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## *Identifying Pathways To An Aging-Friendly Community*

Report from the Survey of Seniors Aged 65 and Older In Contra Costa County  
Commissioned by Contra Costa for Every Generation  
Conducted by the AdvantAge Initiative



## Our Mission

Contra Costa for Every Generation is a countywide effort to make our local communities good places to age — supporting our aspirations to stay healthy, live independently and lead full and productive lives.

John Muir/Mt. Diablo Community Health Fund  
Y. & H. Soda Foundation  
Healthy Aging Initiative & Funding Partnership

March 22, 2005

### **Aging in Contra Costa County: A Report for the Community**

In October, 2004, The John Muir/Mt. Diablo Community Health Fund and Y. & H. Soda Foundation Healthy Aging Initiative & Funding Partnership provided seed funding to launch Contra Costa for Every Generation. This nine-month countywide planning process brings together 400 diverse stakeholders from the public, private and nonprofit sectors to identify strategies and develop an action plan for making Contra Costa communities aging-friendly. This report, which distills the results of a survey conducted by the national AdvantAge Initiative, will serve as baseline data for the group to begin its work.

#### **The Roots of This Effort**

Contra Costa for Every Generation grew out of lessons learned from funding the Healthy Aging Initiative, a funding partnership of the John Muir/Mt. Diablo Community Health Fund and the Y. & H. Soda Foundation. Formed in 2001, Healthy Aging is a six-year grantmaking initiative that focuses on expanding and enhancing the capacity of nonprofit organizations to help older adults age in place. After four years of directing almost \$4 million into projects conducted by 16 local nonprofit organizations, we've achieved considerable progress in connecting underserved, overlooked and isolated seniors to supportive services and social and recreational opportunities.

The last four years have also provided two important lessons about the future of aging in Contra Costa.

First, Baby Boomers – the 76 million Americans born between 1946 and 1964 – represent the greatest demographic shift in our country's history. This wave of aging will create significant demands for services in every

sector – demands beyond our current capabilities unless we begin to prepare now. These aging boomers also represent a considerable benefit because they possess skills and experience that can be used in new ways in an array of community endeavors.

The second lesson learned is that focusing exclusively on the nonprofit sector to prepare for this wave of aging is too limited a scope of action. To prepare our communities for the challenges and opportunities ahead, every sector of the community must be engaged. Consequently, we not only provided the seed funding for this project, but we also made a point of obtaining funding from others, including The California Endowment, The California Wellness Foundation, and the Contra Costa County Employment & Human Services Department.

Copies of this report, as well as a reference guide that contains all of the data and charts compiled from the survey, can be downloaded from the Contra Costa for Every Generation website: [www.foreverygeneration.org](http://www.foreverygeneration.org). We hope decision-makers, institutions, and interested residents in every sector of the community will find this report informative – and the starting point for a collaborative effort to make Contra Costa communities good places for all of us to grow old.

Grace Caliendo, President/CEO  
John Muir/Mt. Diablo  
Community Health Fund

Judy Murphy, Executive Director/CEO  
Y. & H. Soda Foundation

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## **Executive Summary**

High profile debates about Social Security and prescription drug costs for Medicare highlight a simple fact: America is aging. The tidal wave known as the Baby Boom generation is hitting retirement age, even as modern medicine and health education help people live longer. In Contra Costa, well over half the population is from the Baby Boom generation or older.

These facts prompted the John Muir/Mt. Diablo Community Health Fund and Y. & H. Soda Foundation to fund Contra Costa for Every Generation (CCEG), a project that gathers diverse stakeholders from across the county in an effort to make our local communities good places to age. To create a baseline picture that would jump-start the group's efforts, in late 2004 CCEG commissioned a survey of the county's older adults.

Overseen by the AdvantAge Initiative, which has conducted similar surveys in communities across the nation, the survey consisted of interviews of 721 adults, age 65 and older, evenly dispersed among the six regions in Contra Costa. The response rate was outstanding.

Interview questions probed those factors widely believed to be most essential to older adults leading healthy, independent, and productive lives. Consequently, the survey's results provide an important snapshot of how people age in Contra Costa County.

### **Good News, Bad News**

For many of the factors that contribute to successful aging, older adults in Contra Costa appear to be doing at least as well as – and often better than – their counterparts across the nation that the AdvantAge Initiative surveyed in mid 2003. That's important context to keep in mind.

But the survey also made clear that there are still many older adults in Contra Costa who are quite vulnerable to the challenges of aging. These people's lives are severely limited by health concerns. They struggle to find the help they need. They won't be able to continue to live in homes they've had for many years. And they are increasingly isolated – a recipe for physical and mental deterioration. People in East and West Counties,

African-Americans, and those living in poverty and in poor health appear to be the most vulnerable.

Among the survey's key findings:

- Over 92 percent say they want to remain in their current residence, but at least a quarter of those will struggle to afford it.
- Most people (97%) can get where they need to go outside the home, but 10 percent view public transportation as being of limited use or don't know it's available, few (1%) use it, and nearly a quarter believe it's a problem that needs addressing.
- Most older adults say they are healthy, but 10 percent have health concerns that limit their activities seven or more days per month.
- An extremely vulnerable minority (roughly 5,600 seniors) can't afford crucial health care products and services, such as prescription drugs, follow-up tests, and dental care.
- Though 83 percent say they are very satisfied with their neighborhood, 38 percent in East County, 24 percent in West County, and 38 percent of African-Americans are, at best, only somewhat satisfied with their neighborhoods.
- Many older adults appear to be socially isolated, as evidenced by the fact that nearly half don't get out of the house every day, over 27 percent would like to be more socially active, and nearly a quarter did not socialize with friends or neighbors in the past week.
- Large numbers of older adults (about 23 percent representing about 25,000 people) don't know how to find community support services that are necessary for their independence and for remaining connected in their communities.
- Of the roughly 25,000 older adults who struggle with the basic activities of daily living – taking a bath or shower, dressing, eating, getting in and out of a bed or chair, using or getting to the toilet, and getting around inside the home – 65 percent (almost two-thirds) don't receive all of the care they need to complete those activities.
- Respondents identified housing (16.1%), healthcare/prescription drugs (15.3%), and transportation (14.9%) as the three highest priorities they would like to see community leaders address.

These are important pieces of information, but much more information is needed to flesh out the picture – everything from service listings and bus

routes to crime and public health statistics can play a role. Community groups and individuals must also dig beneath the initial findings to better identify just who these vulnerable, older adults are. Where do they live? How can they be reached?

Fortunately, the participants in CCEG bring a wealth of information, insight, and experience to this process. Bringing it all together in one place provides the best chance to deliver the type of support that all of Contra Costa's elders so richly deserve. In turn, the county can benefit from all the skills and experience that older adults possess.

## Using This Report: A Brief Primer

In using this document, it's important to understand some crucial concepts and definitions. The first and most important concept is that this report is intended to be a starting point for an interactive, community-driven process.

### Highlighting Key Points

Throughout this document, we highlight concerns that seemed to emerge from the data along regional or demographic lines. In some cases, the quantitative results from a region or demographic group were dramatically different from other regions or demographic groups. But in other cases, we made choices about references or omissions based on what previous aging studies had found to be important or actionable issues.

Others might have chosen to focus on different data points or pieces of information, which is why this report is accompanied by a reference guide – over 100 pages of data that emerged from the survey. The reference guide can be found at the Contra Costa for Every Generation website:

[www.foreverygeneration.org](http://www.foreverygeneration.org)

### Working with the Data

Whenever one works with data, the following concepts typically apply:

- Sometimes it's important to think about raw numbers as well as percentages. For example, if something affects a large percentage of a sparsely populated area and a smaller percentage of a densely populated area, where should you direct your attention?
- Look for patterns. For example, do people between 75 and 85 struggle more with the activities of daily living than those between 65 and 75?
- Look for single data points that seem surprising. Why do more men struggle to get help with the activities of daily living than women?
- Consider whether one piece of information might be causing another. Do people with physical limitations and economic constraints also feel more isolated?

Another important concept is **underrepresentation**. Simply put, some groups do not appear in the survey results in the same proportion as the census tells us they appear in the general population. More specifically, Asian-Americans and those who are 85 or older were significantly underrepresented in the survey. A process called weighting is supposed to

address this problem, but when the sample size is small, it can't fully do so, because there is a substantial **margin of error**.

### **Margin of Error**

What exactly is margin of error? Well, in any survey small numbers of people must represent much larger numbers of the general population, or of particular demographic groups. The smaller the numbers in the actual survey, the larger the margin of error, thus increasing the possibility that the results could be misleading.

So for example, a 15 percent margin of error means the results could swing 15 percent in either direction. In other words, if the results indicate that 25% of one demographic group does not get an annual physical exam, with a 15 percent margin of error there's a reasonable chance that the actual number who don't get an annual physical could be anywhere between 10% and 40%.

Because we believe understanding some of the disparities that seem to exist is important for CCEG's work, at various points we've included results that have a substantial margin of error. In each instance, we've identified those margins, but it's important to recognize that where the margin of error is large, wherever possible other sources of information should be used to confirm the results herein.

The bottom line is that at least potentially there are flaws in this snapshot. Anyone using this report should take those flaws into consideration.

### **Definitions and Acronyms**

Finally, throughout this report the charts might contain terms and abbreviations that may be unfamiliar to some readers. Among those terms:

1. 200 percent of poverty – Researchers and policymakers often use the term “200 percent of poverty” as a breakpoint in describing income levels. The poverty threshold they use is set by the U.S. Census Bureau each year. For 2004, that threshold – for a single person, age 65 and older, living alone – is an annual income of \$9060. Two hundred percent of poverty – or twice the poverty threshold – is \$18,120 per year.
2. DK/RF – Indicates those who said they “Don't Know” or who “Refused” to answer in response to a survey question.

## **Introduction**

“The Graying of America” has become a familiar term for good reason: America is aging. In California alone, about 11% of the state’s population is 65 and older and experts believe the number of people in that age bracket will double over the next 25 years. That certainly seems likely in Contra Costa where well over half of this county’s population are members of the Baby Boom generation or older.

That makes now an especially critical moment for a project like Contra Costa for Every Generation (CCEG). CCEG brings together 400 individuals and organizations from throughout Contra Costa to prioritize needs, maximize resources, and generate effective grassroots action that addresses the hopes and dreams of older adults in the county.

Those who have spent their lives working hard and improving our communities deserve no less. And if we can help older adults continue to lead full and productive lives, every community in the county will reap the benefits that come from the skills and experience that older adults possess.

## **Areas of Concern**

To this end, late in 2004 CCEG commissioned a survey. Overseen by the AdvantAge Initiative, the survey consisted of interviews with 721 adults, age 65 years and older. The respondents could not be living in an institution (such as a skilled nursing facility) and were evenly dispersed among six regions in Contra Costa.

This report organizes the survey results into six areas of concern that provide key signposts for those looking to organize and implement change.

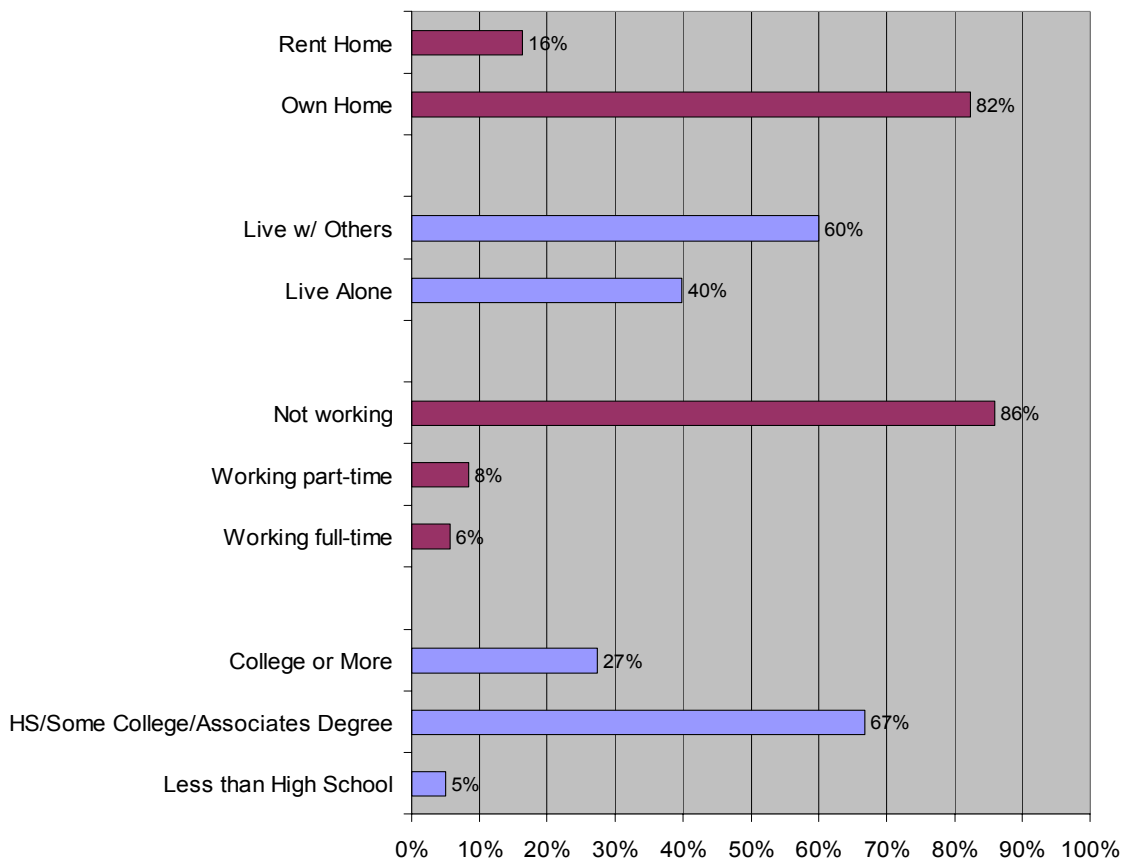
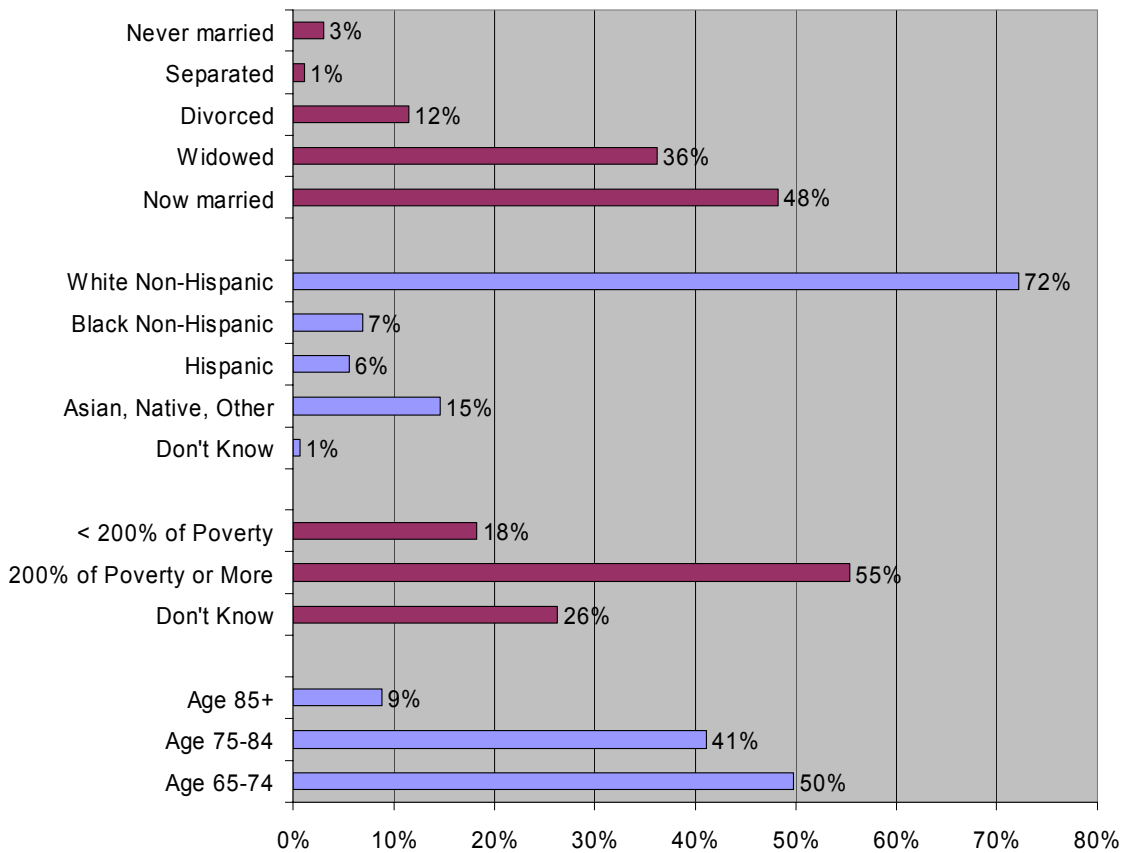
- Housing
- Transportation
- Health Care and Wellness
- Neighborhood Quality of Life
- Involvement in the Community
- Support Services

Within these areas of concern, the report highlights many of the survey’s important findings, but it is *not* intended to be an exhaustive presentation of the results. Rather, in an effort to facilitate effective action where it’s needed most, the report shines the brightest light on areas that cry out for help.

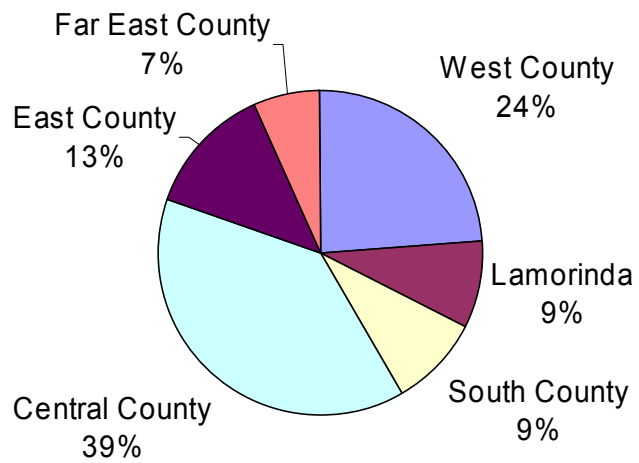
Moreover, while the results provide an important snapshot of how people age here, many other sources of information must enrich the portrait.

Every effort has been made to ensure that the analyses and choices herein accurately represent the data – and to present the findings in appropriate context. For those who want to look beyond the report to validate its analyses or to search for additional information, the accompanying reference guide presents the survey data in more detail.

### AdvantAge Initiative Respondent Profile (Weighted) Age 65 and Older Contra Costa County 2005



### AdvantAge Initiative Respondents by Geography (Weighted) Age 65 and Older Contra Costa County 2005



## Housing

*Most older adults in Contra Costa (92%) say they want to remain in their current residences. Yet many of those who would like to stay (32%) are unsure they will be able to do so. Some can't afford the base cost of their housing. Others don't know where to get help in adapting their homes for their physical limitations. Others may believe their physical frailty could force them out of their current living situation.*

According to the US Department of Housing and Urban Development families who pay more than 30 percent of their income for housing often struggle to afford necessities such as food, clothing, transportation and medical care. In addition, studies have found that people who cannot modify their homes to adapt to aging-related disabilities are more prone to household accidents (falls, in particular) that can lead to physical and mental deterioration (The National Center for Chronic Disease Prevention and Health Promotion).

### **Housing Affordability: A Significant Housing Burden**

Across Contra Costa County, affordable housing (defined in this report as a residence where the cumulative costs – rent or mortgage, real estate taxes, association/condo fees, and utilities – are less than 30 percent of a person's income) is the number one neighborhood problem and housing is the number one priority for community action. Over 40 percent cited lack of affordable housing as a neighborhood problem, whereas in the AdvantAge Initiative national survey, just over a quarter saw it as a problem.

Indeed, 3.5% of respondents (representing about 3,900 seniors) didn't have enough money to pay their rent or mortgage in the past year and 4.7% (representing roughly 5,000 seniors) didn't have enough money to pay their utilities.

The survey clearly established that at least 24 percent of older adults spend 30% or more of their income on housing. Yet even that number may be low, as it was impossible to calculate housing spending for nearly half of those surveyed (due to the structure of this particular series of questions and the way people responded). If one considers only those people for whom we *could* make the calculation, *approximately 45% are housing burdened.*

Those in South, East, and Far East counties are more burdened by housing costs than their counterparts in the other three regions.

In fact, in East and Far East Counties, among those for whom we could calculate, there are 1.5 as many people who have a housing burden as those who don't. Among African-Americans, three times as many are housing burdened as those who are not; for Hispanics 1.5 times as many are housing burdened as those who are not.

Given those numbers, it's not surprising that of those who want to remain, 25 percent are only somewhat confident that they can afford to live in their current residence as long as they would like and seven percent are not confident at all. In East, Central, and South counties, confidence levels dip even lower. Similarly, African-Americans appear to be considerably less confident than their counterparts that they can afford to continue living where they are today.

### **Housing Adequacy: Numerous Repairs Needed**

Home repair is the number one *personal* (as opposed to neighborhood) problem. Eleven percent of older adults in Contra Costa need home repairs or modifications within the next five years. In East County, nearly a quarter need modifications in the next five years.

Needed repairs include structural changes, installation of safety features in bathrooms, and accommodations for disabled access. Such repairs can reduce household accidents that lead to physical and mental deterioration.

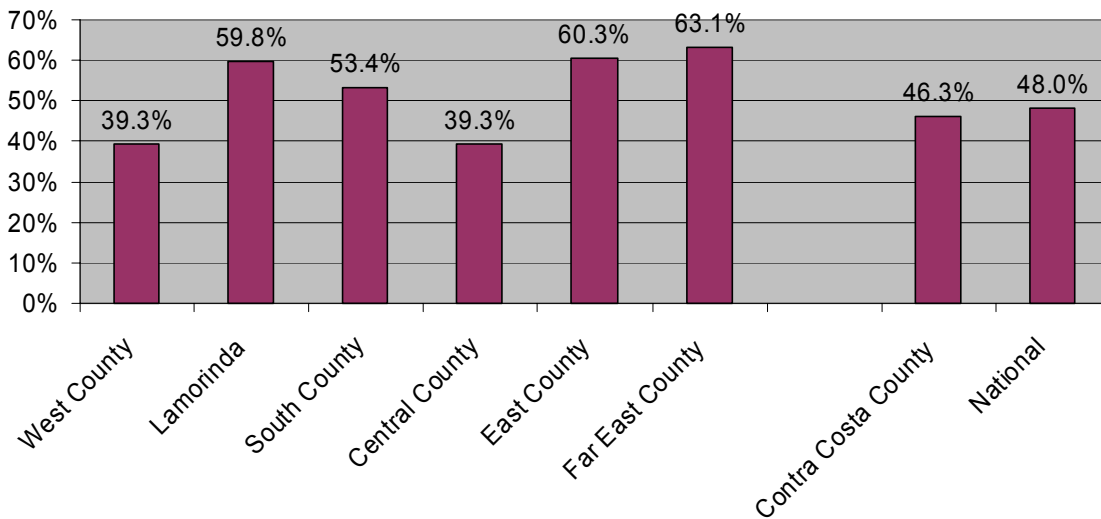
For those who need repairs, affordability does not appear to be a significant barrier, but lack of awareness of how to get the repairs done is. Half of those surveyed cannot identify anyone to do home repair.

### **Key Questions**

1. What can be done to make housing more affordable for older adults, so they can continue to live in their homes as long as desired?
2. Are there ways to better meet seniors' needs for home repairs and modifications?
3. What's working in terms of meeting the housing needs of older adults – and how can we build on that?
4. How can those approaching retirement age prepare to meet their housing needs as they age?

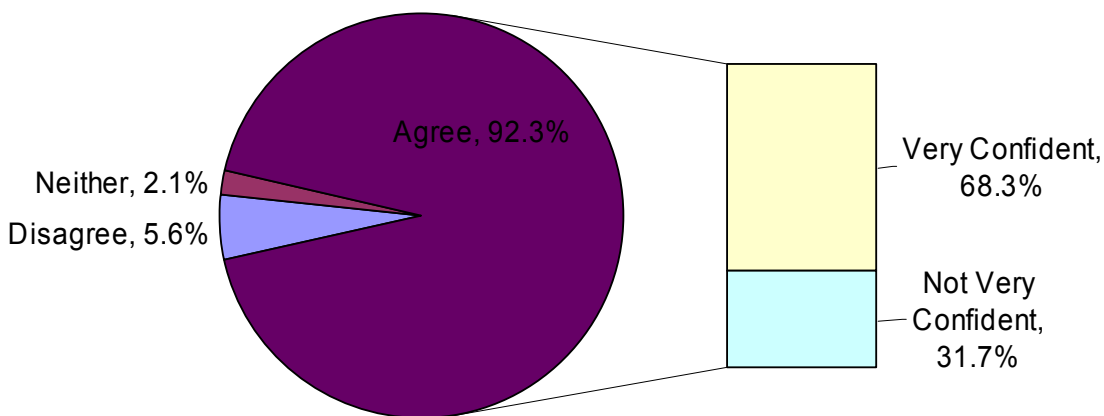
## Housing Age 65 and Older Contra Costa County 2005

**Percentage of people who spend 30% or more of their income on housing\*,  
by geographic area**



\*unable to calculate housing burden for 48% of respondents (44%-64% by region)

**Percentage of people who want to remain in their current residence, but are  
unsure they will be able to do so**



## Transportation

*An overwhelming majority of older adults in Contra Costa say they get where they need to go – mostly by driving or getting a ride from family, friend, or neighbor. Yet transportation was the third highest priority for community action and over 20 percent identified public transportation as a problem.*

Across the United States, transportation is one of the most common concerns older adults have. The ability to move freely from place to place, while often taken for granted, is crucial to older adult's well-being and desire for independence. (Administration on Aging, 2004)

### **Mobility: Most People Get Where They Need to Go**

An overwhelming majority (97%) of respondents say that they get where they need to go, mostly by driving or getting a ride from someone they know. Yet transportation emerged as the third highest priority for community action.

In addition, for 12 percent (about 13,500 seniors), a medical condition makes travel difficult and 7 percent have reduced their travel because of this.

### **Public Transportation: Limited and Underused**

Despite the fact that 87 percent of elders in Contra Costa say public transportation is readily available, 21.5 percent identified it as a neighborhood problem and 15 percent say it's a priority for community action.

Ten percent say public transit is either too limited to be useful or believe it is not available at all. (In Far East County (23%), Lamorinda (18%), and South County (13%), the perceived inadequacy of public transit is especially pronounced.) In addition, while 6 percent say they need help using public transportation, most of them do not get the help they need.

All of this may help explain why older adults rarely use public transit. Only 1.3 percent use it as their primary mode of transportation, though 7 percent do use it more than twice each month, with half of those using it once per week.

In addition to things like bus and BART, there are special transportation services (paratransit) available for seniors with disabilities, but relatively

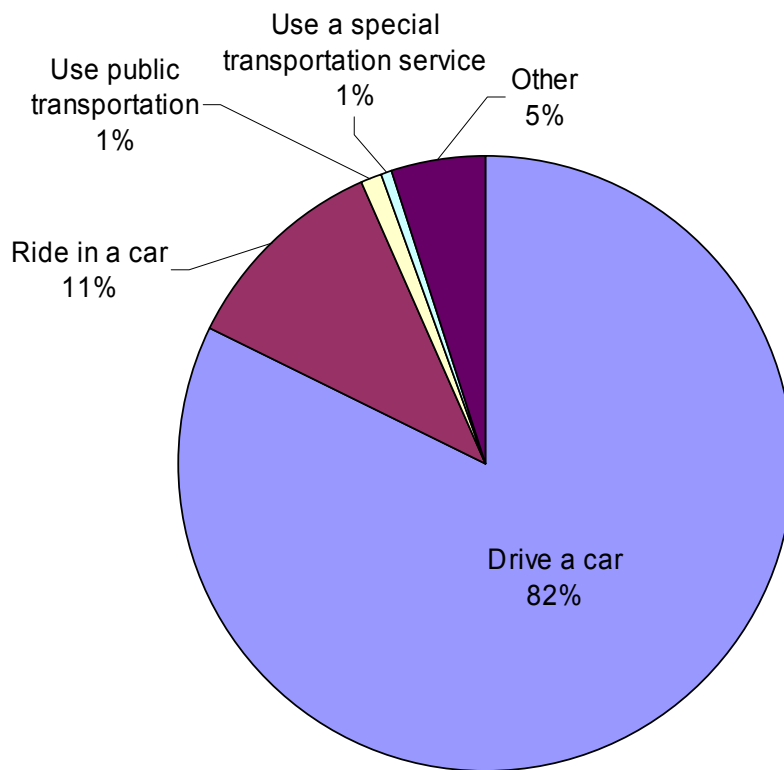
few (12 percent of those with limiting conditions) use those services. It's unclear why.

### **Key Questions**

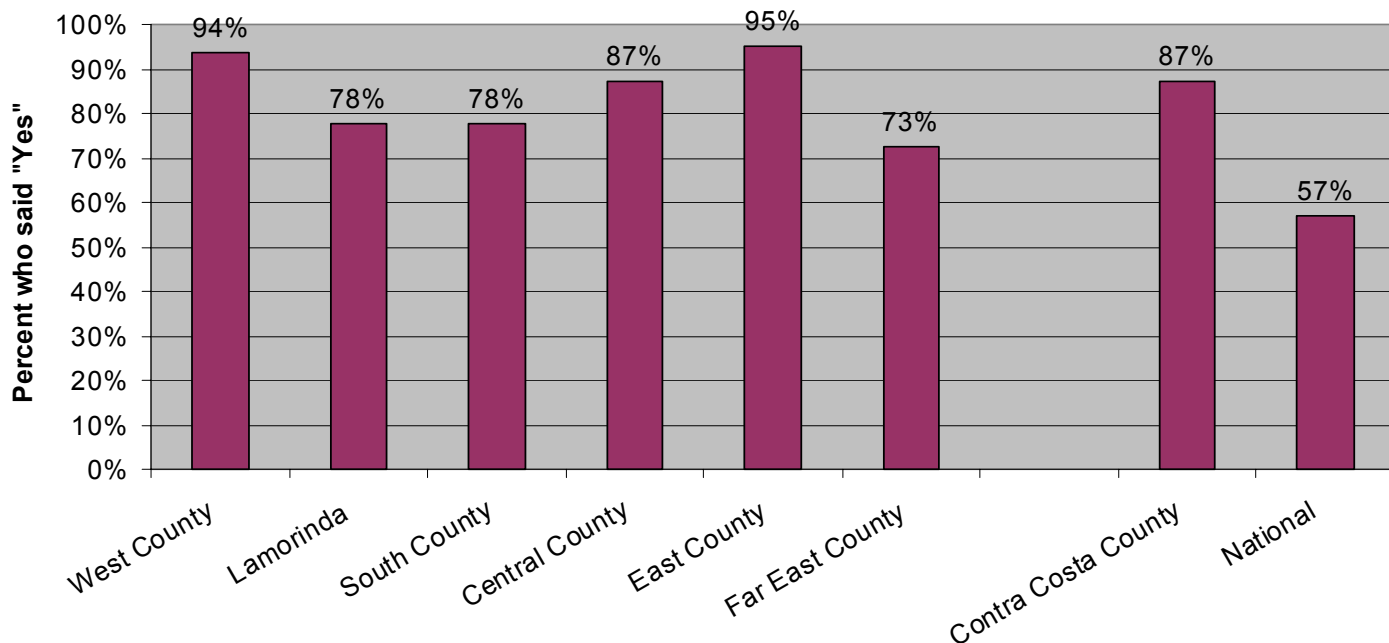
1. How can we help all seniors, including those with medical conditions, get where they want and need to go?
2. Are there ways to make public transportation easier to use for seniors, particularly those with disabilities?
3. What transportation services are effective – and how can we build on those?

## Transportation Age 65 and Older Contra Costa County 2005

**Means of public transportation used most frequently**



**Is public transportation service available in this community?**



## Health Care and Wellness

*While older adults in Contra Costa generally view themselves as healthy, they still consider health care the second most important priority for community action. Perhaps that reflects two of the survey's key findings: 1) One in ten older adults in Contra Costa has health concerns that limit their activities more than seven days per month, and 2) An extremely vulnerable minority, located disproportionately in West and East Counties, struggle to afford such things as prescription drugs, follow-up tests, and dental care.*

For most people, health is the one make or break factor in leading a full, productive, and independent life. Yet according to the Centers for Disease Control and Prevention, at least 80 percent of older Americans live with at least one chronic condition, and half have at least two. These conditions (e.g. diabetes, congestive heart failure, arthritis, hypertension, asthma) can cause years of pain, disability, and loss of function and independence. Healthier lifestyles, preventive care, and periodic screening can help ward off some chronic conditions – or catch them before they cause much damage. Conscientious self-care can help people better manage their chronic conditions.

### **Health Status: Significant Pockets of Serious Health Concerns**

Despite a relatively positive overall health assessment, 15 percent of older adults in Contra Costa say their health is only fair, poor, or very poor. (Nationally, 24 percent say their health is only fair, poor, or very poor.)

One in ten (approximately 11,000 seniors) says their activities are limited seven or more days per month due to health concerns. Seventeen percent say there were seven or more days per month when their *physical* health was not good and eight percent say there were seven or more days per month when their *mental* health was not good.

Almost 13 percent of African-Americans have had their activities limited seven or more days per month due to health problems.

### **Health Habits: Always Room To Exercise More, Eat Better**

Health experts generally agree that regular physical activity reduces disabilities and improves quality of life. The survey revealed that older adults in Contra Costa are more physically active than their counterparts nationwide.

Nevertheless, more than one in four older adults in Contra Costa *never* does any physical activity at all. In West County, over a third never do any physical activity.

Nutrition is also essential to good health, but two percent – representing about 2,300 older adults – cut or skipped meals in the last year because they couldn't afford them. In West and East counties, the numbers rise to 3.8 percent and 5.6 percent respectively. Women, African-Americans, those who live alone, and those in poor health or with a need for personal care are the most vulnerable to cutting or skipping meals.

Some of the missed meals may be attributable to the unmet needs for personal care described in the next area of concern (Personal Care, page 19).

### **Health Care Services and Insurance:**

#### **Disturbing Vulnerabilities in a Well Cared For Community**

The survey revealed that most older adults in Contra Costa get the medical care they need. Only 2% who needed medical care in the past year failed to obtain it and nearly everyone (96%) has a usual source of health care. In addition, the majority of older adults receive regular check-ups and preventive care, such as blood pressure checks, eye exams, and flu shots. Those numbers are roughly equal to counterparts nationwide.

Yet there are some disturbing gaps in care received, which may explain why health care emerged as the second highest priority for community action. (In East County it is the first priority, with prescription drugs second.)

- For example, more than one in ten use a hospital emergency room or outpatient department as their usual source of care, rarely an optimal solution.
- Nearly 15 percent of seniors who needed mental health care in the past year failed to obtain it.
- A significant number of older adults (from 7 percent for blood pressure tests to 64 percent for hearing exams) did not get screening that can catch health problems early.
- Depending on which need they were asked about, somewhere between 2.5 and 5 percent of seniors in Contra Costa, representing between 2,300 and 5,600 people, couldn't afford to fill prescriptions, get follow-up tests, purchase glasses, purchase hearing aids, or get dental care.

- The problem is particularly pronounced in West and East counties where the numbers jumped respectively to eight percent and seven percent for filling prescriptions and to seven percent and 8.5 percent for dental care.
- There are disturbing demographic gaps as well. Among African-Americans, 12 percent did not have enough money for follow-up tests, 23 percent did not have enough money to fill prescriptions, and 12 percent did not have enough money for dental care. And women (7%) are more likely to struggle to afford prescription medicine than men (2%).

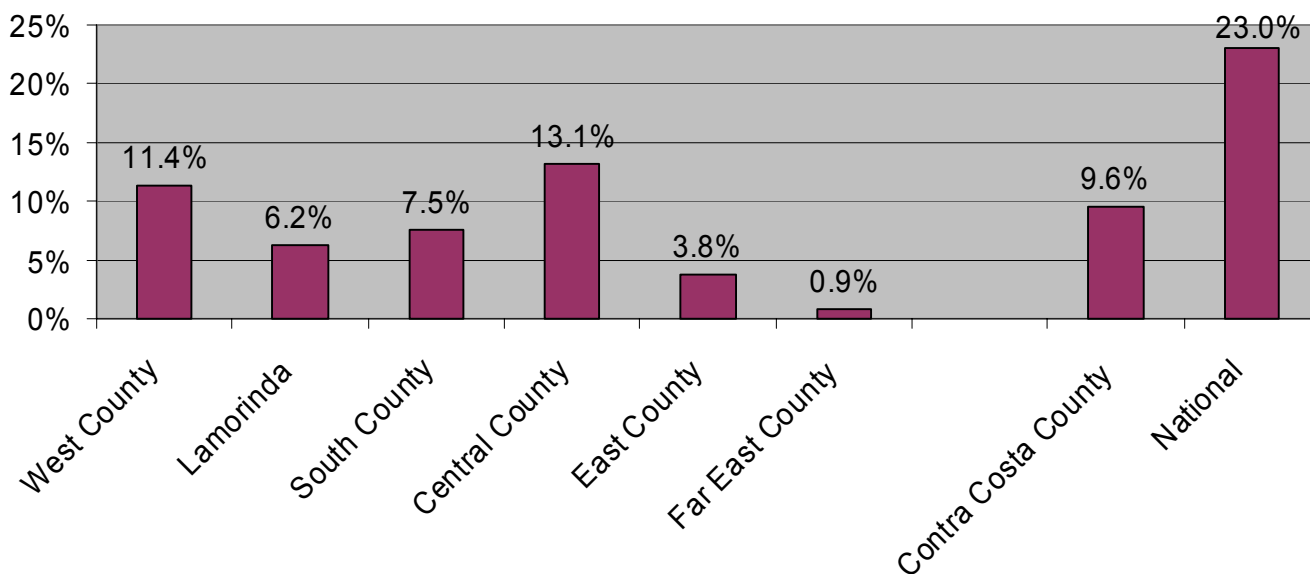
As for insurance, one out of every eight seniors has problems filling out medical or insurance forms. Eleven percent rely on Medicare as their only form of health insurance, which implies there are or will be gaps in coverage and may explain the struggles paying for prescription drugs (though that may change due to the Medicare Modernization Act that goes into effect in 2006).

### **Key Questions**

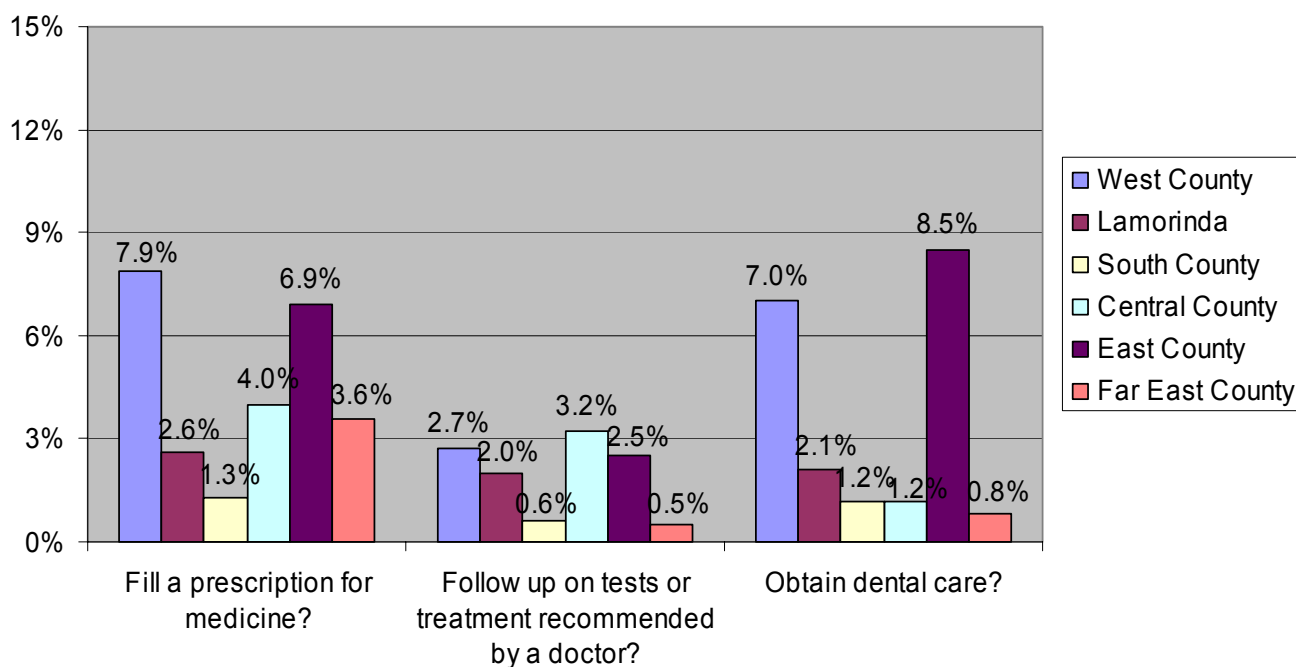
1. How can we assure that seniors receive all the health care they need?
2. How can preventive care measures – from health screening to healthier lifestyles – be promoted or provided more effectively?
3. What opportunities exist to promote improved management of chronic conditions?
4. What can be done to ensure that seniors who need mental health services get those services?
5. What can those approaching retirement age do to maintain their health and their access to needed health services?
6. What's working in terms of promoting and maintaining senior health and delivering health care services – and how can we build on that?

## Health Care and Wellness Age 65 and Older Contra Costa County 2005

**Percentage of people whose health interfered with activities  
seven or more days during the past month**



**Were there any times in the past 12 months when you or (other adults in  
your household) did not have enough money to...?**



## Neighborhood Life

*While a large majority (83%) of older adults in Contra Costa are very satisfied with their neighborhoods, a significant minority (17%) – particularly in East and West counties – are not satisfied. Affordable housing, traffic, and crime were the most significant problems. Many felt that they could make a difference in addressing these and other problems, but others worried that too many people fail to get involved.*

Feeling safe and satisfied in the community in which you live is an important quality-of-life factor for anyone. For older adults, who are less mobile and more vulnerable, it's particularly important.

### Neighborhood Problems:

#### **Affordable Housing, Crime, and Traffic Top the List**

The majority (83%) of older adults in Contra Costa are very satisfied with their neighborhood as a place to live. But 38 percent in East County, nearly a quarter in West County and 38 percent of African Americans are not satisfied with their neighborhoods.

Respondents believe the most severe problems are lack of affordable housing, traffic, and crime. Other neighborhood problems cited frequently include people not getting involved, inadequate public transportation, needed sidewalk repairs, and streets that are too dark.

#### **Crime and Safety: Disparities Among Regions, Demographic Groups**

According to an FBI report, “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)

With that in mind, 21 percent of respondents identified neighborhood crime as a problem – second on the list of personal problems. Yet only seven percent say that personal safety in their neighborhood is fair or poor and, countywide, safety is a low priority for community action.

The sense of personal safety changes, however, in certain regions and among specific demographic groups. Specifically, 21 percent in East County and 12 percent in West County believe the personal safety in their neighborhood is only fair or poor. And 29 percent of African-Americans rate safety in their neighborhoods as only fair or poor.

### **Lots of Trust, But a Desire for More Involvement**

According to the 2001 Social Capital Community Benchmark Survey, trust between neighbors is a key dimension of a socially connected and thriving community that can provide help and support to its residents.

It's encouraging to note, therefore, that older adults in Contra Costa generally view their neighbors as trustworthy. One-third do chores for one another at least once a week. Moreover, two-thirds of seniors seem to believe they can have at least some influence on their neighborhood being a better place to live.

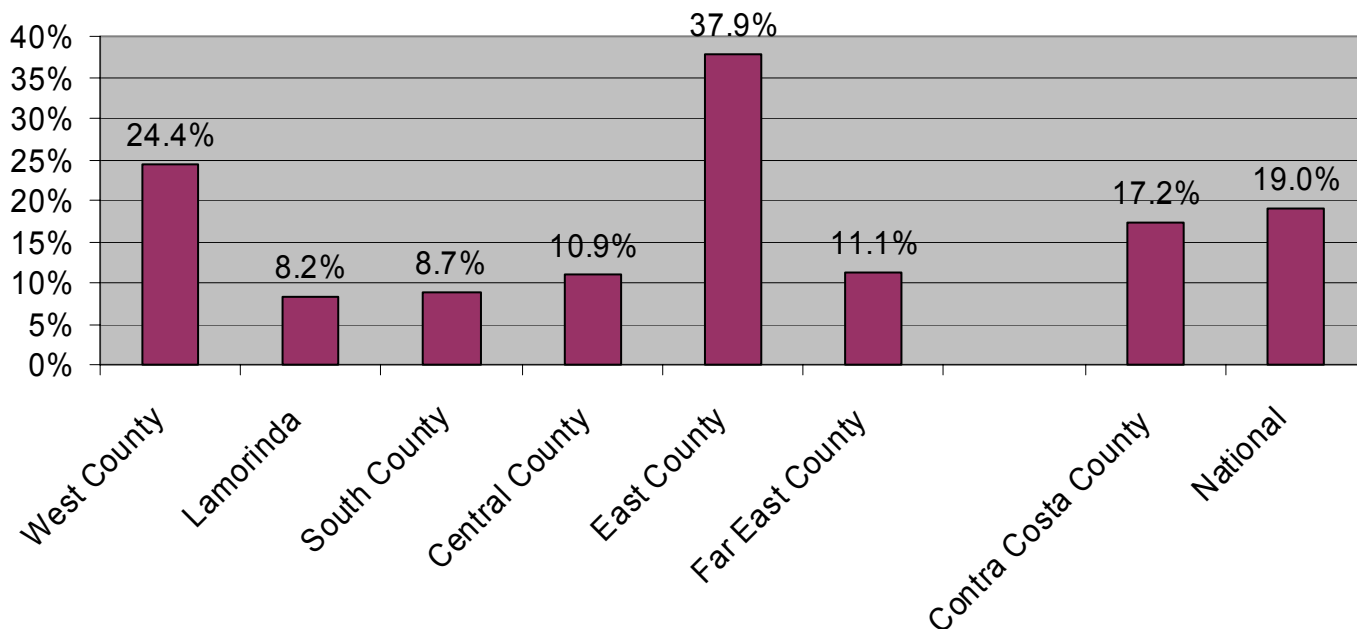
That said, slightly less than a quarter believe that people *not* getting involved in their communities is a problem.

### **Key Questions**

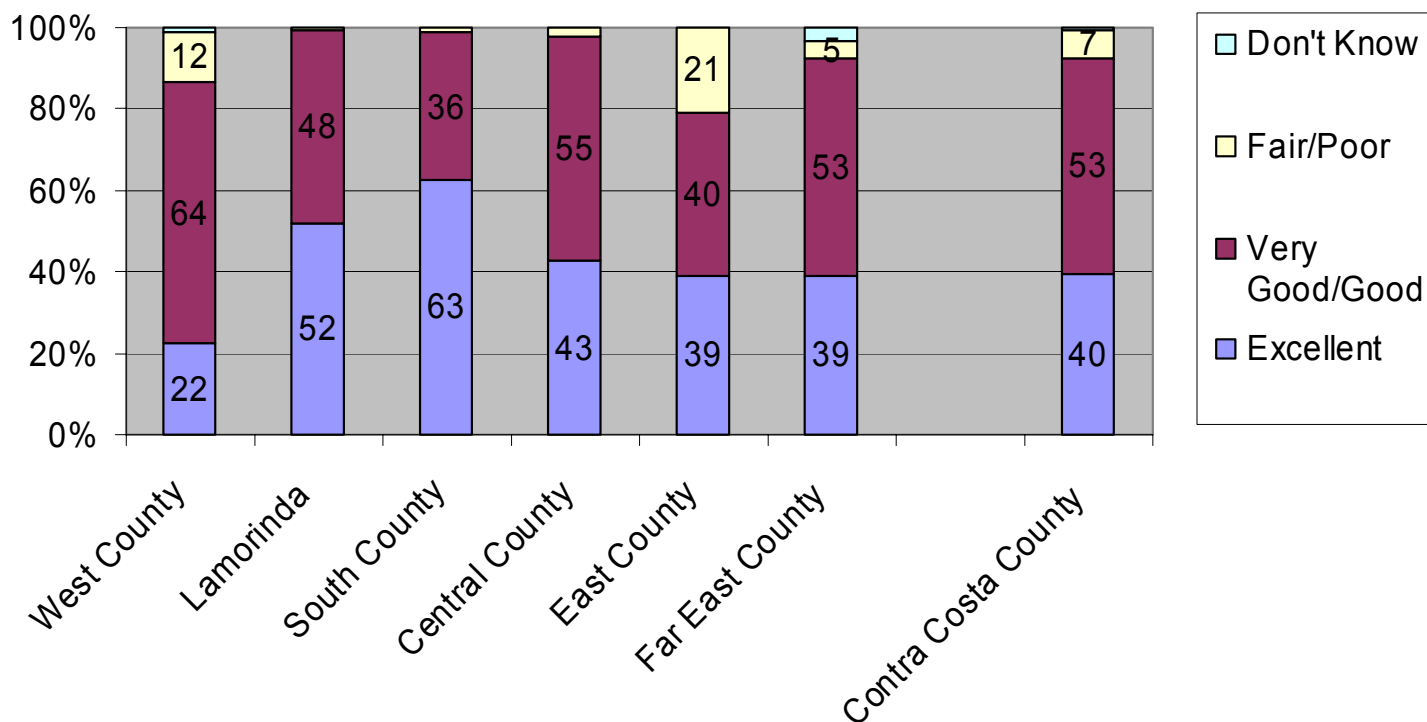
1. How can we address concerns about personal safety in the neighborhoods of older adults?
2. How can the community tap into the belief that more involvement can make a difference in solving problems that range from affordable housing to crime and traffic concerns?
3. What is already working in making communities safe and supportive – and how can we build on those efforts?
4. How can those approaching retirement age begin to improve the quality of the neighborhoods in which they live or plan to live?

## Neighborhood Life Age 65 and Older Contra Costa County 2005

**Percentage of people who are not very satisfied with their neighborhood, by geographic area**



**Percentage of people who feel that personal safety in their neighborhood is excellent, very good, good, fair or poor**



## **Involvement in the Community**

*Older adults in Contra Costa remain relatively engaged in their communities. They work for pay, volunteer, and socialize at levels roughly equal or better than those of seniors nationwide. Still, many appear to be socially isolated, often a factor in physical and mental deterioration. Thirty percent say they don't have or don't know if they have someone they can rely on if they become sick or disabled for a long period of time.*

Having a job and/or volunteering are important ways that older adults meet economic, social, and psychological needs. Moreover, making use of a lifetime of knowledge and experience can help meet important community needs. Indeed, seniors have been called one of the greatest untapped resources society has for meeting the pressing challenges of our time.

In addition, the National Institute on Aging notes that social support and continued involvement in useful activities positively affect health and longevity. “Studies have associated the lack of social connectedness with significant increased risk for poor health and death. Being part of an active network [also] increases the opportunity for productive activities, whether paid or volunteer.”

### **Employment**

Fourteen percent of elders in Contra Costa are working for pay, which is roughly comparable to seniors nationally. Of those not working, 14 percent would like to work for pay.

### **Volunteerism**

Over one-third of older adults are working as a volunteer an average of five hours a week, which is roughly comparable to the national survey. Yet considerably fewer are doing so (18%) in East County.

### **Social Isolation: A Common Problem**

A number of responses indicate that social isolation can be a significant problem for Contra Costa elders.

Isolation and loneliness are the fourth most common personal problem, cited by 13 percent (representing roughly 15,000 seniors) of those surveyed. In addition:

- Over 27 percent would like to be more socially active,

- nearly a quarter did not socialize with friends or neighbors in the past week,
- nearly one in five say they have no close friends in neighborhood,
- nearly half don't get out of the house every day, and
- more than one in ten say they did not engage in any social, religious, or cultural activities in the past week.

### **Social Support: Many Have No One to Call**

A significant minority of elders doesn't have someone to rely on in a time of need.

- Seven percent don't have anyone to call in an emergency.
- Ten percent don't have or don't know if they have anyone to help them if they are sick for a short time.
- Thirty percent (roughly 33,000 seniors) don't have or don't know if they have anyone to help them if they are sick for a long time.

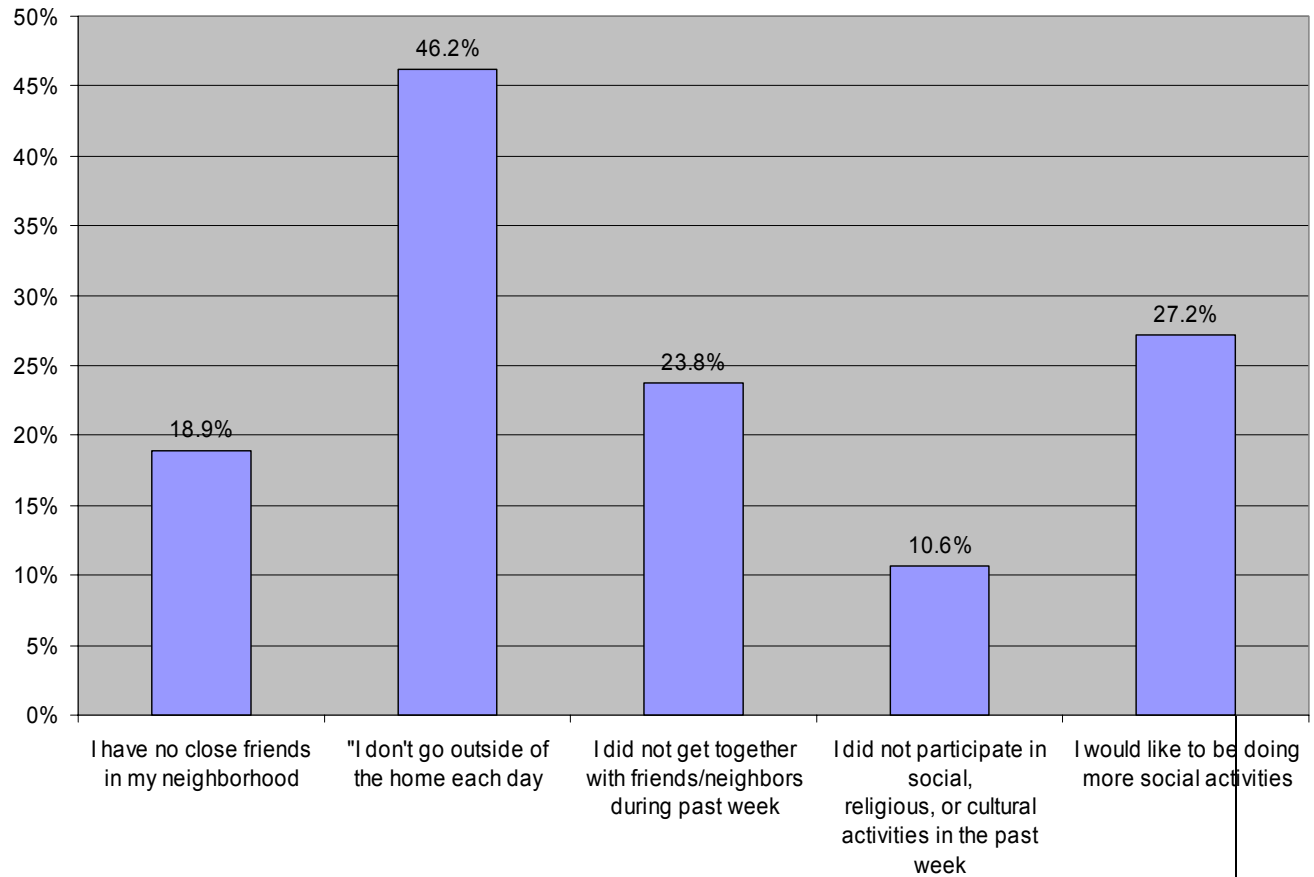
Combine these findings with the unmet needs for personal care (page 19) and they highlight a potentially important focus for community action.

### **Key Questions**

1. How can communities reach out to socially isolated seniors?
2. Are there missed opportunities for Contra Costa communities to promote volunteer work or jobs-for-pay?
3. How can those approaching retirement age foster an active social network that will last throughout their lives?

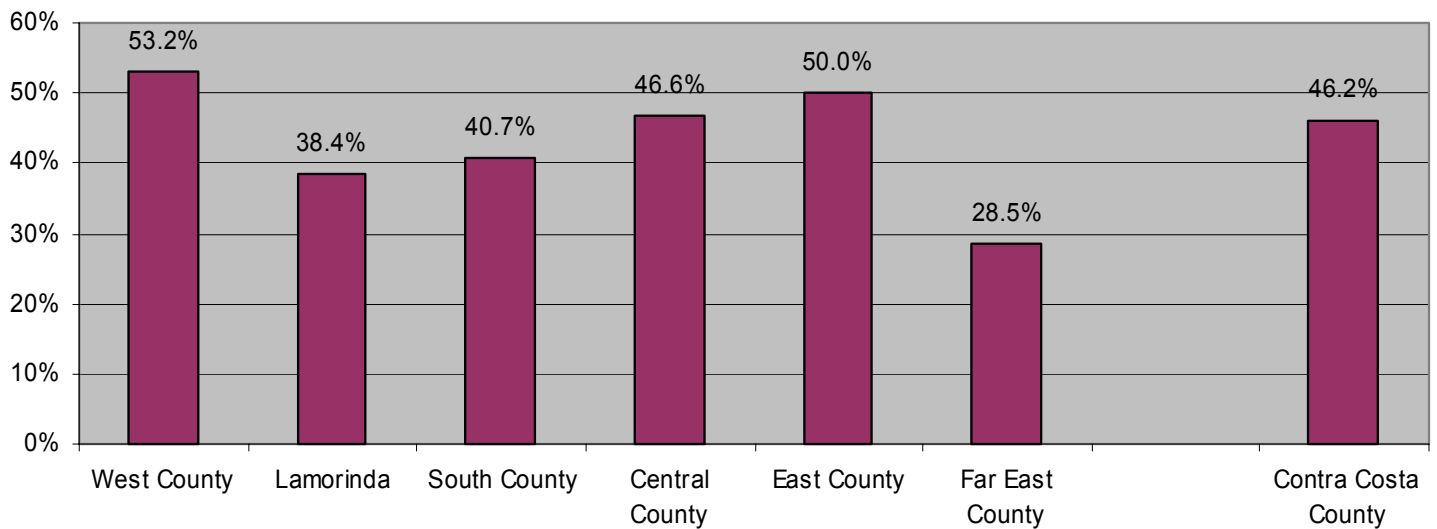
## Involvement in the Community Age 65 and Older Contra Costa County 2005

### Indicators of social isolation for adults age 65+

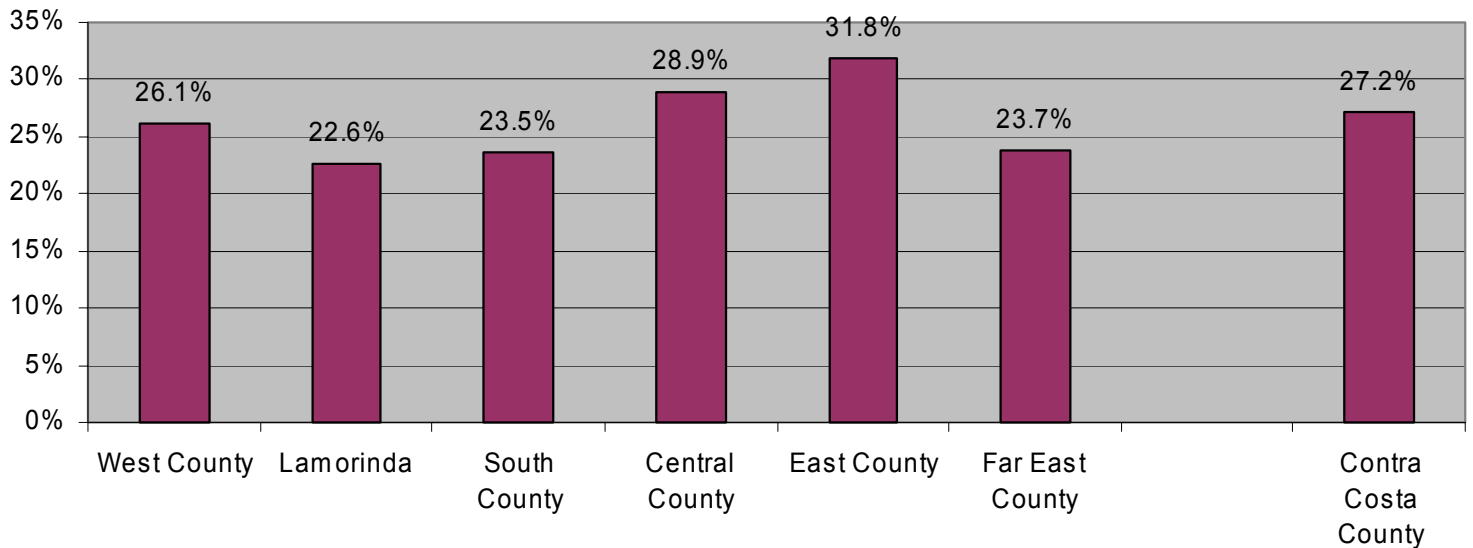


## Involvement in the Community Age 65 and Older Contra Costa County 2005

Percentage of people who don't go outside of the home each day, by geographic area

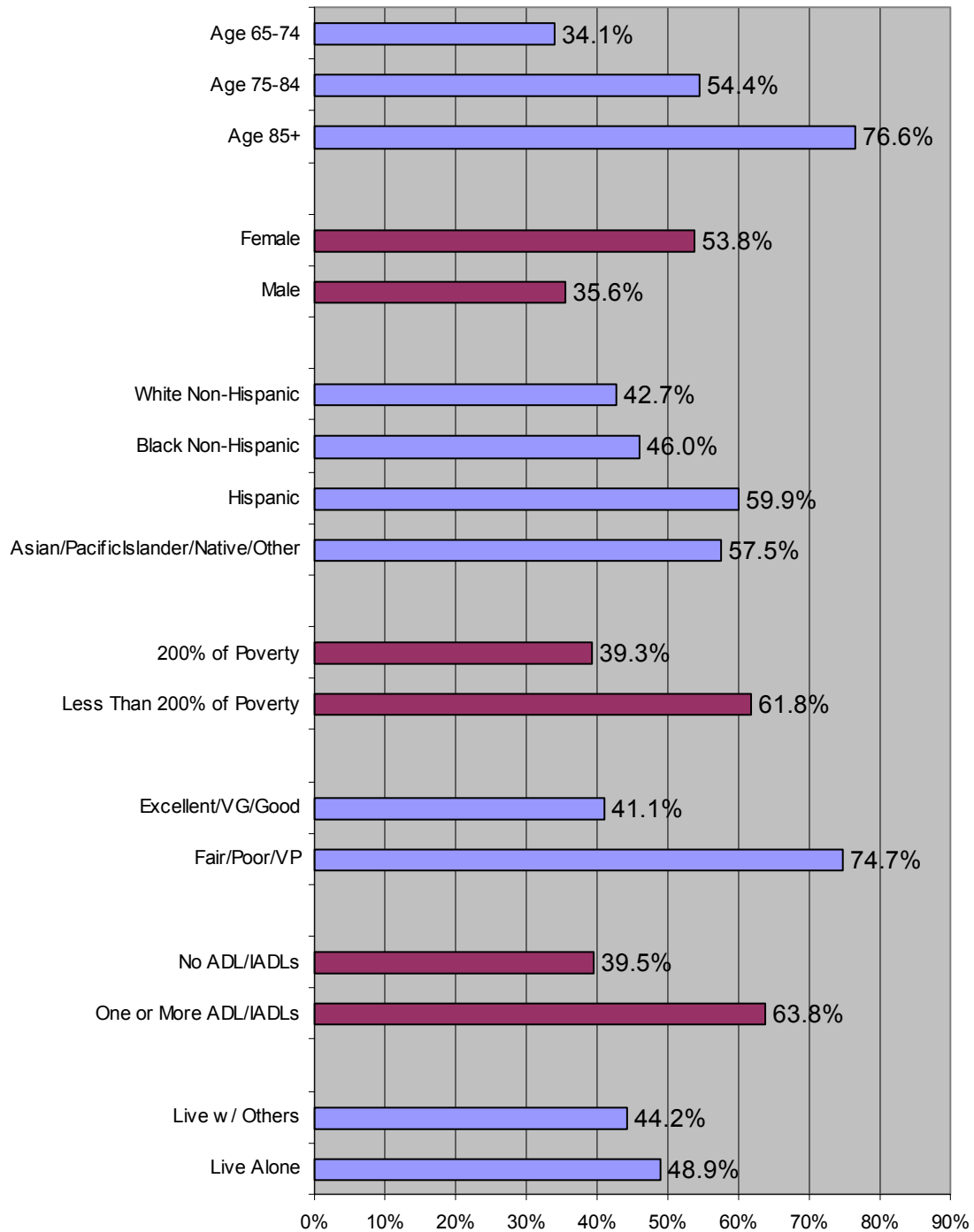


Percentage of people who would like to be doing more social activities, by geographic area



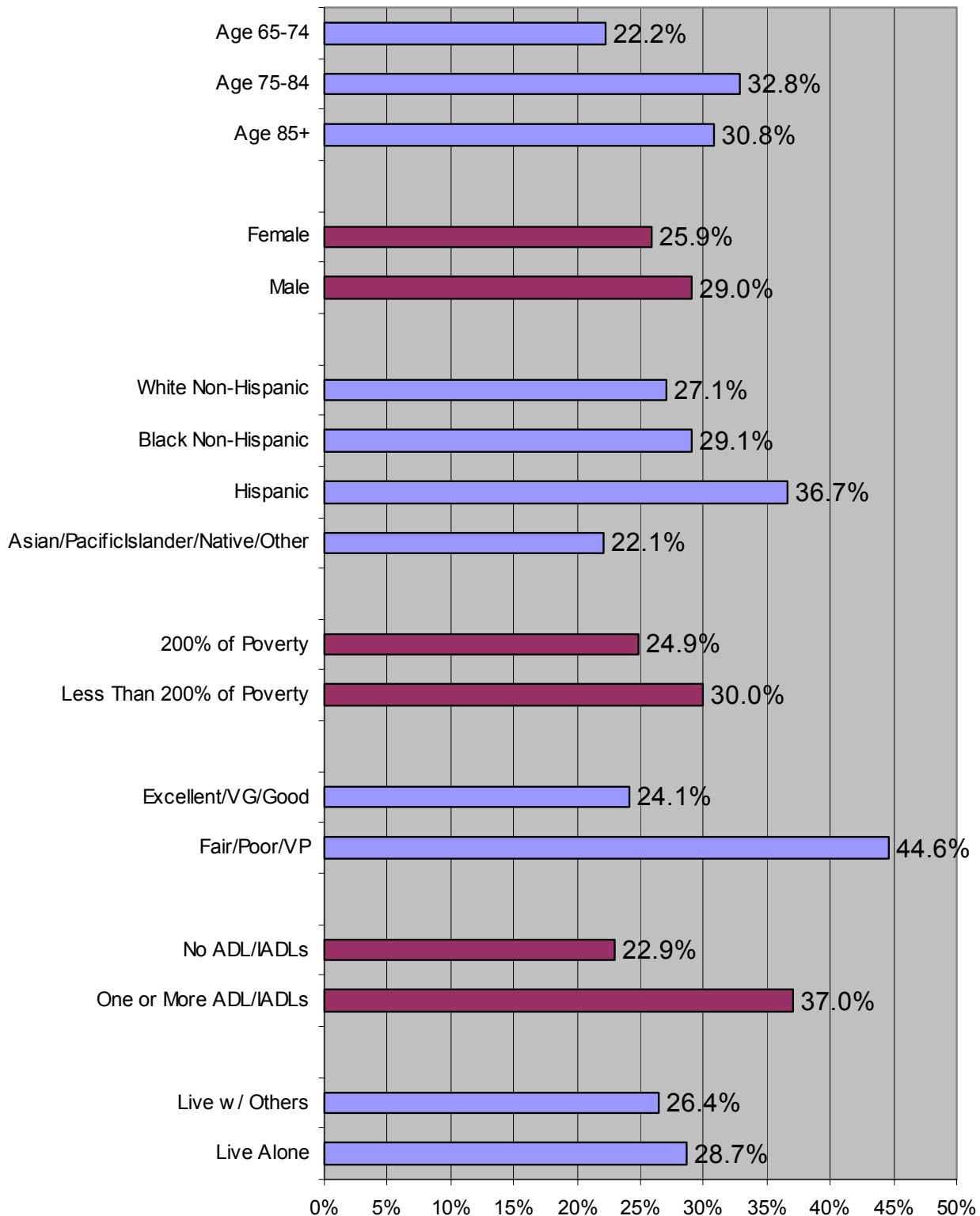
## Involvement in the Community Age 65 and Older Contra Costa County 2005

**Percentage of people who don't go outside the home each day, by demographics**



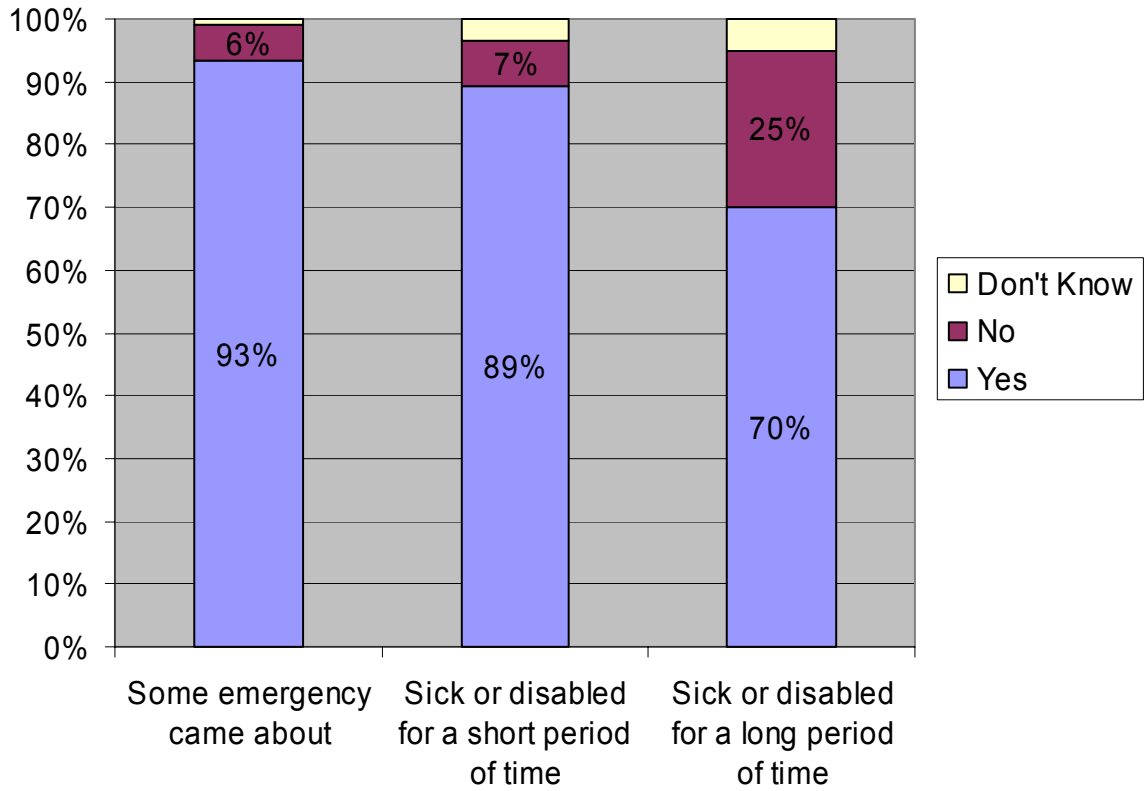
## Involvement in the Community Age 65 and Older Contra Costa County 2005

**Percentage of people who would like to be doing more social activities, by demographics**



## Involvement in the Community Age 65 and Older Contra Costa County 2005

**Is there someone you could count on for help if...?**



## Support Services

*Given the health vulnerabilities of older adults, it's not surprising that 14 percent in Contra Costa need assistance with the most basic activities of daily living. Yet of those who need assistance, 65 percent struggle to get their needs met. In addition, over a third of those who provide care to another older adult – often an enormously stressful challenge – don't get any relief (or respite) from their caregiving role. Personal care, respite, and other vital support services are, in fact, available in Contra Costa, but it's unclear whether there are enough services to meet existing needs. What is clear is that many older adults are either unaware of or do not take advantage of these services.*

Many older adults experience problems with self-care activities (known as Activities of Daily Living or ADL). These self-care activities include: taking a bath or a shower, dressing, eating, getting in/out of bed/chair, using/getting to a toilet, getting around inside the house.

In addition, many struggle with related personal and household tasks (also known as Instrumental Activities of Daily Living or IADL). These activities include: doing light housework, preparing meals, getting where they need to go, taking the right amount of prescribed medication, and keeping track of money and bills.

Those who experience problems with ADL or IADL tasks are at risk for becoming isolated from needed services and from social interactions so vital to their sense of dignity and well-being. (Kent County [Michigan] AdvantAge Initiative: Survey Results 2004)

A related concern is that many older adults themselves provide care for other elderly persons. Often, this essential care helps disabled elders to delay or avoid institutionalization. But caregiving can inflict enormous stress, especially for seniors who already have their own chronic health concerns. According to the National Family Caregivers Association, “Family caregivers who provide care 36 or more hours weekly are more likely than non-caregivers to experience symptoms of depression or anxiety. For spouses the rate is six times higher.”

### Unmet Personal Care Needs

The survey found that 14% of older adults need some form of assistance with at least one aspect of self-care (ADL). (Almost three percent need help

with two or more ADLs, the minimum necessary for receiving benefits under long-term care insurance and some other programs.) Nearly 17% need some form of assistance with related personal and household tasks (IADL).

In total, roughly 27,500 older adults in Contra Costa need help either with self-care, personal care, household tasks, or some combination thereof. This includes nearly half of those in poverty, and 43 percent of those 85 or older. In addition, 30 percent of elders in West County and 37 percent in East County need help with at least one self-care, personal care, or household task.

Moreover, 65 percent of those who need help with self-care, and 56 percent of those who need help with personal and household tasks report having unmet needs in one or more areas.

### **A Lack of Relief**

Nearly a quarter of Contra Costa seniors provide help to others who have physical limitations. Those numbers increase to 30 percent in West County and 38 percent in Far East County. Of those who do provide care, 37 percent *never* get any relief or time off from the care they give. The failure to get relief not only puts enormous strain on the caregiver – to the possible detriment of their own health – but also can compromise the quality of care they are providing.

### **Services: Unknown and Underused**

As people age and face new physical, social, or financial limits, their need for support from organizations and individuals within their community increases. Senior services (such as paratransit for people who have difficulty driving and group meals for people who have difficulty shopping and cooking) can help individuals meet social and psychological needs and help forestall further disability.

While elders in Contra Costa know about many services in their community, there are significant gaps. Over half don't know or don't believe there is help with home repairs or that they can get relief from the care they provide to a friend or loved one. Thirty-six percent don't know or don't believe there are visiting nurse services. Twenty-nine percent don't know or don't believe there are hospice services should they desire them.

In fact, more than 20 percent – representing about 26,000 seniors – can't identify *any* source of information about senior services. In West and East

Counties, those numbers rise to 35 percent and 28 percent respectively. And 43 percent of Asian-Americans/Pacific Islanders in the county can't identify a source of information about services. Those in relatively poor health (38%), those 85 or older (32%), and those living in poverty (32%) – in other words, those most likely to be in need of assistance – are even more substantially out of the information loop.

For those who *could* identify information sources, social service agencies (23%) and senior centers (19%) emerged as the best resources.

The most effective communication media are mail (42%) and senior center newsletters (24%). Email is favored by fewer than five percent of seniors, although 37 percent have Internet access at home. It seems likely, however, that Internet and email use will increase as a more computer-savvy generation reaches retirement age.

Given the lack of awareness, perhaps it's not surprising that few seniors actually use any community services (18% in the past year). Senior centers and paratransit are the most used services.

### **A Lack of Faith in Government's Ability to Respond**

There was some concern about how effectively local policymakers respond to the needs of elders. Nearly 16 percent, representing about 18,000 seniors countywide, believe local policymakers either don't take the needs of older residents into account or don't take those needs into account very much. Another ten percent *don't know* whether the agencies take their needs into account. The numbers worsen in East, South, and West Counties.

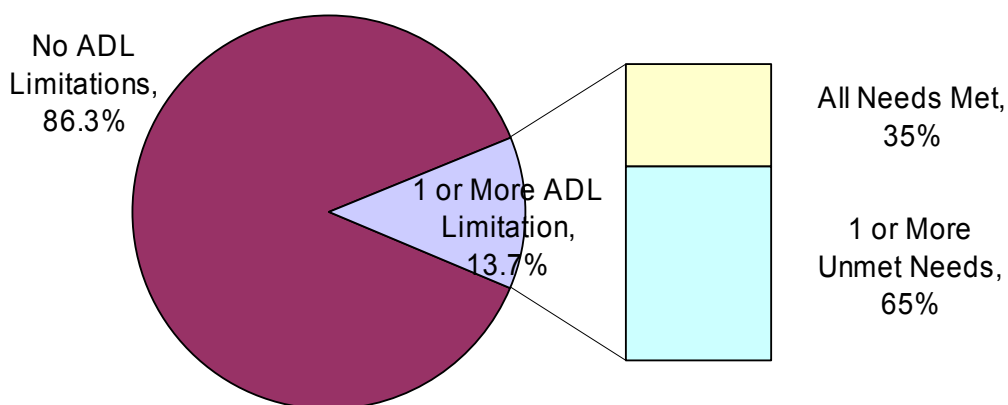
### **Key Questions**

1. How can we meet the needs of disabled seniors more effectively?
2. How can seniors and others who provide care for elderly family members receive the support they need?
3. What can those approaching retirement age do to begin preparing for the possibility that they may someday need essential personal care?
4. What are the best ways to increase awareness of the various services already available for older adults in Contra Costa County?
5. How can we make sure that existing services meet the needs of older adults?
6. How can local governments and agencies instill more trust in those who doubt the agencies' ability to meet the needs of older adults?

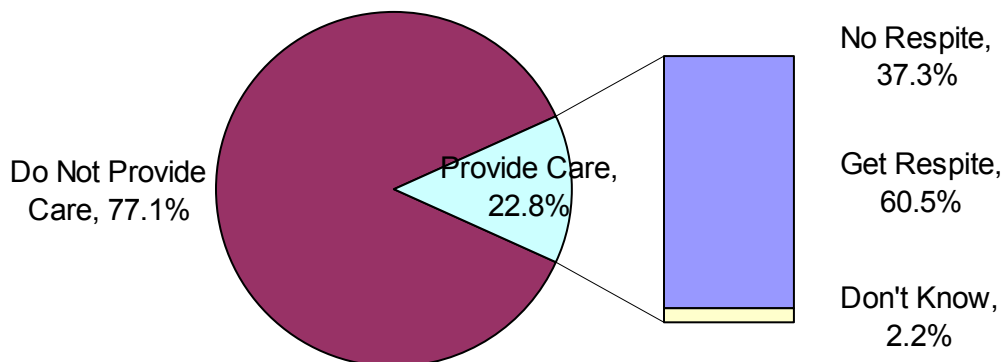
7. What's working in terms of community support – including in the recruitment and training of qualified personal caregivers – and how can we build on those efforts?

**Support Services  
Age 65 and Older  
Contra Costa County 2005**

**Percentage of people with adequate assistance in the activities of daily living**

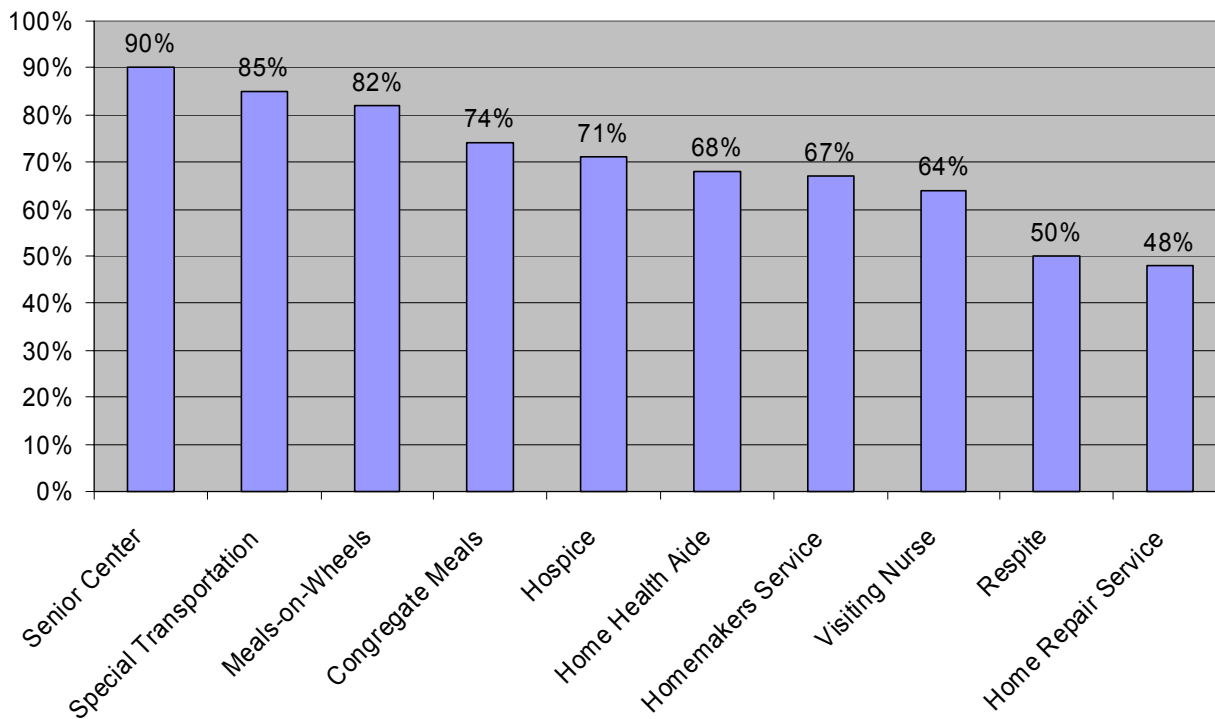


**Percentage of people who get relief from their caregiving activities**

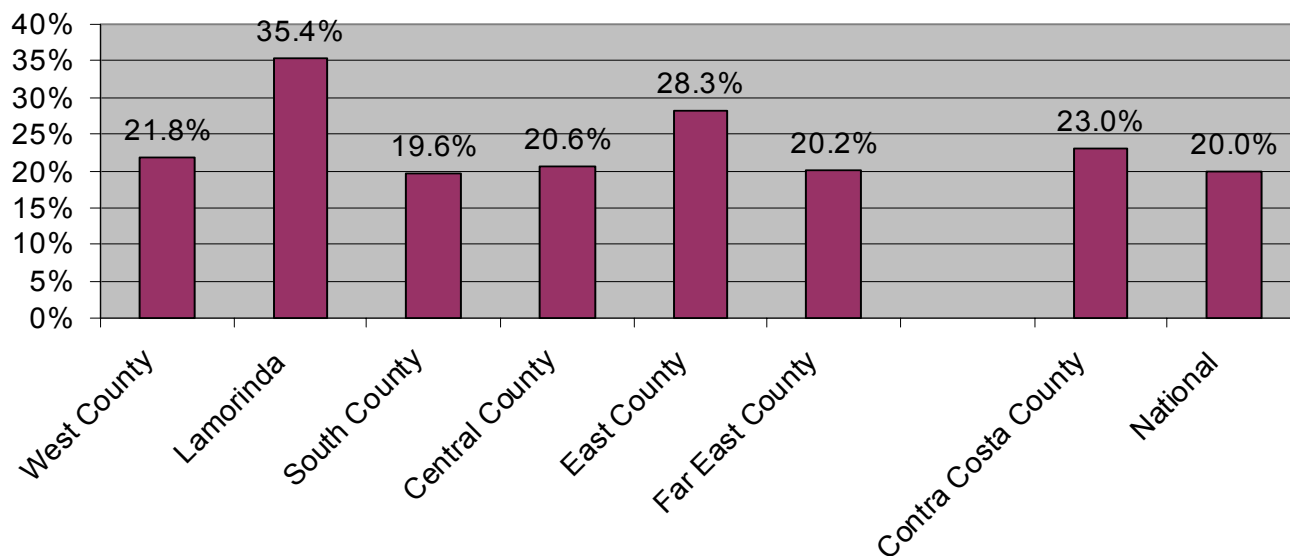


## Support Services Age 65 and Older Contra Costa County 2005

**Percentage of people who are aware of selected services in their community**

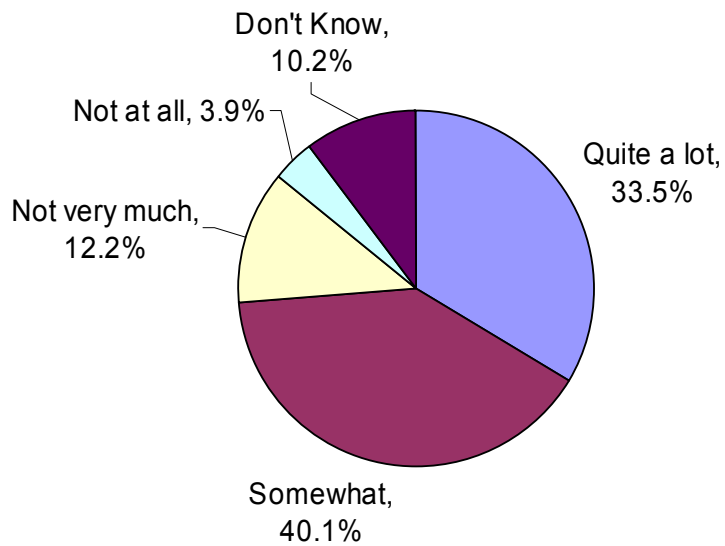


**Percentage of people who don't know who to call if they need information about services in their community, by geographic area**



### Support Services Age 65 and Older Contra Costa County 2005

To what extent do you think that local policymakers take into account the interests and concerns of older people?



## **AdvantAge Initiative for Supportive Communities Survey**

### **CONTRA COSTA FOR EVERY GENERATION**

#### **Survey Methodology**

The Contra Costa AdvantAge Initiative Survey was conducted by International Communications Research (ICR) between December 14, 2004 and January 19, 2005. The survey was conducted by telephone among a representative sample of 721 non-institutionalized adults age 65 years and older in six regions in the Contra Costa area. The six regions interviewed were:

<b>Client-Defined Region within Contra Costa County</b>	<b>Cities</b>
West County	Crockett, El Cerrito, El Sobrante, Hercules, Pinole, Port Costa, Richmond, Rodeo, San Pablo
Lamorinda	Lafayette, Moraga, Orinda
South County	Alamo, Danville, San Ramon
Central County	Clayton, Concord, Martinez, Pacheco, Pleasant Hill, Walnut Creek
East County	Antioch, Bay Point, Pittsburg
Far East County	Bethel Island, Brentwood, Byron, Discovery Bay, Knightsen Oakley

For this study, ICR maintained a staff of Spanish-speaking interviewers who, when contacting a household, were able to offer respondents the option of completing the survey in Spanish or English.

#### **Eligible Respondents**

This survey was administered to any non-institutionalized adults age 65 and older who resided among the six specified regions in the Contra Costa area.

#### **Field Period**

The field period for this study was December 14, 2004 – January 19, 2005. The interviewing was conducted by ICR/International Communications Research in Media, PA. All interviews were conducted using the Computer Assisted Telephone Interviewing (CATI) system. The CATI system ensured that questions followed logical skip patterns and that the listed attributes automatically rotated, eliminating “question position” bias.

#### **Sampling Methodology**

The sample used for this study was obtained using list-assisted random digit dialing plus a listed household sample, and a disproportionate sample design:

<b>Region within Contra Costa County</b>	<b>Completed Interviews Using List Assisted RDD plus Listed Household Sample and a Disproportionate Sample Design (N=721)</b>
West County	121
Lamorinda	120
South County	120
Central County	120
East County	120
Far East County	120

The sample was generated by the ICR sister company, Marketing Systems Group (MSG). MSG is one of the survey research industry's largest statistical sampling companies, and a preferred supplier to social science researchers and governmental organizations such as the U.S. Census Bureau and Centers for Disease Control.

### **Weighting**

Weighting was accomplished in two phases.

First, demographic estimates for Age, Gender, Race, and Education were secured for each of the six (6) ZIP Code defined regions within Contra Costa County from CLARITAS, a marketing information resources company. Then, using a sample balancing program, the completed interviews were weighted such that the demographic distribution of the sample matched the estimates secured from CLARITAS.

Second, the completed interviews within each stratum received a second weight, bringing the stratum's weighted total up to the total population estimate.

### **Response Rate**

The following are the final sample dispositions for the project:

#### **Interview (I)**

Interview completed with adult 65+ years of age	721
Respondent under 65 years of age (no interview conducted)	8,832

#### **Eligible, non-interview (R)**

Refused	773
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#### **Unknown eligibility, non-interview (UH+UO)**

Busy	113
No Answer	1,744
No screener completed	2,138

**Not eligible**

Fax/data line	2,495
Non-working/disconnect number	3,683
Non-residences	1,360
No eligible respondent	759
Quota filled	68

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<b>Total telephone numbers used</b>	<b>22,686</b>
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In order to calculate the response rate for the study, the following definitions were used:

I=Complete Interviews
P=Partial Interviews
R=Refusal or break off
NC=Non Contact
O=Other
e= Estimate of e is based on proportion of eligible households among all numbers for which a definitive determination of status was obtained (a very conservative estimate).
UH=Unknown household
UO=Unknown other

The response rate was calculated a few ways. The first was the most basic, a cooperation rate. This was calculated by taking the Completed interviews (I) / I + R. Using American Association of Public Opinion Research (AAPOR)'s Cooperation Rate 3 this would be 92.5%.

In the next calculation, AAPOR's response rate formula RR3 was used to calculate the response rate for this study of 76.2%. The formula for RR3 is:  $I/((I+P)+(R+NC+O)+e(UH+UO))$  where e is an estimated proportion of cases of unknown eligibility that are eligible. In this case we used AAPOR's conservative calculation of 0.552. In short,  $9,553/([9,553 + 0] + [773 + 0 + 0] + 0.552[1,857 + 2,138])$ . This formula divides the completes by the sum of the completes, refusals, and a percentage of the households that could not be reached. The percentage of households is based on the percentage of households that were successfully interviewed  $((I+R)/(I+R+Not\ eligible))$ .

The final calculation is the most stringent AAPOR offers, RR1. In this formula rather than taking a percentage of the unknown households in the denominator you include them all. Using the formula for RR1,  $I/((I+P)+(R+NC+O)+(UH+UO))$  the response rate is 66.7%.

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