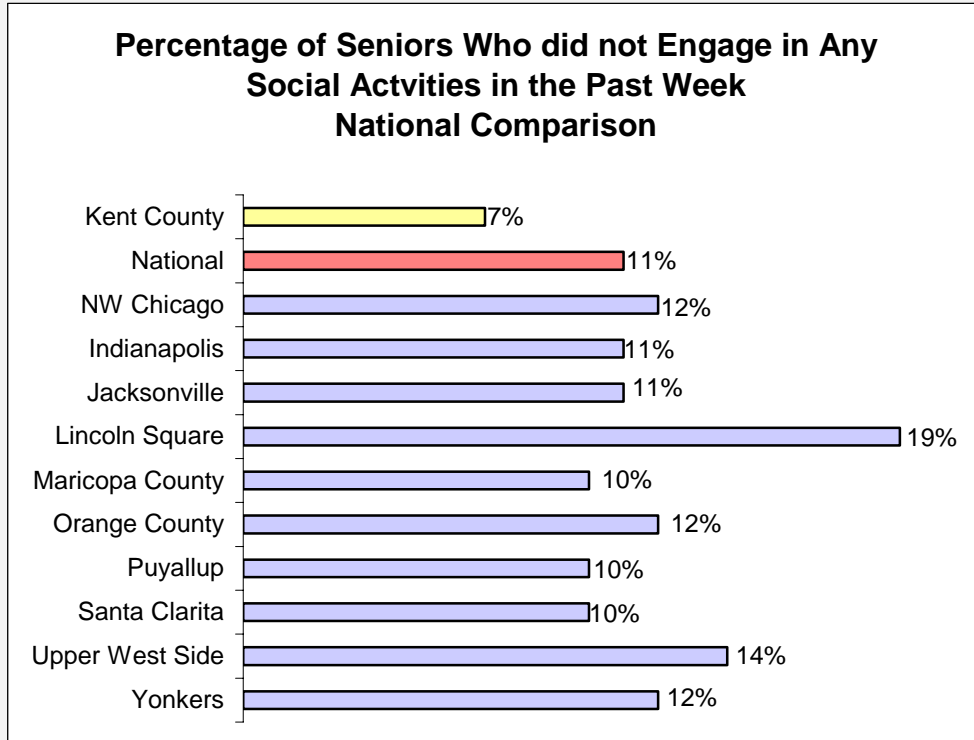
**Exhibit 30.1 - Percentage of People Age 65+ who Engaged in at least one Social, Religious, or Cultural Activity in the Past Week
Kent County 2004**



Unweighted N = 554 Weighted N = 62,102

How Does Kent County Compare?

Kent County people age 65+ have a higher percentage of social activity than people of similar age when they are compared to a national average of people in their age group. No other geographic area reported such a high percentage of activity either. In Kent County, 93% of those responding to the survey indicated that they had participated in at least one activity in the last week, a higher rate than any other locations surveyed in the country.



Dimension 16

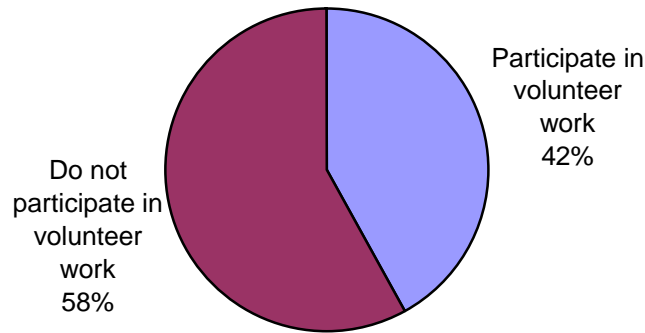
Opportunities for Volunteer Work are Readily Available

Volunteering increases older adults' sense of well-being and self-image while helping them maintain a sense of usefulness and productivity. Older adults involved in volunteer work are reported to do so for three main reasons: (1) to increase their sense of purpose by making a difference and helping others, (2) as a way to become more involved in a personal interest and achieve growth in that area, and (3) to create structure to their day by remaining productive. According to a 2002 survey conducted for Civic Ventures, a nonprofit organization, seniors who volunteer were more likely to have a happy, healthy outlook on life and gain personal satisfaction (Hart, 2002).

Indicator 31) Percentage of People Age 65+ who Participate in Volunteer Work

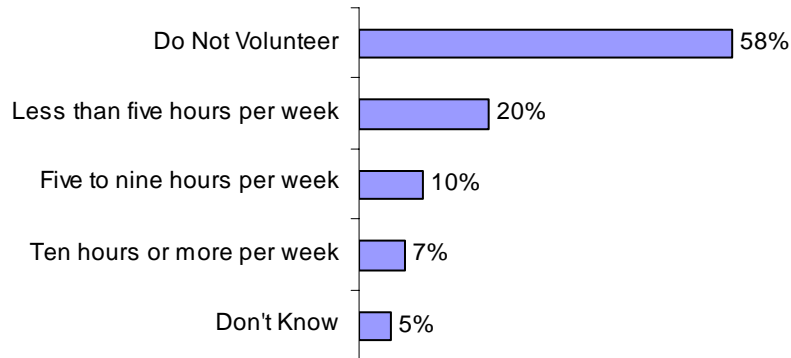
Less than half of Kent County people age 65+ spend their time helping without getting paid for it, in some form of volunteer work. Of those responding to the survey, 42% did indicate that they are involved in such activities and of those, the largest percentage (20%) are involved less than five hours per week.

**Exhibit 31.1 – Percentage of People Age 65+ who Participate in Volunteer Work
Kent County 2004³⁶**



Unweighted N = 554 Weighted N = 62,102

**Exhibit 31.2 - Number of Hours People Age 65+ Spend Volunteering,
among those who Volunteer³⁷
Kent County 2004**



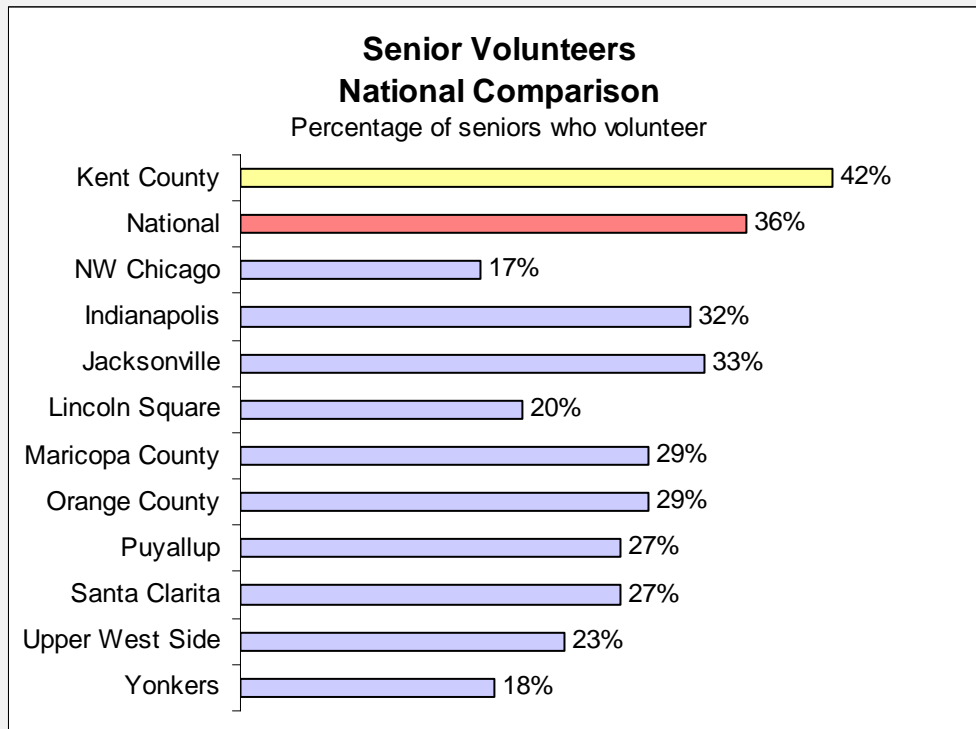
Unweighted N = 554 Weighted N = 62,102

³⁶ People were asked if they do volunteer work and if so what type of volunteer work they do. Percentages may not add up to 100% due to rounding or missing information.

³⁷ People who said they volunteer were asked how any hours they usually spend doing volunteer work. Percentages may not add up to 100% due to rounding or missing information.

How Does Kent County Compare?

When taken in isolation, the Kent County volunteer rate may seem less than might be expected but when compared to the national average and the rates of other survey sites, Kent County has a large percentage of volunteering people. The 42% reported in Kent County is higher than the national average of 36% and twice as high as a number of other sites around the country such as Yonkers and Lincoln Square.



Dimension 17

Community Residents Help and Trust Each Other

In 2001 the Grand Rapids Community Foundation joined other foundations around the United States in a Social Capital Community Benchmark Survey. The survey found that trust between residents is a key dimension of a socially connected and thriving community that can provide help and support to its residents.

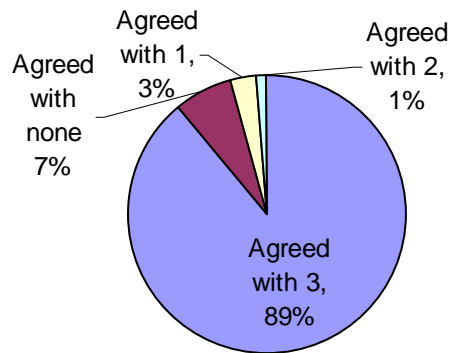
Indicator 32) Percentage of People Age 65+ who Live in “Helping Communities”

The results of the Advantage survey would seem to indicate that for Kent County residents 65+, there is a high level of trust and connectedness for them in their community. They were asked to indicate their level of agreement with three statements. The statements were the following:

1. Most people in the neighborhood are basically honest and can be trusted
2. If I have a problem there is always someone to help me in this neighborhood
3. Most people in this neighborhood are willing to help if you need it

Nearly 90% of those responding agreed with these statements.

Exhibit 32.1 - Percentage of people age 65+ who live in "helping communities"³⁸

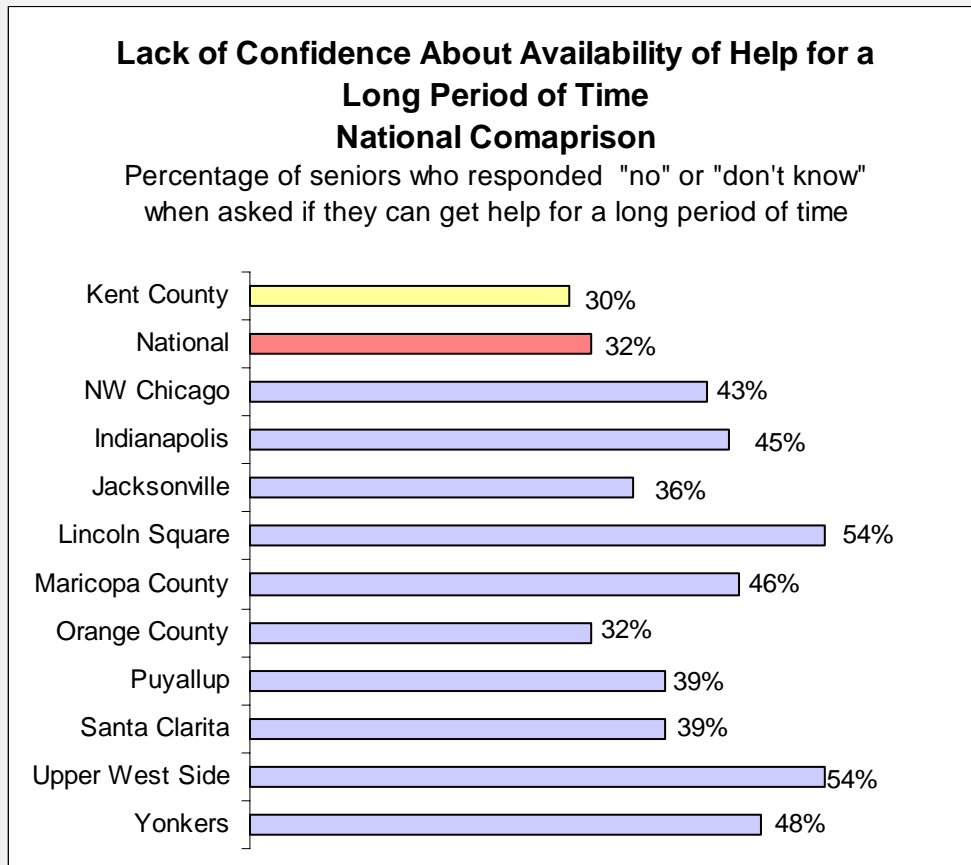


Unweighted N = 554 Weighted N = 62,102

³⁸ People were asked whether they strongly agree, agree, disagree, or strongly disagree with the following 3 statements: “Most people in this neighborhood are basically honest and can be trusted”; “If I have a problem there is always someone to help me in this neighborhood”; “Most people in this neighborhood are willing to help if you need it”. Percentage of people who “agreed” includes those who said they “strongly agreed” and those who said they “agree”.

How Does Kent County Compare?

When asked if they knew they could get help if they needed it, a high percentage of Kent County people 65+ indicated that they did know how. When compared to the national average or that of other surveyed areas, Kent County had the lowest percentage of people who indicated either "no" they could not get help for a long period of time or that they did not know.



Dimension 18

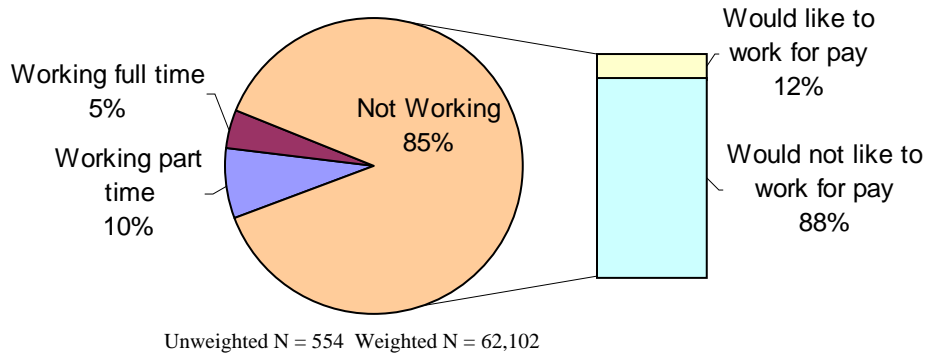
Appropriate Work is Available to Those Who Want It

According to the Federal Interagency Forum on Aging-Related Statistics, some older Americans work out of economic necessity. Others seek employment because they desire the social contact, intellectual challenges, or a sense of value that work often provides.

Indicator 33) Percentage of People Age 65+ who would like to be Working for Pay

Approximately 16% of Kent County people 65+ who responded to the Advantage survey indicated that they are working either full or part time. Of those remaining, just over 12% said they would like to work for pay. Given the relatively small number of people indicating that they would like to do so, any demographic analysis would be inappropriate because the size of the groups is too small.

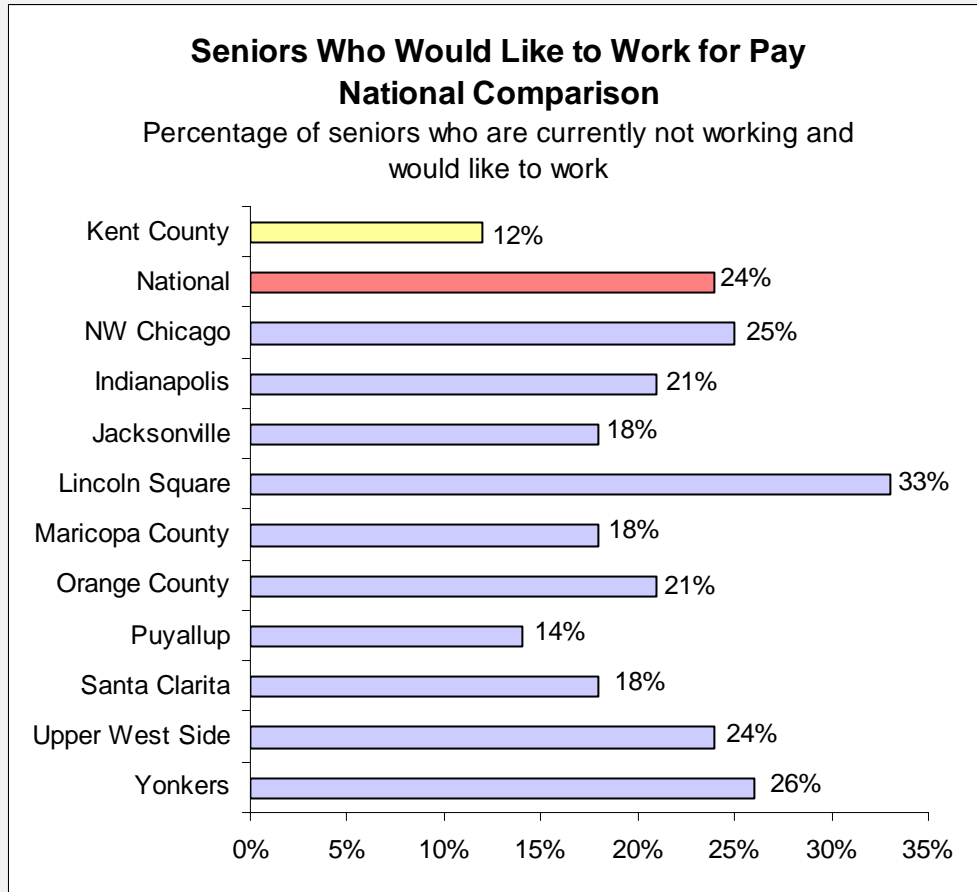
**Exhibit 33.1 - Percentage of People Age 65+ who would like to be Working for Pay³⁹
Kent County 2004**



³⁹ People were asked what their current employment status is. People who were not working were asked whether they would like to be working for pay. Percentages may not add up to 100% due to rounding or missing information.

How Does Kent County Compare?

The percentage of Kent County people 65+ who are not currently but would like to be working is quite a bit smaller than either the national average or the percentage of those in other areas.



Bibliography

- Administration on Aging (2003). *Home Modification. Administration on Aging, Fact Sheet*. Retrieved August 26, 2004 from the world wide web at: http://www.aoa.gov/press/fact/pdf/fs_home_mod.pdf
- Administration on Aging (2004). *Aging Well Living Well: Transportation Fact Sheet*. Retrieved August 26, 2004 from the world wide web at: http://www.aoa.gov/press/oam/May_2004/media/factsheets/Transportation%20FS.pdf
- Center for Disease Control (2004). *Healthy Aging: Preventing Disease and Improving Quality of Life Among Older Americans*. Retrieved August 26 2004 from the world wide web at: http://www.cdc.gov/nccdphp/aag/pdf/aag_aging2004.pdf
- Center for Disease Control (1999). *Healthy People 2000 Oral Health Progress Review*. Retrieved October 7, 2004 from the world wide web at: <http://www.cdc.gov/nchs/about/otheract/hp2000/oralhealth/oralcharts.htm>
- Commission on Affordable Housing and Health (2002). *A Quiet Crisis in America*. Retrieved August 26, 2004 from the world wide web at: http://www.seniorscommission.gov/pages/final_report/finalreport.pdf
- Community Research Institute (2004). *Emerging trends: Healthy Seniors Update*. Retrieved August 26, 2004 from the world wide web at: <http://www.cridata.org/publications/2004/healthyseniors2004.html>
- Fan, J., Sharpe, D., and Hong, G. (2003). *Health Care and Prescription Drug Spending by Seniors*. Monthly Labor Review. Vol. 126, No. 3, 16-26.
- Federal Interagency Forum on Aging-Related Statistics (2000). *Older Americans 2000. Key Indicators of Well being*. Retrieved August 26, 2004 from the world wide web at: <http://www.agingstats.gov>
- Hull, Adrienne (2002). *Aging in Place: Solutions to a Crisis in Care*. Retrieved August 26, 2004 from the world wide web at: <http://www.frbatlanta.org/invoke.cfm?objectid=B18A9FB0-5C94-4CF6-84499ACFE919804A&method=display>
- Jennings, B., Ryndes, T., D'Onofrio, C., Baily, M., (2003). *Access to Hospice Care: Expanding Boundaries, Overcoming Barriers*. Retrieved August 26, 2004 from the world wide web at: <http://www.openminds.com/indres/accesstohospice5-2003.pdf>
- Jordan, L (2002). *Law Enforcement and the Elderly: A Concern for the 21st Century*. Retrieved August 26, 2004 from the world wide web at: http://www.fbi.gov/publications/leb/2002/may2002/may2002.htm#page_21
- Kassner, E (2003). *Nutrition Assistance for Older Americans*. Retrieved August 26, 2004 from the world wide web at: http://research.aarp.org/il/fs19r_food.html#FIRST
- Kennedy School of Government (2002). *NPR/Kaiser/Kennedy School Poll on Health Care*. Retrieved August 26 2004 from the world wide web at: <http://www.npr.org/news/specials/healthcarepoll/>
- National Center for Senior's Housing Research (2001). *Seniors and America's Homes: Cost and Practicality of Home Modifications*. Retrieved August 26, 2004 from the world wide web at:

http://www.nahbrc.org/Docs/MainNav/Seniors/3092_ModificationExecSummary.pdf?TrackID=&CategoryID=1648&DocumentID=3092

National Foundation for Infectious Diseases (2004). *Facts About Influenza for Adults*. Retrieved October 7, 2004 from the world wide web at: <http://www.nfid.org/factsheets/influadult.pdf>

U.S. Census Bureau (2002). *The Older Population in the United States: March 2002*. Retrieved October 7, 2004 from the world wide web at: <http://www.census.gov/prod/2003pubs/p20-546.pdf>