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Emerging Trends Healthy Seniors

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Emerging Trends Healthy Seniors

June 2003

Grand Rapids Community Foundation

Community Research Institute



Introduction

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 **Emerging Trends Initiative: Healthy Seniors** may be directed to Korrie Ottenwess at 331-7585 or ottenwko@gvsu.edu, or Gustavo Rotondaro at 331-7591 or rotondag@gvsu.edu.

Introduction to the Emerging Trends Initiative

Staff at the Community Research Institute (CRI) have developed a process for systematically scanning the Greater Grand Rapids Area for emerging trends and relevant data to inform the work of the Grand Rapids Community Foundation and the larger nonprofit and philanthropic community. More specifically, this project intends to track data for each of the Foundation's Leadership Agenda areas including:

- Public Education
- Healthy Youth/Healthy Seniors
- Community & Economic Development
- Civic Engagement
- Child Welfare

This "working document" is a progress report on the Emerging Trends Initiative in the area of Healthy Seniors. Included is a glimpse into the data collected within the areas of demographics, general health, morbidity/mortality, care/assistance and quality of life. A group of local experts in issues relating to senior health from the public and nonprofit sectors were involved in the initiative as Community Interpretive Partners (CIP), providing feedback to refine the data collection system and provide insight to emerging trends.

At the completion of this project a full range of senior health data collected from the four county area will be available on the Community Research Institute's website at www.cridata.org. In addition, insight provided by the Community Interpretive Partners and goals for future data collection will be available.

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Executive Summary

Kent County residents, age 65 and older, are an important and growing segment of our population. Because data on this population comes from multiple agencies, it is sometimes difficult to understand how this group is faring overall. This report attempts to bring together data related to the health of the senior population which we can use to better understand older adults in Kent County. Some of the data found within this report will serve as baseline assessments of health, while others have information going back several years. By examining a broad range of indicators we can better understand the areas of well-being that are improving for the older population and the areas of well-being that require more attention and effort.

Some positive health indicators among older adults in Kent County include:

- The number of adults 75 years and older who were living in poverty decreased between 1990 and 2000 by 3% in Kent County.
- Homeownership levels for Kent County's older population (65+) are consistent with state and national levels.
- The rate of preventable hospitalizations for Kent County residents aged 65+ was 747.2 per 10,000 in 2000 compared to 1014.9 for the state of Michigan during the same year.
- The rate of deaths due to heart disease, the leading cause of death for seniors age 75+ in Kent County, decreased between 1996 and 2001.

Some areas of concern among older adults in Kent County include:

- The number of older adults in Kent County between the ages of 55 – 74 who were living in poverty increased between 1990 and 2000.
- In 2000, the number of preventable hospitalizations for bacterial pneumonia, chronic obstructive pulmonary, kidney/urinary infections, cellulites, diabetes, and convulsions increased when compared to the average number of preventable hospitalizations recorded between 1996 – 1998.
- Although the rate of deaths per year due to cancer, the second leading cause of death for seniors age 75+ in Kent County, decreased between 1996 and 2001, the rate appears to be on the rise again.
- In 1999, fraud and burglary against seniors (65+) in Kent County was up 8% and 11% respectively. Since 1999, these numbers have continued to increase.

It is our hope that by following these data trends and creating accessible information, we will be able to help the community target efforts that can improve the lives of older adults in Kent County.

Demographics

Variable 1: Population Composition

- One in every ten Kent County residents (59,625) was 65 years or older in 2000 (Table 1). Of this population, 59.8% were females and 40.2% were males. The gender ratio widens in Kent County as adults increase in age (Chart 1).¹

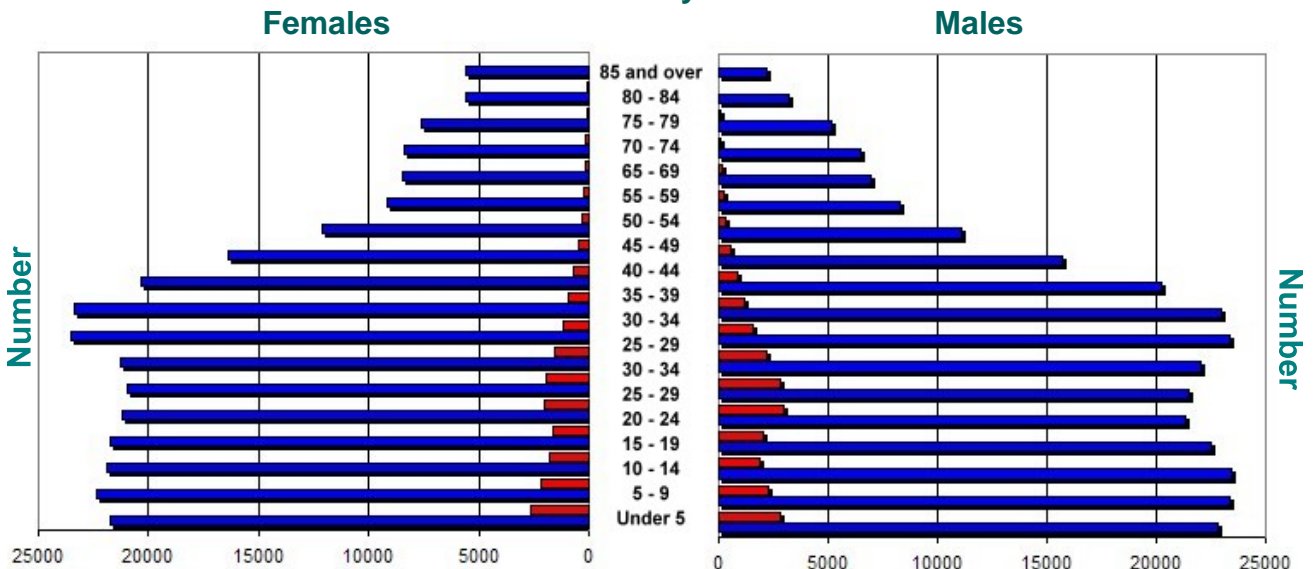
**Table 1 - Comparison of Senior Age Groups
Kent County, Michigan, United States 2000**

Senior Age Group	Number	Percentage of Total Population
65 to 74 years	30,280	5.3%
75 to 84 years	21,562	3.8%
85 years and over	7,783	1.4%

Source: U.S. Census Bureau 2000

- The population of Hispanic older adults (65+) is growing at a faster rate than any other race or ethnic group in Kent County. While the white population of older adults in Kent County increased by 22% from 1990-2000, black older adults increased by 39% and Hispanic older adults grew by 154%. The same trend was visible in the soon-to-be senior population. White adults aged 45-64 increased by 33% from 1990-2000 while blacks increased by 57% and Hispanics by 86%.¹

**Chart 1 - Age Distribution of Total Population*
Kent County 2000**



*Total population shown in blue. Hispanic Population shown in Red.

Source: U.S. Census Bureau 2000

- Looking at Kent County’s population, the number of older adults (65+) increased by 10% from 1990-2000. Older adults aged 85 years and older saw even greater growth, increasing in number by 28% from 1990-2000 (Table 2).¹
- One in every five Kent County residents was a soon-to-be senior (45-65 years old) in 2000. This group grew by 38% from 1990-2000 (Table 2).¹

**Table 2 - Comparison of Age Distributions
Kent County, Michigan, United States 2000**

	45-64 years old		65 years and over		85 years and over	
	% of Population	1990-2000 % Change	% of Population	1990-2000 % Change	% of Population	1990-2000 % Change
Kent County	20%	38%	10%	10%	1.4%	28%
Michigan	22%	28%	12.3%	10%	1.4%	33%
United States	22%	34%	12.4%	12%	1.5%	38%

Source: U.S. Census Bureau 2000

- When looking at Kent County data, we see that the majority of older adults in Kent County live in the City of Grand Rapids (Chart 2). However, when we look at changes in populations we see that the population of older adults (65+) in Grand Rapids decreased significantly between 1990 and 2000. Conversely, townships such as Algoma, Cannon, Byron, and Gaines saw their population of older adults (65+) more than double during the same time period (Chart 3).¹ This creates increased demand for health care, housing, and transportation for the elderly in areas other than the central city.²

Chart 2 - Number of People Age 65+ Per Sq. Mile - Kent County 2000

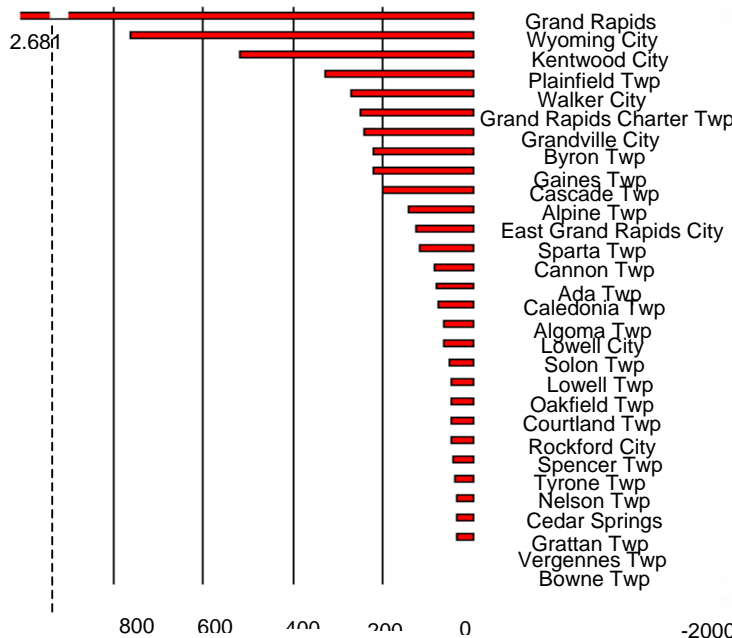
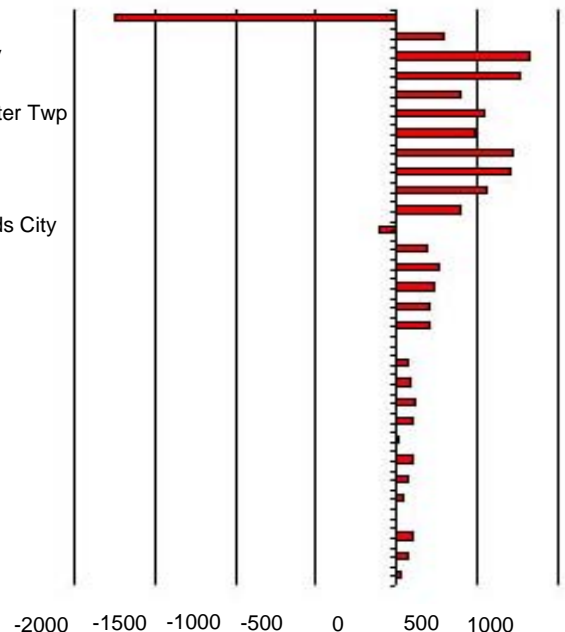


Chart 3 - Change in the Number of People Age 65+ - Kent County 1990-2000



Source: U.S. Census Bureau 2000

Demographics

Variable 2: Poverty Status

- Seniors who live in poverty are at risk of having inadequate resources for food, housing, health care, and other needs.³ In 2000, there were 49,832 people (8.7% of the total population) living below poverty level in Kent County. Of these 2,587 were between the ages of 55–64, 1,942 were between the ages of 65–74, and 2,246 were 75 or older (Table 3).¹

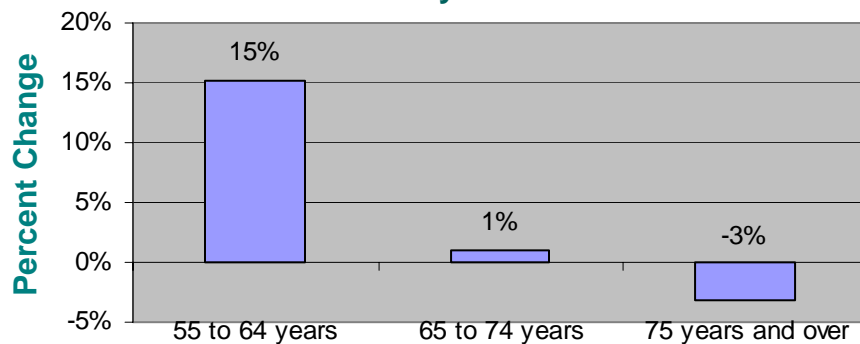
**Table 3 - People Living Below Poverty Level By Age
Kent County 2000**

	Below Poverty Level		Below 200% of the Poverty Level	
	Number	Percent of Age Group	Number	Percent of Age Group
55 to 64 years	2,587	6.5%	6,071	15.2%
65 to 74 years	1,942	6.5%	6,475	21.5%
75 years and over	2,246	8.7%	8,861	34.3%

Source: U.S. Census Bureau 2000

- Between 1990 and 2000, the number of older adults living in Kent County below the poverty level increased in all age groups other than the 75+ category (Chart 4).¹

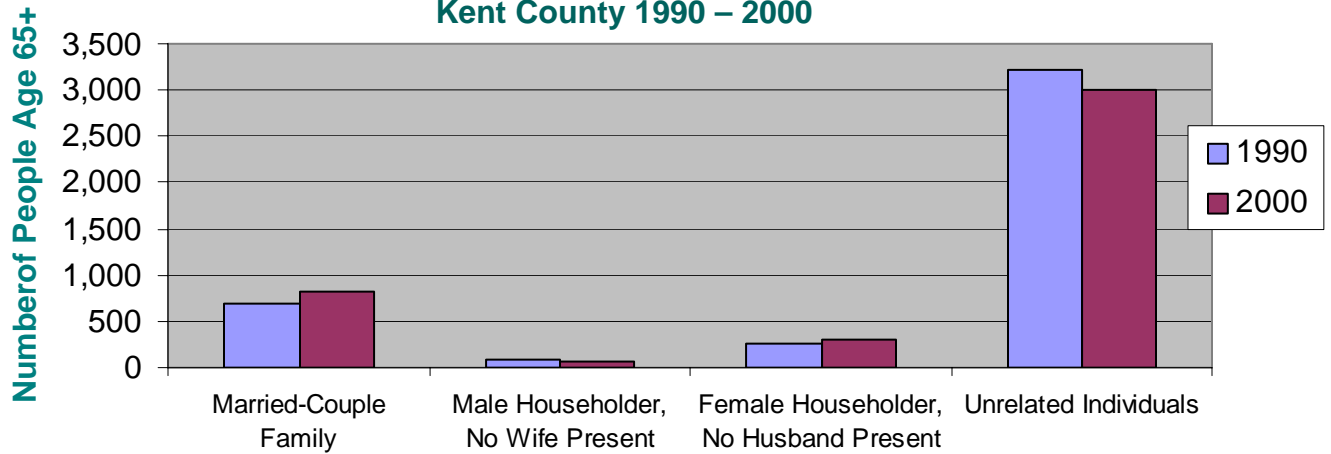
**Chart 4 - Change in Number of People Living Below Poverty Level By Age
Kent County 1990 - 2000**



Source: U.S. Census Bureau 2000

- When examining poverty by living arrangement in Kent County, older persons (65+) living with unrelated individuals were much more likely to be poor than were persons living with families. However, the groups seeing the largest increase in poverty (21%) were married couples age 65+ (Chart 5).¹

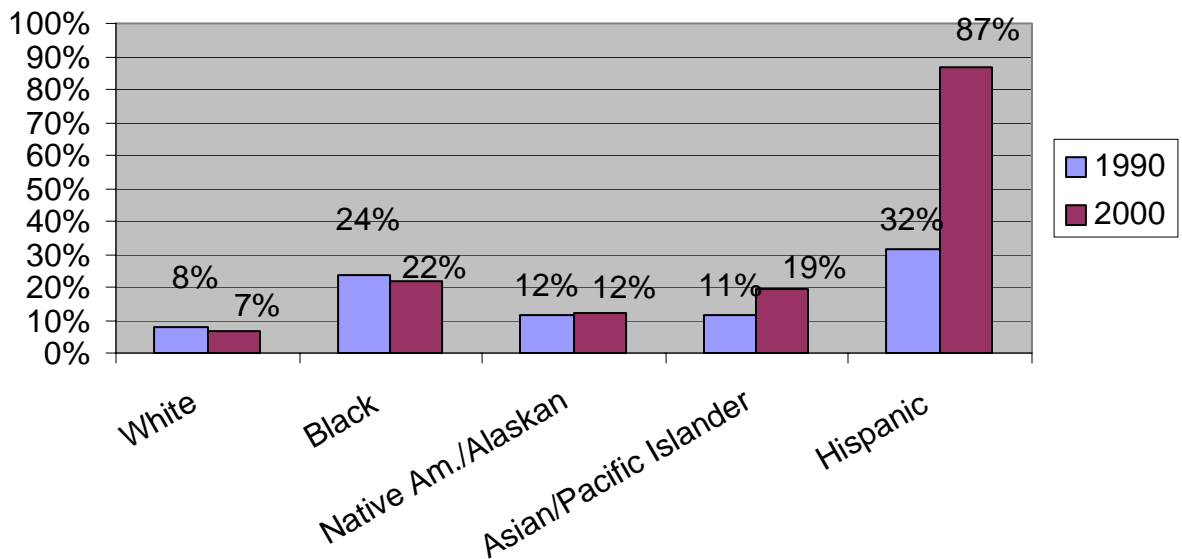
**Chart 5 - Number of People Age 65+ Living Below Poverty Level by Household Type
Kent County 1990 – 2000**



Source: U.S. Census Bureau 2000

- There was a slight decrease in White and Black populations living below the poverty level between 1990 and 2000; however, there was a significant increase in Asian and Hispanic seniors living below the poverty level in 2000 as compared to 1990 (Chart 6).¹ It should be noted that, the US Census Bureau changed the race definition in 2000, creating comparability problems between the 1990 & 2000 data. However, comparability between 1990 and 2000 for White, Black, Native American, Asian (including Pacific Islanders) and Hispanic populations is high.

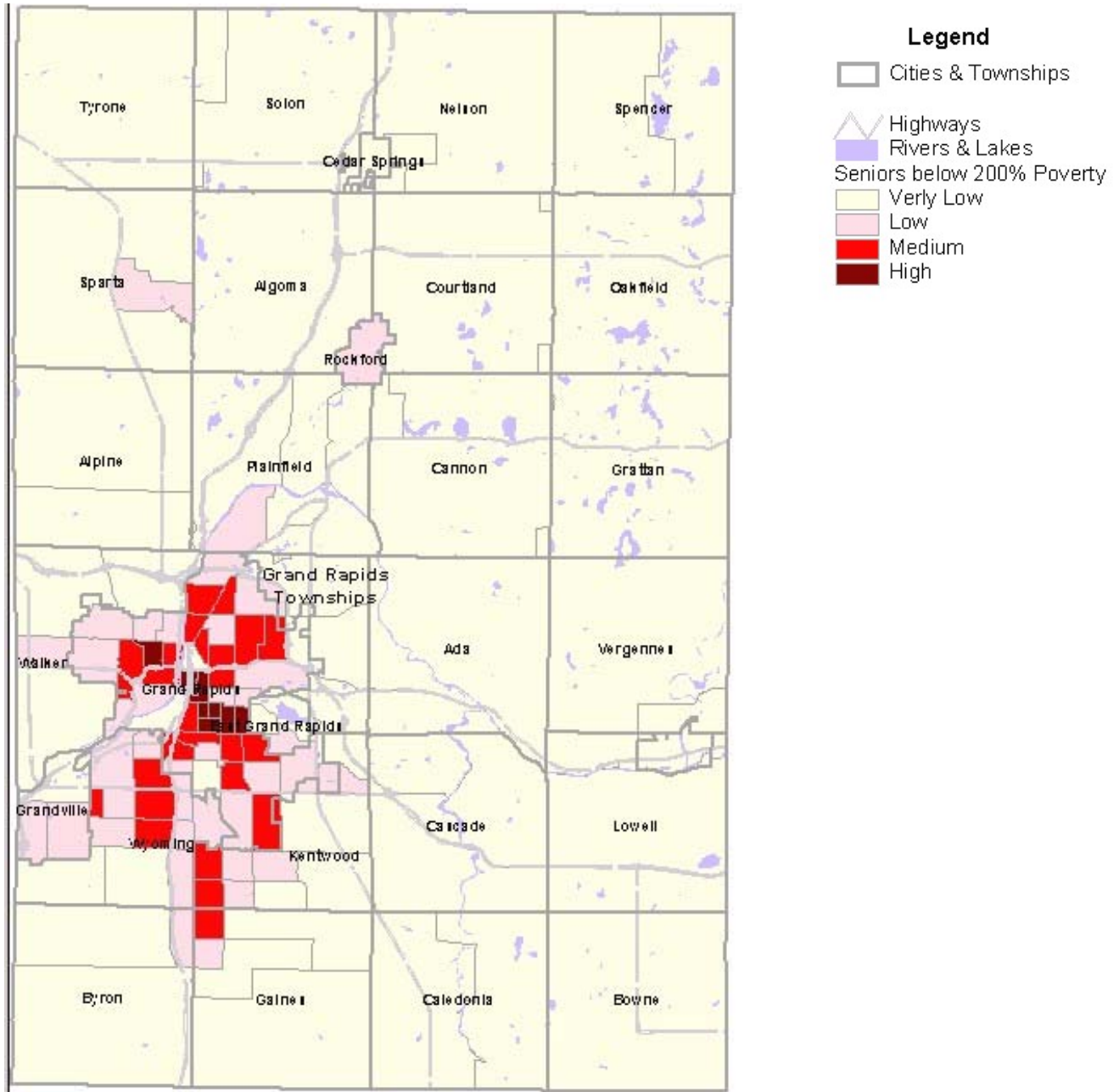
**Chart 6 – Percent of Population (65+) Living Below Poverty Level By Race
Kent County 1990 – 2000**



Source: U.S. Census Bureau 2000

- Within Kent County, the highest concentrations of seniors living below the 200% above poverty level mark (calculation based on census tract land area) are within Grand Rapids. Map 1 is useful to service providers attempting to target large numbers of seniors in need who are living close to each other.

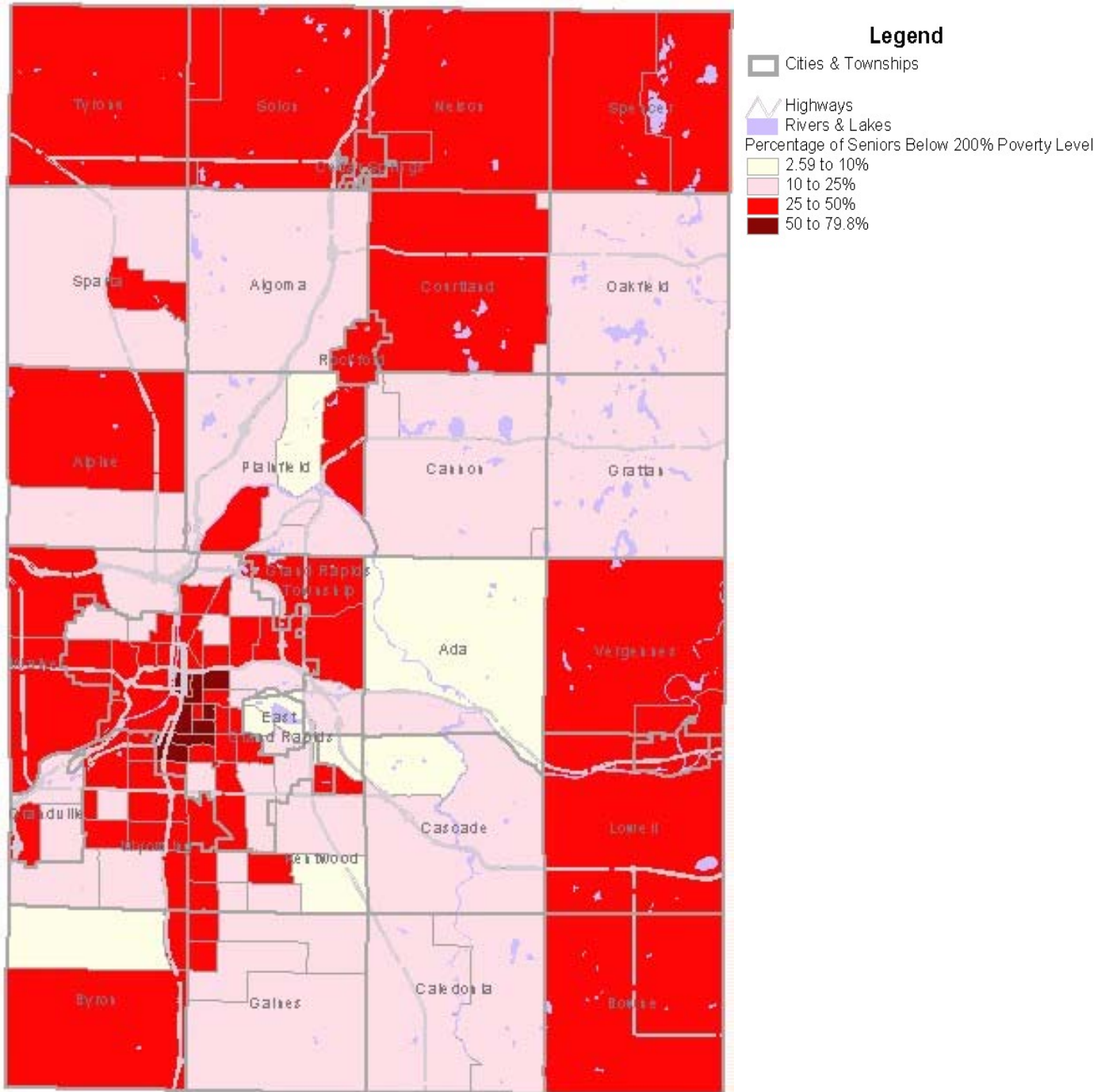
**Map 1 - Density of Seniors (65 and over)
Living Below the 200% Above Poverty Level Mark
Kent County 2000 (Census Tract Level Data)**



Source: U.S. Census Bureau 2000

- A significant number of rural townships in Kent County have a large amount of their elderly living below 200% poverty level. Map 2 illustrates the **percentage** of a census tract's population of seniors (65+) living below 200% of poverty level.

**Map 2 – Percent of Senior Population (65 and over) Below 200% of Poverty Level
Kent County 2000 (Census Tract Level Data)**



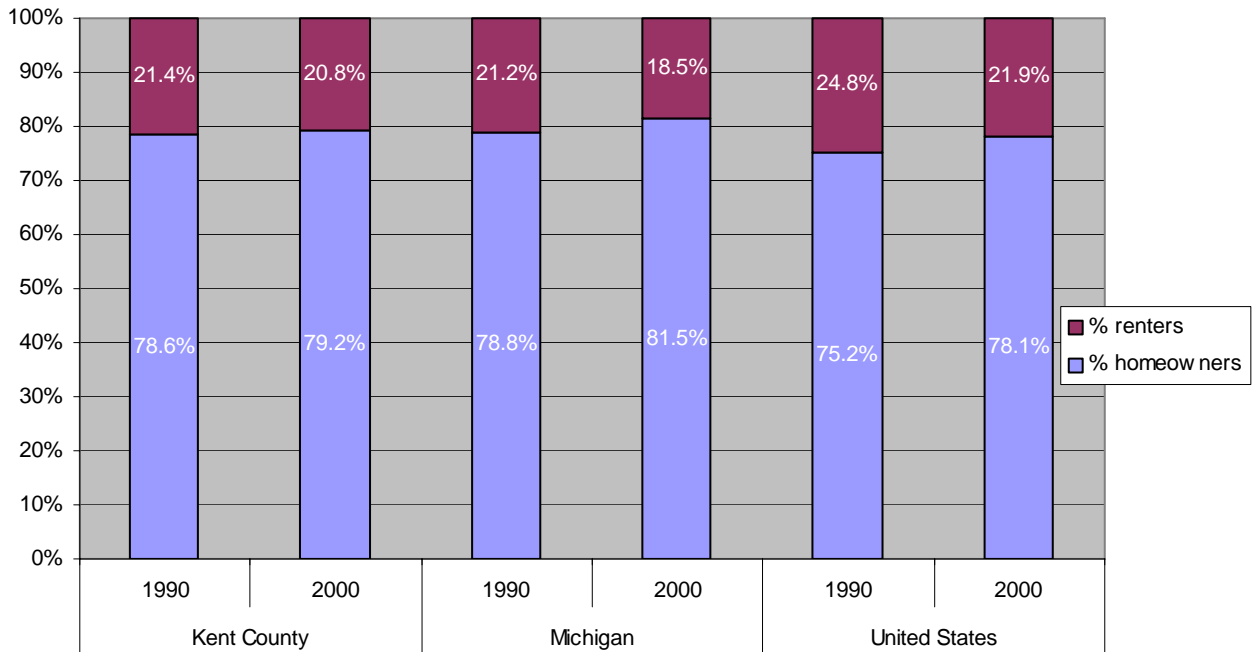
Source: U.S. Census Bureau 2000

Demographics

Variable 3: Living Arrangements

- Examining the living arrangements of Kent County’s older population is important because living arrangements are closely linked to income, health status, and the availability of caregivers.³
- When a living environment is affordable and appropriate, older adults are more likely to remain healthy and independent.⁴ Homeownership is typically used as an indicator of affordable housing. In 2000, 29,752 (79.2%) Kent County householders age 65+ were homeowners, a 0.6% increase from 1990. Whereas, Michigan and the United States experienced 2.7% and 2.9% increases in senior home ownership respectively (Chart 7).¹

Chart 7 –Distribution of Homeowners vs Renters for People Age 65+ Kent County 2000



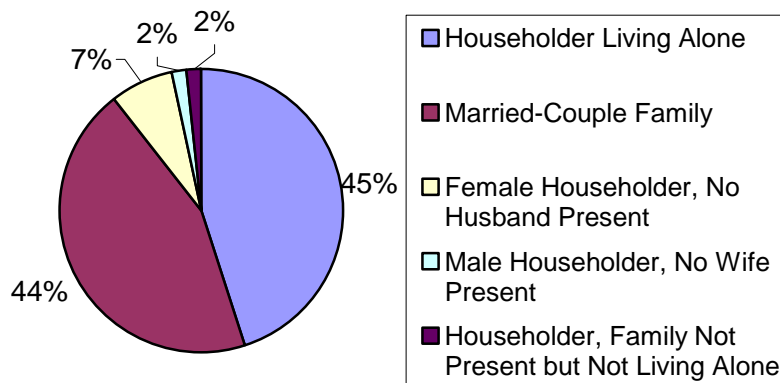
Source: U.S. Census Bureau 2000

- For the years of 1990 and 2000, 42.9% and 41.6% of the householders aged 65+ in Kent County spent 35% or more of their income on housing rent. The Michigan averages were 39.7% and 37.6% respectively.¹
- In Kent County during 2000, 63% of the senior population age 65+ were designated as householders. The term householders refers to the person (or one of the persons) in whose

name the housing unit is owned or rented . If there is no such person, any adult member, excluding roomers, boarders, or paid employees can be referenced as the householder. Only one person in each household is designated as the "householder." ¹

- In 2000, 53% of householders (65+) who were living in Kent County, were residing with one or more family members*, while 47% were living in non-family households* (Chart 8). These numbers are not significantly different from those seen in Kent County during 1990. However, when comparing Kent County numbers to state and national numbers from 2000, a greater disparity can be noticed. Sixty-three percent of householders (65+) in the State of Michigan lived in family households. That same year, the national percentage in family households was 64%.¹

**Chart 8 - Householders Age 65+ by Household Type
Kent County 2000**



Source: U.S. Census Bureau 2000

- The percent of older adults who are institutionalized in Kent County is shrinking. According to the US Census, in 1990, 4,833, or 9%, of the householders age 65+ were institutionalized in Kent County. For the year 2000 the comparable numbers were: 3,796 (6.4%) in Kent County, 48,106 (3.9%) in Michigan, and 1,641,076 (1.3%) in the United States. The Institutionalized population is made up of patients or inmates that are under formally authorized, supervised care or custody in institutions regardless of the availability of nursing or medical care, the length of stay, or the number of people in the institution.¹
- In Kent County during 2000, 7,276 grandparents were living with their grandchildren.¹

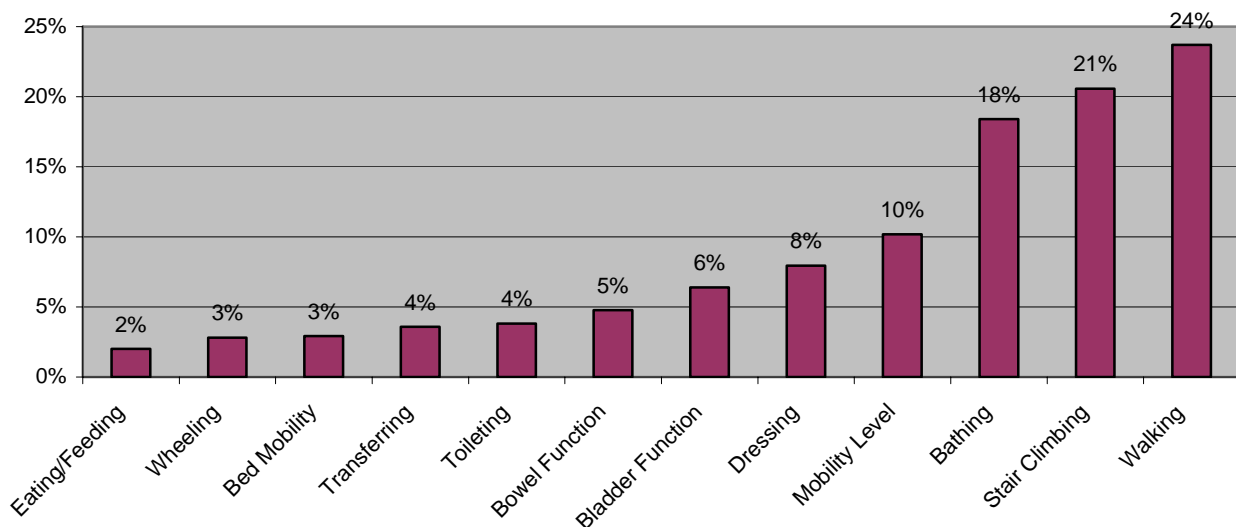
* Two types of householders are distinguished: ‘family’ householders and ‘non-family’ householders. A family householder is a householder living with one or more people related to him or her by birth, marriage, or adoption (including sub-generations). The householder and all of the people in the household related to him or her are considered family members. A non-family householder is a householder living alone or with non-relatives only.

** ‘Householder, no spouse present’ includes family households that are maintained by a male or female with no spouse of the householder present.

General Health

- 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.⁵
- Since 1997, the national percentage of adults aged 65 years and over who need the help of other persons with ADL’s has remained stable at about 6.5% (Center for Disease Control, 2002).⁶
- Although ADL data is not available for the entire population of older adults in Kent County, a glimpse of Kent County’s senior population is seen when looking at the ADL data collected by Michigan’s Office of Services to the Aging (OSA). OSA collects ADL data for Kent County seniors who participate in OSA programs (approximately 6% of Kent County’s senior population). OSA administers Federally funded Title III aging programs under the Older Americans Act and state-funded aging programs in the following areas: Personal Care, Homemaker, Home Health Aide, Chore, Home Delivered Meals, Care Management, Case Coordination & Support, Adult Day Care, and Respite Care (Chart 9).⁵

Chart 9 - Percent of OSA Clients Age 65+ Reporting Impairments in Activities of Daily Living Kent County 2002



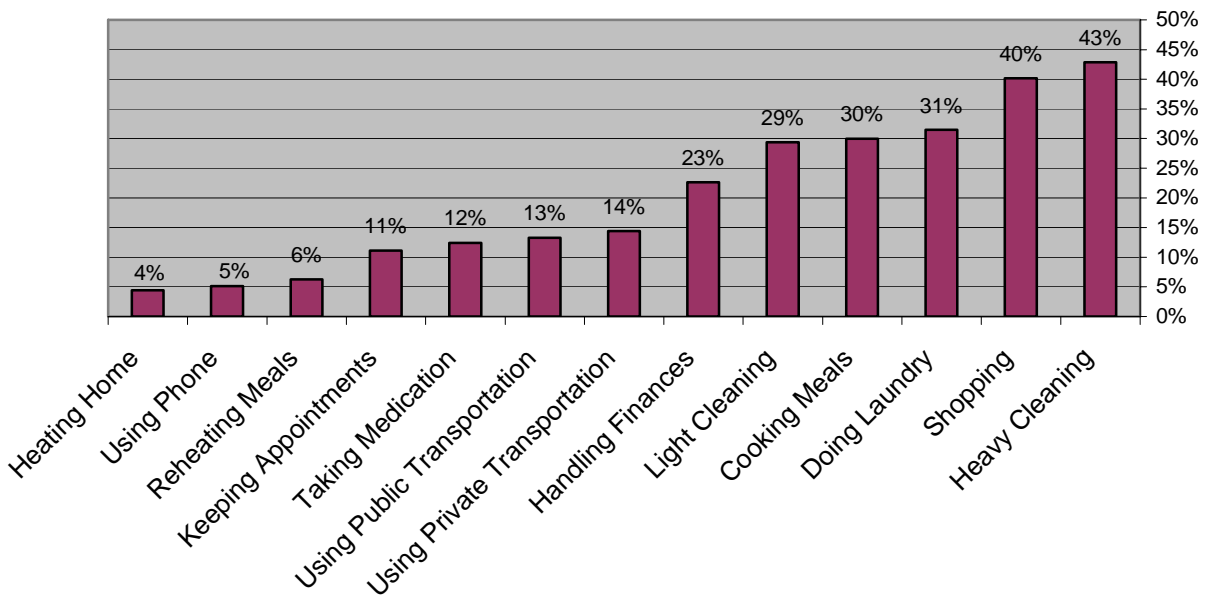
Source: Office of Services to the Aging, Michigan Department of Community Health

General Health

Variable 5: Limitation in Instrumental Activities of Daily Living (IADL)

- ‘Impairments in Instrumental Activities of Daily Living’ (IADL) 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 the telephone, doing heavy housework, doing light housework, and transportation ability.⁵
- Like ADL data, IADL data is not available for the entire population of older adults in Kent County. Again, a glimpse of Kent County’s senior population is seen when looking at the IADL data collected by Michigan’s Office of Services to the Aging (OSA). OSA collects IADL data for Kent County seniors who participate in OSA programs (approximately 6% of Kent County’s senior population)(Chart 10).⁵

Chart 10 - Percent of OSA Clients Age 65+ Reporting Impairments in Instrumental Activities of Daily Living Kent County 2002



Source: Office of Services to the Aging, Michigan Department of Community Health

Morbidity & Mortality

Variable 6: Leading Causes of Preventable Hospitalizations

- According to the Michigan Department of Community Health, “Preventable Hospitalizations are those for which timely and effective ambulatory care can help reduce the risks for common problems such as asthma, diabetes or dehydration. High rates of preventable hospitalizations in a community may be an indicator of a lack of or failure of prevention efforts, a primary care resource shortage, poor performance of primary health care delivery systems or other factors that create barriers to obtaining timely and effective care.”⁷
- In 2000, the rate of preventable hospitalizations for the county was 747.2 per 10,000 age 65+ compared to 1014.9 for the state of Michigan. Congestive heart failure was the leading cause of preventable hospitalizations in the county for people age 65+ with a rate of 157.8 per 10,000 residents (Table 4).⁷

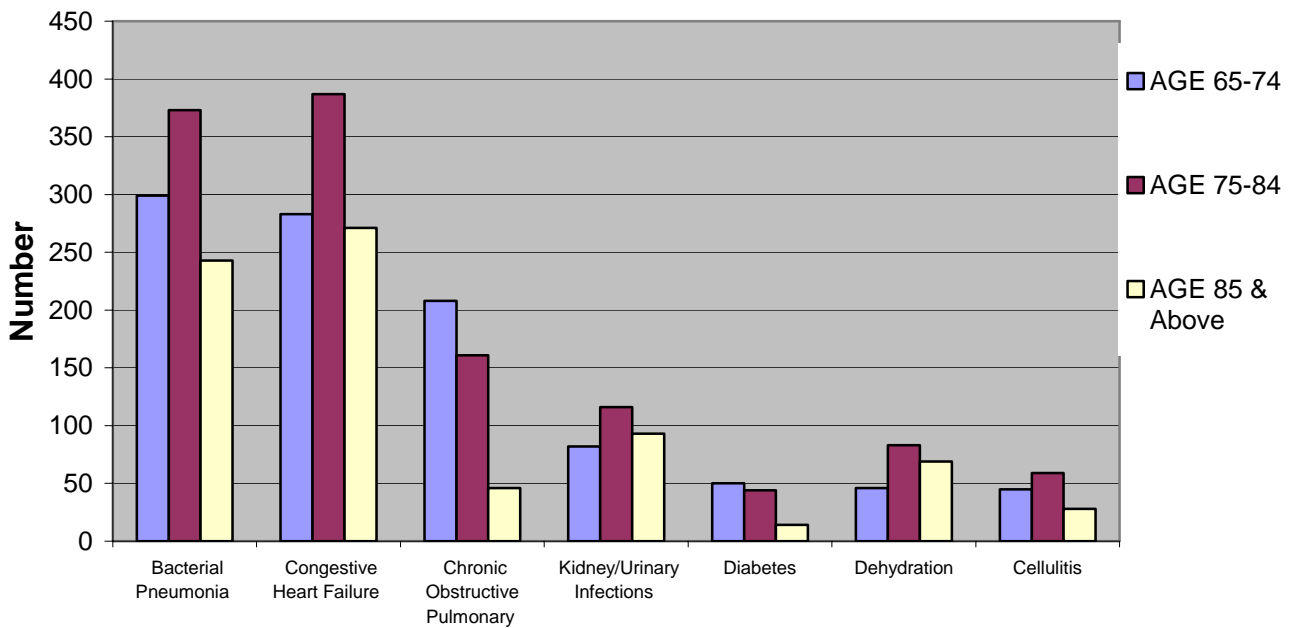
Table 4 - Leading Causes of Preventable Hospitalizations, Patients Aged 65+ Kent County/Michigan 2000

	Number of Preventable Hospitalizations		Rank		Rate Per 10,000 Aged 65+	
	Kent County 2000	Kent County Average 1996 - 1998	Kent County 2000	Michigan 2000	Kent County 2000	Michigan 2000
All Preventable Hospitalizations	4,455	4,212			747.2 ±21.9	1014.9± 5.7
Congestive Heart Failure	941	944	1	1	157.8 ±10.1	244.4± 2.8
Bacterial Pneumonia	915	801	2	2	153.5 ±10.0	169.3± 2.3
Chronic Obstructive Pulmonary	415	373	3	3	69.6 ± 6.7	115.2± 1.9
Kidney/Urinary Infections	291	268	4	4	48.8 ± 5.6	60.9± 1.4
Dehydration	198	208	5	5	33.2 ± 4.6	53.1± 1.3
Cellulitis	132	114	6	6	22.1 ± 3.8	30.6± 1.0
Diabetes	108	77	7	7	18.1 ± 3.4	24.4± 0.9
Asthma	63	66	8	9	10.6 ± 2.6	14.9± 0.7
Convulsions	62	53	9	10	10.4 ± 2.6	14.3± 0.7
Angina	54	102	10	8	9.1 ± 2.4	23.3± 0.9
All Other Preventable Hospitalization Conditions	1276	1,207			214.0 ±11.7	264.4± 2.9

Source: Michigan Resident Death Files, Vital Records & Health Data Development Section, Michigan Department of Community Health. Population Estimate, Office of the State Demographer, Michigan Department of Management and Budget.

- Congestive heart failure and bacterial pneumonia are the leading causes of preventable hospitalizations for all three senior age groups. The age group of 75-84 years has the highest number of preventable hospitalizations in all categories, except chronic obstructive pulmonary disease and diabetes, where seniors ages 65-74 have the higher occurrence rate (Chart 11).⁷

**Chart 11 - Number of Preventable Hospitalizations By Age
Kent County 2000**



Source: Michigan Resident Death Files, Vital Records & Health Data Development Section, Michigan Department of Community Health

Morbidity & Mortality

Variable 7: Leading Causes of Death

- In 2001, there were 3,998 deaths in Kent County (crude rate 726.4 deaths per 100,000, age-adjusted rate 784.9 per 100,000 population). Risk of mortality increases with age. Of the deaths in Kent County in 2001, 77% of the deceased were 65 years or older.⁸
- Causes of death are defined as ‘the underlying causes that give rise to the chain of events leading to death’. Identification of the leading causes of death adds to the understanding of the health status of Kent County. In addition, identification can help members of the community prioritize health concerns, and to help develop intervention programs.⁸

**Table 5 – Rank of Leading Causes of Death by Age
Kent County and Michigan Residents 2001**

	45-74	
	Kent Co	Michigan
	2001	2001
Cancer	1	1
Diseases of the Heart	2	2
Chronic lower respiratory diseases	3	3
Stroke	4	4
Accidents	5	6
Diabetes Mellitus	6	5
Pneumonia & Influenza	7	8
Kidney Disease	8	7
Septicemia	9	9

	75+	
	Kent Co	Michigan
	2001	2001
Diseases of the Heart	1	1
Cancer	2	2
Stroke	3	3
Chronic lower respiratory diseases	4	4
Alzheimer's Disease	5	6
Pneumonia & Influenza	6	7
Diabetes Mellitus	7	5
Accidents	8	9
Kidney Disease	9	8

Source: Michigan Resident Death Files, Vital Records & Health Data Development Section, Michigan Department of Community Health.

- Heart disease and cancer top the list of leading causes of death in both Kent County and Michigan. At the county level, they accounted for approximately 50% of deaths among older adults (75+) in 2001 (Table 6).⁸

**Table 6 - Number of Deaths by Age and Cause
Michigan and Kent County Residents 2001**

	Number of Deaths Kent County 2001			Number of Deaths Michigan 2001		
	75+	45-64	All Other Ages	75+	45-64	All Other Ages
Heart Disease	796	325	23	17,726	8,294	745
Cancer	426	423	39	8,430	10,355	823
Cerebrovascular Disease (Stroke)	208	52	8	4,285	1,266	115
Chronic Lower Respiratory Diseases (CLRD)	129	63	0	2,477	1,592	64
Alzheimer's Disease	103	5	0	1,648	148	1
Pneumonia and Influenza	79	28	4	1,519	436	108
Unintentional Injuries (Includes Motor Vehicle Accidents)	65	38	4	863	956	7,194
Diabetes	59	30	68	1,434	1,096	110
Kidney Disease	47	16	2	1,050	445	43
Septicemia	10	7	1	521	312	44
All Other Causes	506	254	180	8,556	5,645	3,712
All Causes of Death	2,428	1,241	329	48,509	30,545	7,194

**Source: 2001 Michigan Resident Death Files, Vital Records and Health Data
Development Section, MDCH.**

Morbidity & Mortality

Variable 8: Trends in Mortality

- The leading cause of death for seniors age 75 and older in Kent County has been heart disease for the last 5 years. In 2001, heart disease accounted for 33% of all deaths to persons older than 75. Despite this, the average number of deaths per year due to heart disease dropped between 1996 and 2001.⁸
- Cancer, cerebrovascular disease (strokes), chronic lower respiratory diseases (CLRD), and unintentional injuries complete the list of the top five causes of death in Kent County for adults over age 75. Together these diseases account for over half (52%) of all deaths to adults aged 75 years and older.⁸

**Table 7 - Three-Year Moving Averages, Mortality Rates per 100,000 Population
Kent County 1996 - 2001**

	All Ages		Ages Under 50		Ages 50 - 74		Ages 75 and older	
	Average Number of Deaths	Age Adjusted Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000
Heart Disease								
1999-2001	1,177.3	232.6±7.7	48.7	11.7±8.3	329.0	321.1±3.2	799.7	2,577.0±2.0
1998-2000*	1,205.0	240.0±7.8	51.0	12.3±8.1	335.0	329.9±3.2	819.0	2,664.0±2.0
1997-1999*	1,222.7	247.4±8.0	57.3	13.8±7.6	334.3	334.8±3.2	831.0	2,754.1±2.0
1996-1998*	1,241.3	257.3±8.3	55.3	13.4±7.8	336.7	345.9±3.1	849.3	2,898.3±2.0

	All Ages		Ages Under 50		Ages 50 - 74		Ages 75 and older	
	Average Number of Deaths	Age Adjusted Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000
Cancer								
1999-2001	892.3	179.3±6.8	71.3	17.1±6.8	419.7	409±2.8	401.3	1,293.3±2.9
1998-2000*	891.0	180.2±6.8	77.3	18.6±6.6	428.0	421.4±2.8	385.7	1,254.9±2.9
1997-1999*	887.7	181.7±6.9	78.0	18.8±6.5	420.3	420.9±2.8	389.3	1,290.3±2.9
1996-1998*	886.7	184.8±7.0	78.0	18.8±6.5	409.3	420.5±2.9	399.3	1,362.7±2.9

	All Ages		Ages Under 50		Ages 50 - 74		Ages 75 and older	
	Average Number of Deaths	Age Adjusted Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000
Stroke								
1999-2001	267.3	52.4±3.6	11.0	2.6±17.4	52.0	50.7±8.0	204.3	658.5±4.0
1998-2000*	268.0	53.0±3.7	10.3	2.5±18.0	51.3	50.5±8.1	206.3	671.4±4.0
1997-1999*	274.0	55.1±3.8	11.3	2.7±17.1	51.0	51.1±8.1	211.7	701.5±4.0
1996-1998*	278.3	57.3±3.9	10.0	2.4±18.3	53.3	54.8±7.9	215.0	733.7±3.9

	All Ages		Ages Under 50		Ages 50 - 74		Ages 75 and older	
	Average Number of Deaths	Age Adjusted Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000
CLRD								
1999-2001	215.0	42.8±3.3	3.7	0.9±30.2	72.7	70.9±6.8	138.7	446±4.9
1998-2000*	203.0	40.7±3.2	4.3	1.0±27.7	72.0	70.9±6.8	126.7	412.2±5.1
1997-1999*	185.0	37.5±3.1	4.3	1.0±27.7	62.7	62.8±7.3	118.0	391.1±5.3
1996-1998*	176.3	36.5±3.1	3.7	0.9±30.2	64.3	66.1±7.2	108.3	369.7±5.5

	All Ages		Ages Under 50		Ages 50 - 4		Ages 75 and older	
	Average Number of Deaths	Age Adjusted Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000	Average Number of Deaths	Age Specific Rate Per 100,000
Unintentional Injuries								
1999-2001	176.0	33.1±2.8	33.3	16.3±10.0	85.7	27.2±6.2	57.0	183.7±7.6
1998-2000*	170.0	32.2±2.8	34.0	16.7±9.9	88.0	28.0±6.2	48.0	156.2±8.3
1997-1999*	159.0	30.5±2.7	31.0	15.3±10.4	84.3	27.0±6.3	43.7	144.7±8.7
1996-1998*	156.3	30.2±2.8	29.7	14.7±10.6	84.3	27.3±6.3	42.3	144.5±8.9

Source: Michigan Resident Death Files, Vital Records & Health Data Development Section, Michigan Department of Community Health, Population Estimate (latest update 10/2000), Office of the State Demographer, Michigan Department of Management and Budget

*The manner in which underlying cause of death is coded and classified was revised in 1999 to reflect changing medical opinion and practice. The comparability between classification schemes for Heart Disease and Cancer is high, meaning that the change should have little or no impact on the comparisons of mortality statistics over time. The comparability between Strokes, CLRD, and Unintentional Injuries is lower, meaning that caution should be taken in drawing specific inferences from comparisons of mortality statistics over time.⁸

* Death Rates are per 100,000. Computed by the direct method, using as the standard population the age distribution of the total population of the United States for the year 2000. The true rate lies between the lower and upper bounds of the interval with 95% statistical confidence. If the confidence interval is large for a single year comparison, it is suggested that you use the three-year and five-year moving average rates.⁸

Care & Assistance

Variable 9: Nursing Home Utilization

- In 2000, Kent County had 23 licensed and regulated nursing homes with 2,449 beds (41.1 beds per 1,000 elderly people age 65 and above) (Table 8).¹⁰

**Table 8 - Nursing Home Facilities
Kent County 1998 - 2002**

	Number of Facilities	Total Number of Beds	Occupancy Rate
2001 - 2002	23	2,405	88.12%
2000 - 2001	23	2,449	87.50%
1999 - 2000	23	2,401	87.68%
1998 - 1999	24	2,658	87.96%

**Source: Michigan Department of Community Health
Data Analysis Reimbursement and Settlement Division**

- Michigan has witnessed a growth of unlicensed/unregulated assisted living facilities. In Michigan, both licensed adult foster care homes and homes for the aged as well as unlicensed settings hold themselves out as assisted living facilities serving older persons. At least one nursing home closed and re-opened as an assisted living facility with some of the same residents (Citizens For Better Care, 2000).⁹
- During 2001 in Michigan, it cost \$57,400 on average to spend a year in a nursing home. This is slightly higher than the national average (\$54,900).¹³ The ratio of nursing home Medicaid, Medicare and other payment activity remained steady between 1998 and 2002 (Table 9).

**Table 9 - Nursing Home Activity by Payment Type
Kent County 1998 – 2002**

	Medicaid Activity	Medicare Activity	Other Activity
2001-2002	62.27%	10.58%	27.14%
2000-2001	63.84%	9.17%	27.00%
1999-2000	62.32%	9.61%	28.07%
1998-1999	61.70%	11.00%	27.30%

**Source: Michigan Department of Community Health
Data Analysis Reimbursement and Settlement Division**

Care & Assistance

Variable 10: Assistance

- The Greater Grand Rapids Community Survey results for 2001 and 2002 show that nearly 40% of survey respondents provide help for an elderly relative or friend. In 2001 over one-quarter (28.9%) reported missing work occasionally in order to provide that help. This number decreased significantly in 2002 to 10.3% (Table 10).¹²

**Table 10 - Percent Providing Elder Assistance by Age
Greater Grand Rapids 2001 – 2002**

	18-24	25-34	35-44	45-59	60-69	70-79	80+
2002	46.7%	37.8%		44.4%	42.0%	24.9%	34.6%
2001	36.8%	25.9%	44.3%	49.7%	46.3%	35.9%	21.6%

Source: Community Research Institute

- Community survey respondents reported that they provide many forms of assistance, such as running errands, transportation for doctor visits, yard work, and companionship (Table 11).¹²

**Table 11 - Types of Assistance Provided to Elderly Relatives or Friends
Greater Grand Rapids 2001 – 2002**

	2002	2001	Percent Change
Errands	41.2%	67.6%	-39.1%
Yard Work	34.3%	38.8%	-11.6%
Bathing or Personal Care	29.6%	11.2%	164.3%
Housework	28.3%	34.1%	-17.0%
Handling Financial Matters	23.6%	31.3%	-24.6%
Meal Preparation	17.6%	23.3%	-24.5%
Other: Companionship, Home Repair, Etc.	6.9%	11.4%	-39.5%

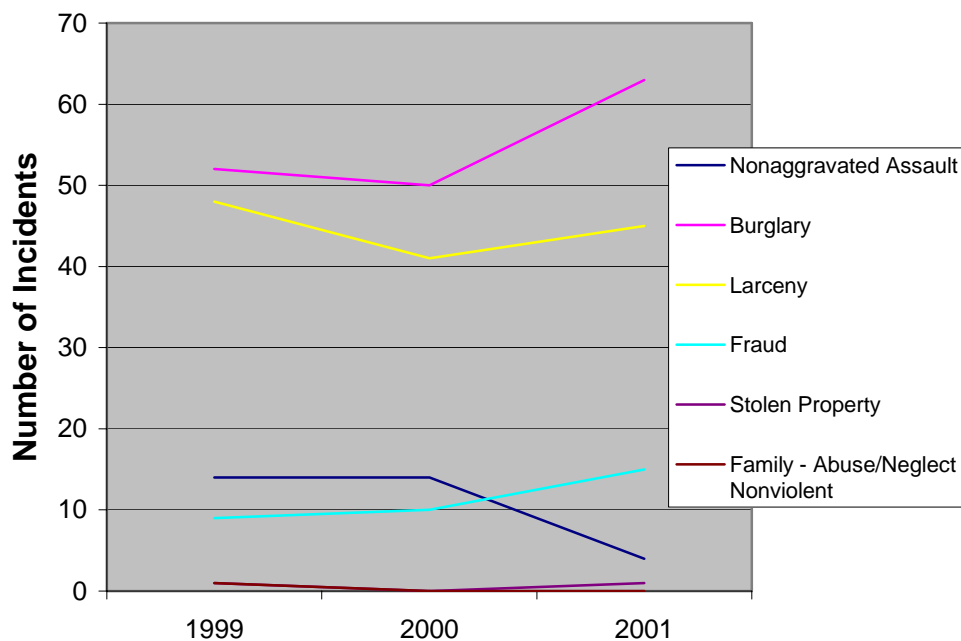
Source: Community Research Institute

Quality of Life

Variable 11: Community Safety

- In 1999, overall crime was down 5% in Michigan, but crime against persons over 65 was up, including: larceny (up 4%), fraud (up 8%), burglary (up 11%), stolen property (up 17%), non-aggravated assault (up 18%), and neglect (up 36%). Since 1999, burglary and fraud against older adults (age 65+) have continued to increase (Chart 12).¹¹

**Chart 12 - Crimes Against the Elderly
Kent County Residents Age 65+**



**Source: Michigan State Police Criminal
Justice Information Center 2003**

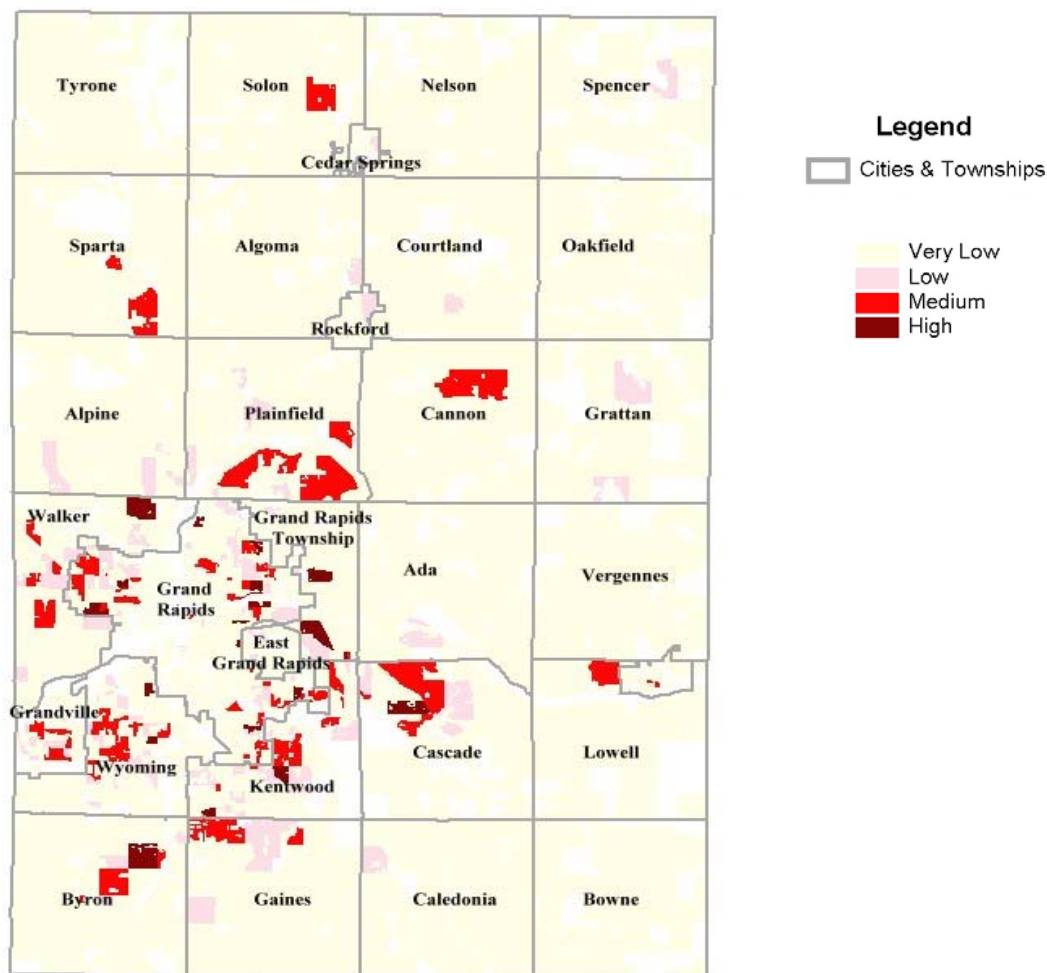
- The above data includes MICR (Michigan Incident Crime Reporting) data only. UCR (Uniform Crime Report) data is done separately. Most police departments in Kent County, however, use the MICR system.¹¹

Quality of Life

Variable 12: Senior Services and Transportation

- The majority of older adults in Kent County live in the City of Grand Rapids. In fact, one in every 2.6 Kent County adults 65 years or older (38.5%) lives in the City of Grand Rapids. Almost 11% live in the City of Wyoming. Older adults comprise at least 10% of the population in a third of the communities in Kent County including: Grand Rapids Charter Township (15.4%), Lowell City (13.8%), Grandville City (12.8%), Grand Rapids City (11.6%), Sparta Township (11.6%), Cascade Township (11.4%) (Map 3).

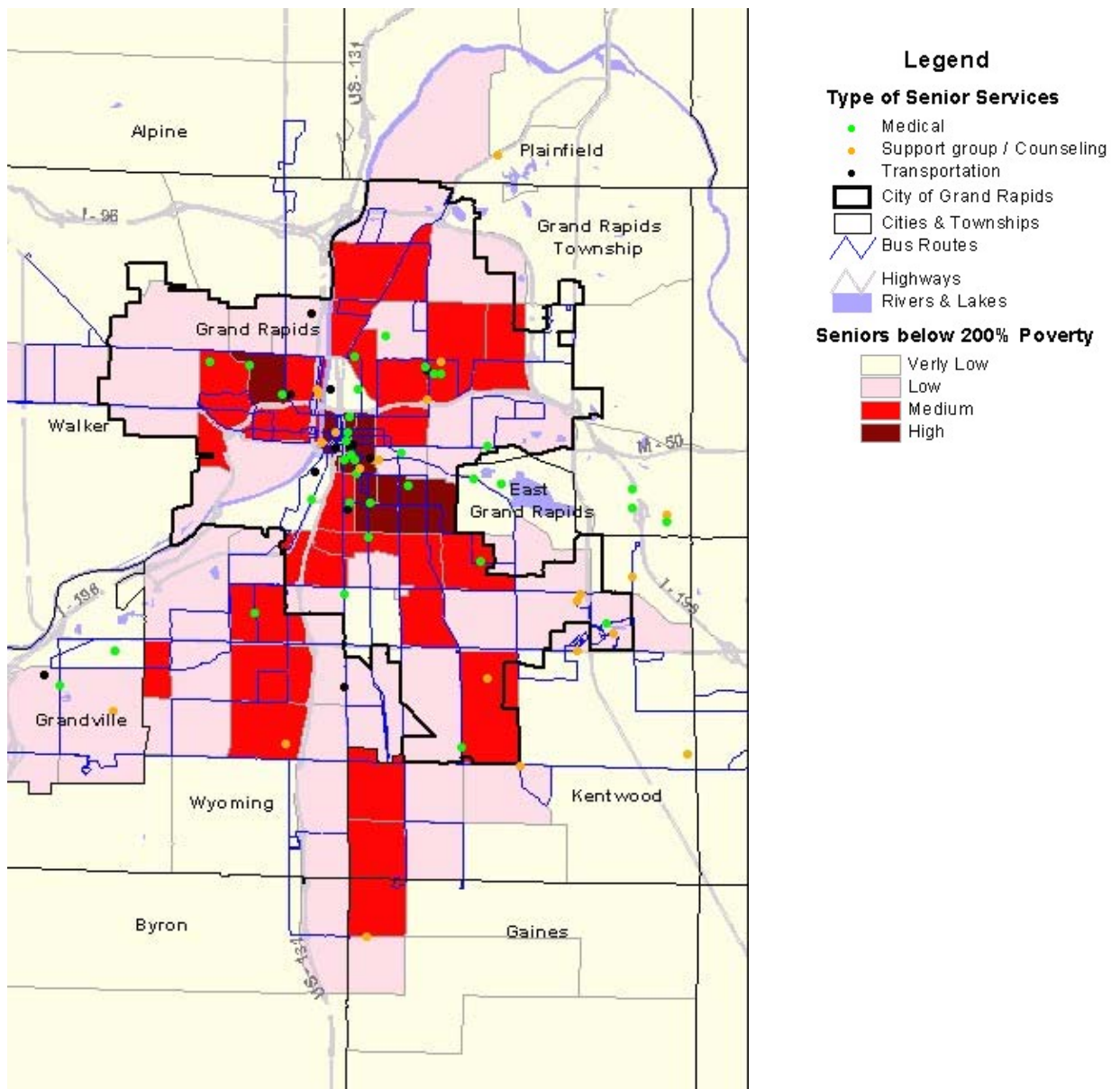
**Map 3 - Density of Seniors (Age 65+)
Kent County 2000**



Source: U.S. Census Bureau 2000
Mapped by: Community Research Institute

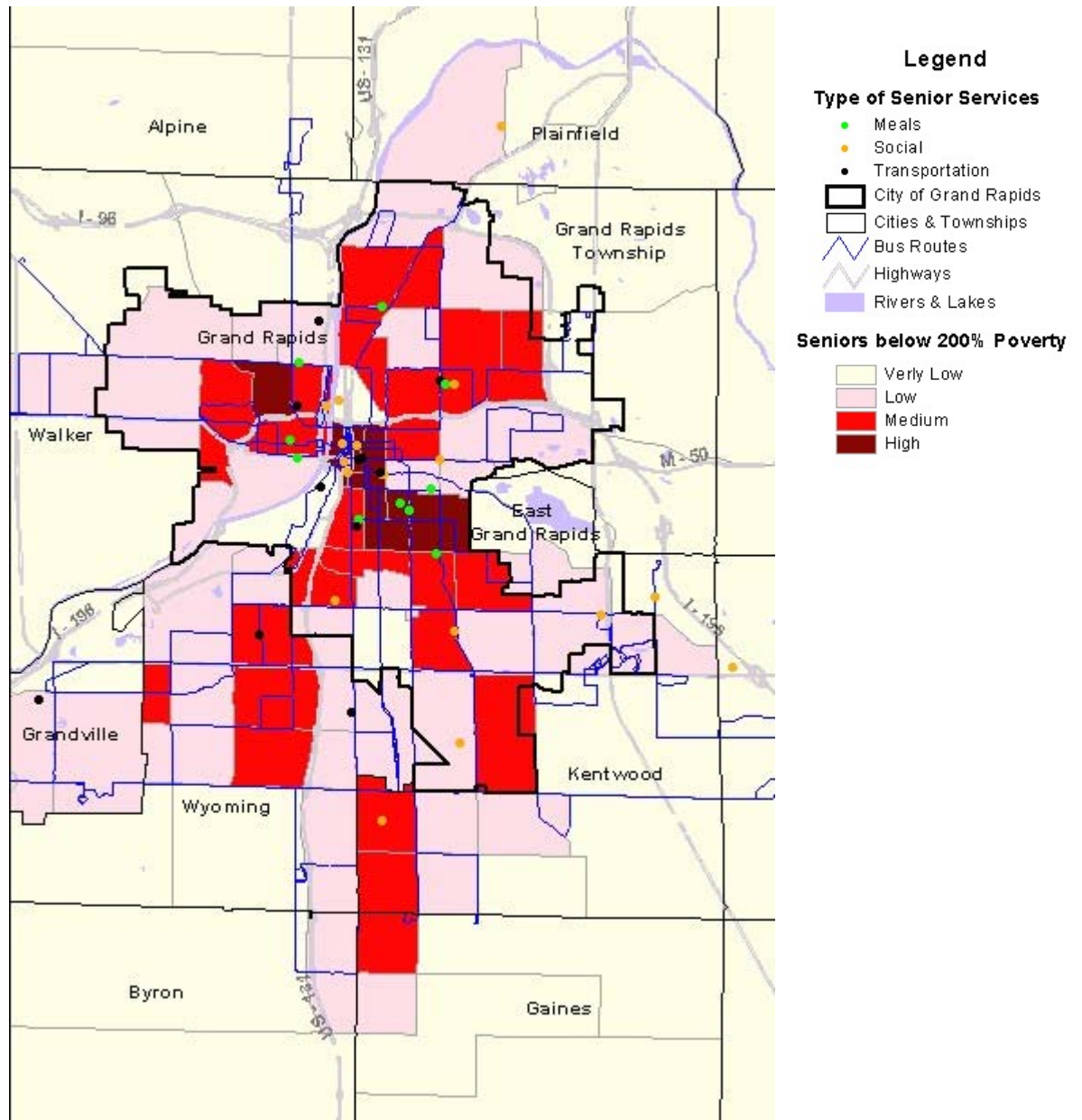
- Looking closer at the Grand Rapids area, medical services appear to be concentrated in the central part of Grand Rapids where the greatest number of seniors living below the 200% above poverty mark reside. (Map 3).
- Although the established ITP bus routes are focused within the Grand Rapids city limits, seniors are connected to services via the GO! Bus and other transportation providers which allow for senior transportation throughout Kent County for a reduced or free amount.

Map 4 - Location of Medical Services and Transportation Serving Seniors Greater Grand Rapids 2000



Source: U.S. Census Bureau 2000
 Mapped by: Community Research Institute

**Map 5 - Location of Senior Food, Social and Transportation Services
Greater Grand Rapids 2000**



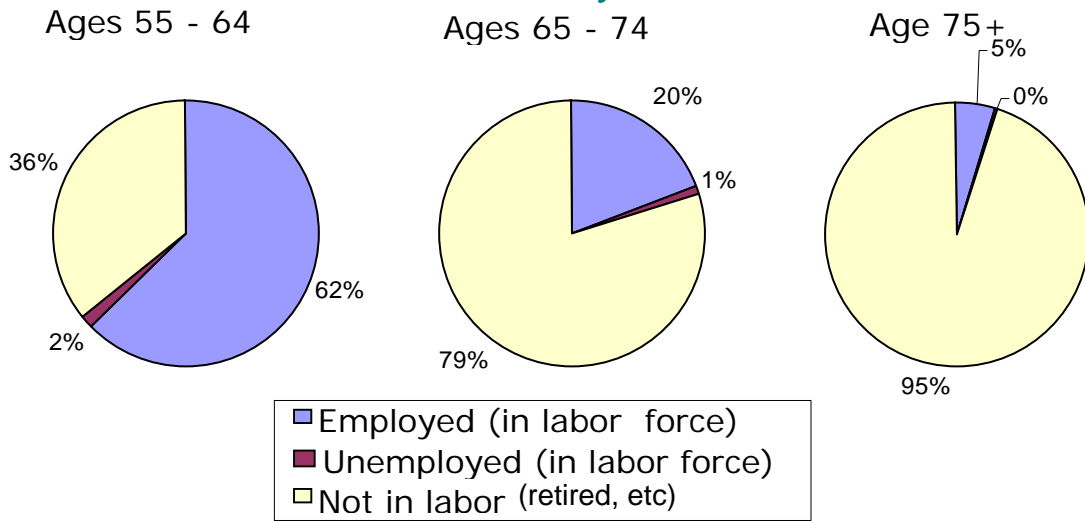
**Source: U.S. Census Bureau 2000
Mapped by: Community Research Institute**

Quality of Life

Variable 13: Employment

- 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 sense of value to the community that work often provides.³
- In 2000, 13% of older adults (65+) were in the workforce. The work force is composed of two groups of people, working (employed) and actively looking for work (unemployed). In Kent County, 95.8% of older adults (65+) in the work force were employed, while 4.2% were unemployed (Chart 13).¹

**Chart 13 - Employment Status of Kent County Residents By Age
Kent County 2000**



Source: U.S. Census Bureau 2000

- From 1990 to 2000, there was a 33.7% increase in Kent County seniors aged 70 or older that were employed. During the same time period, the change in the senior who were employed for the 65 - 69 and 55 - 64 age groups only increased 15.5% and 9.7% respectively.¹

Additional Areas of Interest

In preparing this report, Community Interpretive Partners brought forward several areas where more community level data is needed. These areas included:

- **Gathering data on older minorities** – According to the Federal Interagency Forum on Aging-Related Statistics, there is a lack of basic data about aging minority populations. This is largely due to the small sample sizes of these populations as well as to language barriers that prevent certain racial and ethnic groups from participating in surveys. Currently, only the decennial census has adequate coverage to represent some of the smallest racial and ethnic groups, but even the census data lack critical information on health and disability that is essential to adequately study the well-being of older minorities.
- **Improving measures of disability** - Information on trends in disability is critical for monitoring the health and well being of the older population. Community Interpretive Partners indicated that disability data was their top information priority. Despite this, disability data (measurement of limitations in ADLs and IADLs) is presently only available for 6% of Kent County's senior population.
- **Measuring overall physical, mental and social health** – Asking Kent County's older adults to rate their own health as excellent, very good, good, fair, or poor in a survey could easily provide a common indicator of health. Questions could inquire into physical, emotional, and social aspects of health and well-being. Statistically, good to excellent self-reported health has been proven to correlate with lower risk of mortality.
- **Collecting Risk/Preventative Behavior Data** - Community level data on risk behaviors such as smoking, drinking, and seat belt usage are missing in Kent County. Also missing is preventative data such as rate of vaccinations against influenza and pneumococcal disease, physical activity and nutrition.

The Community Research Institute is interested in gathering additional input regarding areas of interest. In addition, CRI will explore new data sources for 2004's Healthy Seniors report.

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