

Aging in Place in Howard County: A Survey of Older Adults

Students in SPHL498G: Public Health in the City

Under the supervision of Lynn Cook

The University of Maryland – College Park
Spring, 2016



PALS - Partnership for Action Learning in Sustainability
An initiative of the National Center for Smart Growth

Gerrit Knaap, NCSG Executive Director
Uri Avin, PALS Director

Table of Contents

Introduction..... 2
Methods..... 2
Results..... 3
Recommendations..... 7
Implications..... 7
References..... 8
Appendix A..... 9
Appendix B..... 10
Appendix C..... 20

Introduction

This report is a compilation of original research conducted by students in the course SPGL498G, Public Health in the City, during the spring 2016 semester at the University of Maryland College Park. (See Appendix A) Students interviewed older adults in Howard County to determine factors that could impact their ability to age in place.

We defined aging in place (AIP) as, “the ability to live in one’s own home and community safely, independently and comfortably regardless of age, income or ability level.” (CDC, n.d.) Research has shown that 90% of older adults express a desire to age in place and many characteristics affect their ability to do so, including their financial status, social supports, functional abilities, and access to housing. (Golant, 2008)

We sought the answers to the following research questions:

- What percentage of older adults in Howard County desire to AIP, and how does this vary by age, gender, race/ethnicity?
- Can we distinguish between different levels of preference? (generalized preference vs. desire to AIP even with a disability)
- What are the characteristics of those who wish to AIP?
- How do County residents use existing resources such as 50+ Centers?
- What is the impact of 50+ Centers on older adults’ well-being?

Currently, 10.1% of Howard County’s population is 65 years of age or older. By the year 2040, it is estimated that this population will more than double, to 22.4%. (Engelberg, 2016) We aimed to both identify barriers and facilitating factors to aging in place in Howard County. Finally, we make recommendations for changes to existing programming or policies that could assist residents who want to age in place.

Methods

The survey was developed through an iterative process between Charles A. Smith, Ph.D., Human Service Planner; Howard County Department of Citizen Services; and the University of Maryland. (See Appendix B) Descriptive and bivariate analyses were conducted and are presented in the following pages. Limitations to the methodology include population bias (the survey was limited to those attending senior centers and

libraries); social desirability bias (respondents' answers may be skewed to please the survey administrator); and problems with the survey software.

The survey was pre-tested with a representative sample population and revised according to feedback. Students administered surveys to 164 County residents 50 years of age and older. Approximately half were surveyed in person using iPads at 50+ Centers and libraries. Senior Center Directors facilitated access to the desired population. Additional surveys were administered online. The survey was anonymous and waived by UMD's Institutional Review Board as "not human subjects research." (See Appendix C)

Results

The largest percentage of respondents live with family members in homes with bedroom, bathroom, and kitchen on different levels. However, those who live alone are somewhat more likely to have those rooms on the same level.

Those with bedroom, bathroom, and kitchen on different levels were more likely to claim they had difficulty doing housework. Inability to do light housework may be a predictor of accelerating functional impairment especially for individuals living in less supportive home environments.

A greater proportion of participants who were 75 years or older stated that their house was "accessible." This could mean that they have already downsized or have already transitioned to households that are tailored to their safety and needs. As individuals get older, the idea of AIP becomes more concrete.

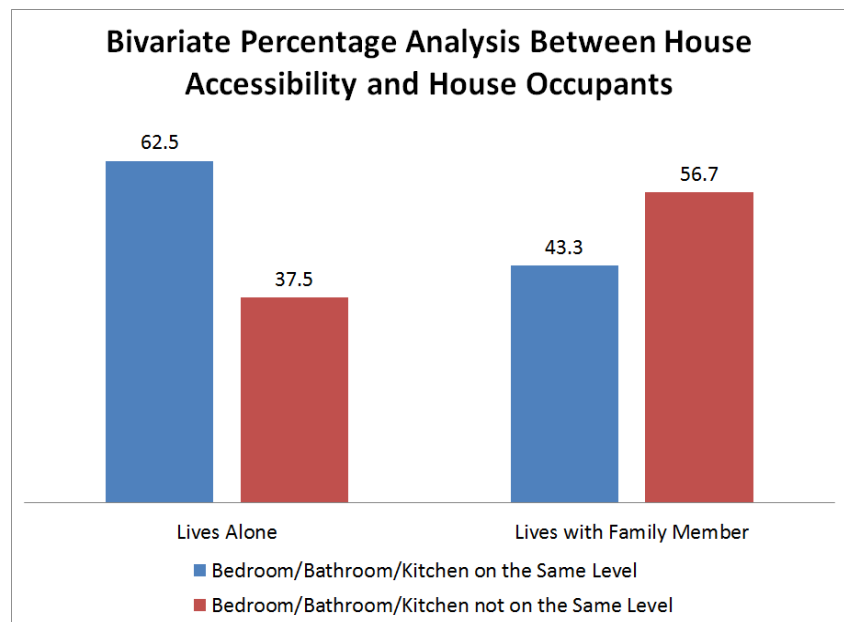


Figure 1: Home layout and the percent of residents who live alone vs. those with a family member.

The majority of respondents reported good mental health. Those in the oldest age category reported the highest level of mental health. This is consistent with prior studies that have found that self-reported mental health improves with age.

Survey results indicated that race plays a role in advance planning. A greater proportion of participants who were white reported having a living will. A majority of participants who were Black did not have a living will, but they reported that this was something they wanted to have in the future. This result may be due to the fact that Black respondents on average were younger than White respondents, hence they may not yet feel the need for a living will.

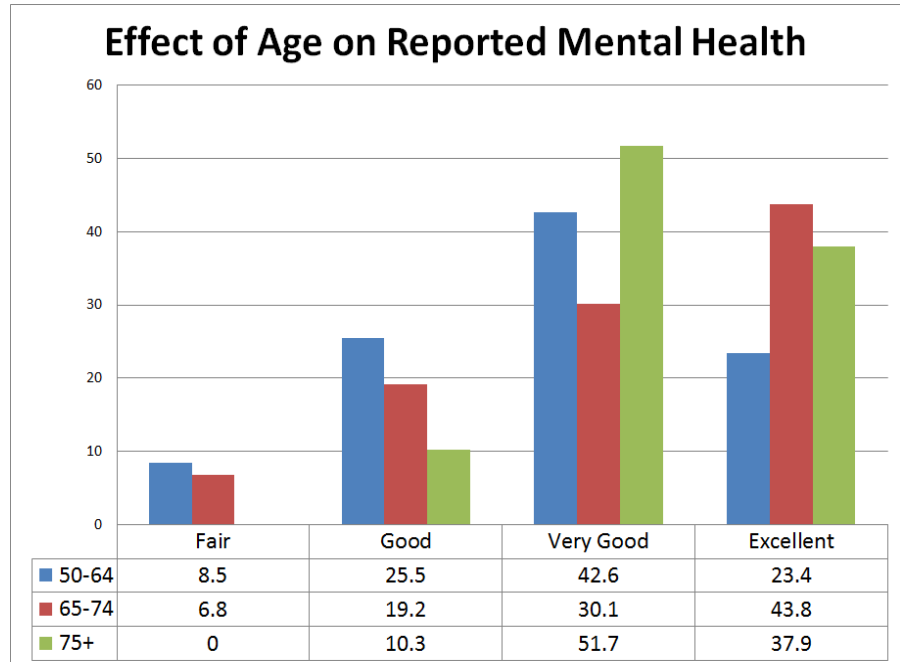


Figure 2: Percentage of residents, by age, and self-reported mental health

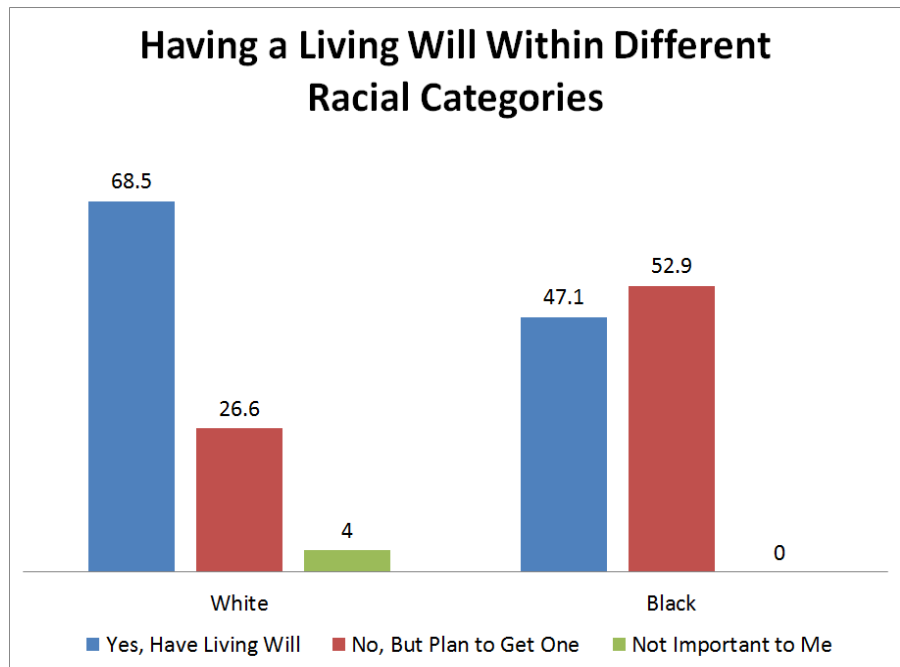


Figure 3: Percentage of residents with a living will by race

Overall, attending senior centers was negatively associated with feelings of loneliness. This might mean that senior centers are a protective factor, and might better equip Howard County residents to age in place. Most people listed “exercise” and “lectures” as the two major reasons for attending a senior center, and reported that “time” was the biggest barrier to attendance. Those who listed time as a barrier were more likely to be between 55 and 65 years old, and could still be working.

As age increases, respondents expressed a stronger desire to age in place. The prospect of disability diminishes the desire to age in place.

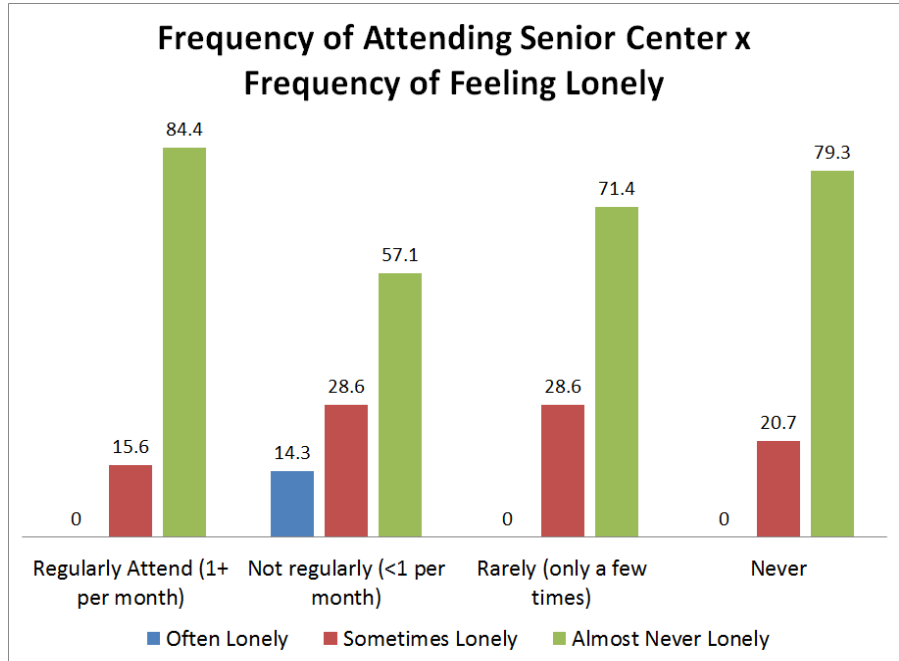
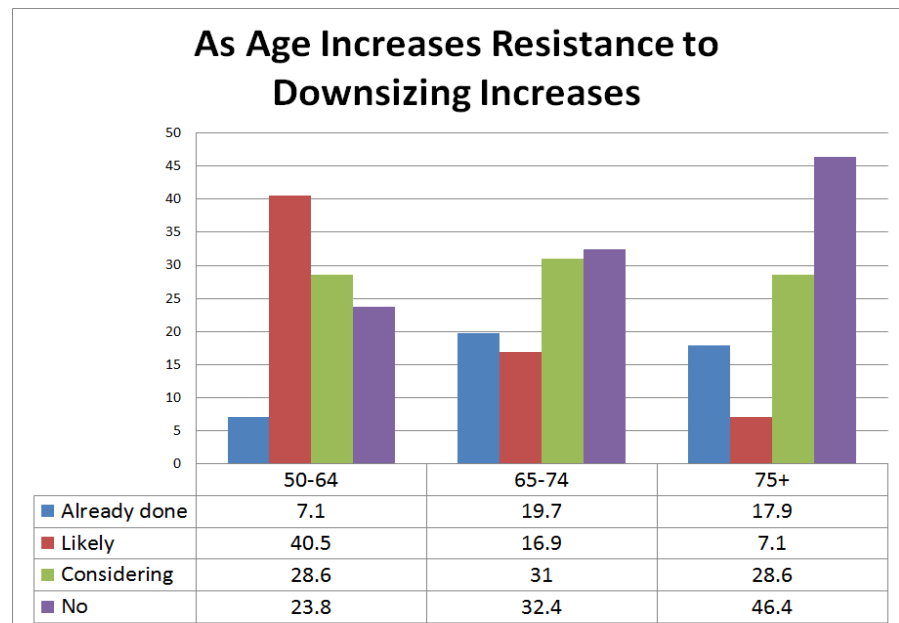


Figure 4: Percentage of residents who attend senior centers vs. those feeling lonely



The group that is most vulnerable, and facing most difficulties aging in place due to person-environment mismatch, is both most adamant about aging in place and least cautious about the impact of disabling conditions on the capacity to successfully age in place. This group is also resistant to the notion of downsizing.

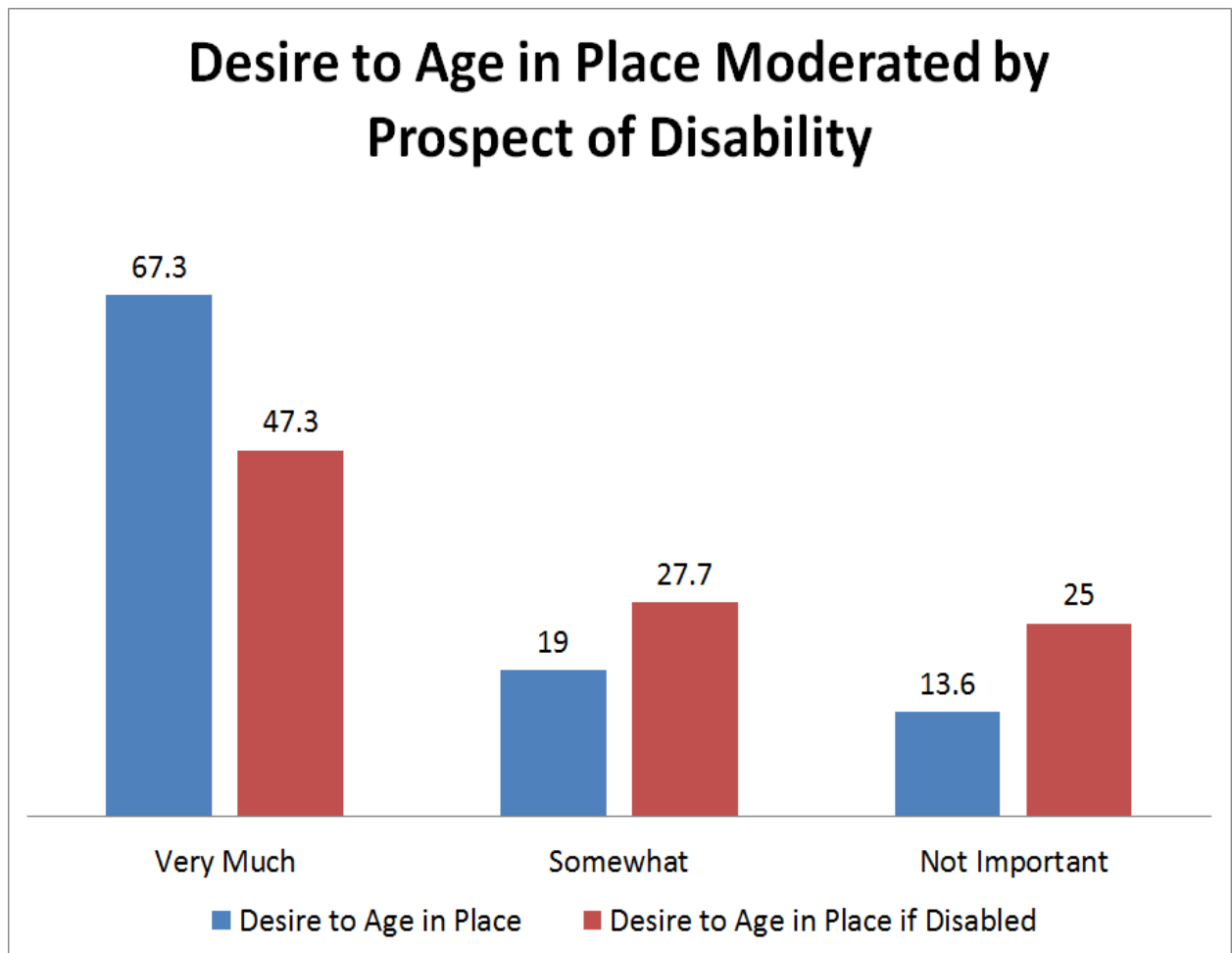


Figure 6: Percentage of residents who desire to age in place even if disabled

Recommendations

- Educate senior citizens and their families about aging in place.
- Strengthen programs that would retrofit homes to be more accessible.
- Offer low cost interventions or financial assistance for house remodeling.
- Conduct surveys of senior center attendees to discover what type of exercise classes and lectures would be of interest.
- Offer activities at senior centers to better accommodate working people, such as evening classes.
- Increase understanding of the importance of advance planning among older adults of different racial backgrounds through workshops at senior centers and libraries.
- Create educational materials on the importance of advance planning and the impact it has on aging in place.
- Utilize local churches and health care providers to disseminate the appropriate resources on advance planning.
- Conduct additional surveys to better capture data from county residents who do not attend 50+ Centers, e.g., expand venues to include pharmacies and grocery stores.
- Conduct surveys in every zip code of Howard County.

Implications

- AIP becomes more difficult as people accumulate functional limitations.
- “Old-old” (75+) individuals with functional limitations are more committed to AIP.
- AIP may have unintended consequences:
 - increased risk of injury
 - social isolation
 - decreased quality of life.

References

1. CDC. (n.d.) Healthy Places. Healthy Places Terminology. Retrieved April 25, 2016, from <http://www.cdc.gov/healthyplaces/terminology.htm>.
2. Engleberg, D. (2016) An Introduction to Howard County, Maryland. 1st ed. Partnership for Active Learning in Sustainability.
3. Golant, S. (2008) Commentary: Irrational exuberance for the aging in place of vulnerable low-income older homeowners. *Journal of Aging & Social Policy*, 20(4), 379-397.

Appendix A: Students enrolled in Public Health in the City, Spring 2016

1. Amjed, Owais
2. Bravo, Joselin
3. Coulibaly, Dandio
4. Datagni, Ifare
5. Dialino, Karmel
6. Duong, Jenny
7. Duran, Janice
8. Ewane, Leticia
9. Flores, Nancy
10. Giron, Christopher
11. Goli, Yasaman
12. Goonewardene, Dilani
13. Harrison, Tiffany
14. Hong, Mason
15. Jackson, Jonee
16. Jang, Michelle
17. Le, Thy
18. Lopez, Elizabeth
19. Nallo, Satta
20. O'Neal, Aleeyah
21. Ramirez, Flor
22. Riesberg, Kristen
23. Saliente, Keith
24. Sande, Thokozani
25. Smet, Brenna
26. Thomas, Tenyamen
27. Villanueva, Juan
28. Young-Sebok, Orsolya

Appendix B: Survey Instrument

AGING IN PLACE SURVEY 2

1. Student administering survey:

DEMOGRAPHICS

2. Age?

- 0-49
- 50-54
- 55-59
- 60-64
- 65-69
- 70-74
- 75-79
- 80+

3. Gender?

- Male
- Female

4. Ethnicity?

- White, Non-Hispanic
- African-American/Black
- Asian/Pacific Islander
- Hispanic
- Other

5. Relationship Status?

- Single/divorced/widowed
- Married/Have a live-in partner

6. Adult children?

- I have no children/step children
- All children/step children live outside the area
- 1 or more children/step children live within easy driving distance

7. Zipcode?

HOUSING / LIVING SITUATION

8. Do you own your own home/apartment?

- Yes
- No

9. Given your financial situation, how much difficulty do you have paying your monthly rent/mortgage?

No Problem

Minor Difficulty

Severe Difficulty

10. At the present time, do you feel that you will have enough money/assets to meet your needs in the next 5-10 years?

- Yes
- Uncertain
- No

11. How often do you find yourself feeling lonely (select one only)?

Quite often

Sometimes

Almost Never

Choose not to
answer

12. Do you have someone you can trust and confide in (select one only)?

- Yes
- No

13. In regards to your current home (answer YES/NO to each item):

	Yes	No
The house is accessible without using stairs:	<input type="radio"/>	<input type="radio"/>
Bedroom and bathroom are both on the same level:	<input type="radio"/>	<input type="radio"/>
Bedroom, bathroom and kitchen are on the same level:	<input type="radio"/>	<input type="radio"/>

14. In regards to your current living situation (select one only)?

- I live in an assisted living facility or nursing home
- I live in another type of supported or supervised housing
- I live independently

DESIRE TO AGE IN PLACE(untitled)

15. To what extent would you like to remain in your current home as long as possible?

- Very much
- Somewhat
- Not that important to me

16. To what extent would you like to remain in current home if you were to become disabled and had difficulty getting around in your home (select one only)?

- Very much
- Somewhat
- Not that important to me

17. How would you feel about moving to a smaller home/apartment (i.e., “downsizing”) in the future as you age (select one only)?

- Likely to do so
- Considering it
- Do not wish to do so
- Have downsized/am currently downsizing
- N/A

HEALTH

18. In general, how would you rate your overall mental health:

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor | Fair | Good | Very Good | Excellent |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

19. In general, how would you rate your overall physical health?

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor | Fair | Good | Very good | Excellent |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

20. In relation to healthcare, how easy is it for you to:

	No problem	Some problem	Unable to do so without assistance	N/A
Get to my doctor's office:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Get medications/prescriptions:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pay for medications/prescriptions:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. In relation to food shopping, how easy is it for you to:

	No problem	Some problem	Unable to do so without assistance
Get to a full-service grocery store:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Get fresh fruits and vegetables:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. I would describe my following patterns as:

	Excellent	Good	Fair	Poor
Eating/nutrition habits:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercise habits:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stress management:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

FUNCTIONAL STATUS

23. Select only one for each question:

	Yes, without problems	Yes, but with difficulty	No, Need Assistance
Can you handle your own shopping?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can you perform light housework?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can you manage your own finances (including managing your bills)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can you bath or take a shower?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to walk across a room?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to lift a 10 lb weight over your head?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to grasp and manipulate small objects?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to drive a car?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to take public transportation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. How often do you walk more than 10 minutes at a time:

- 1 time per week
- 2-4 per week
- 5-7 per week
- 7+ times per week

25. What barriers exist for you in regards to walking more? Check all that apply

- No sidewalks
- No crosswalks
- No timed crossing signs
- I live on a busy street
- I'm afraid of falling
- I'm afraid of being the victim of a crime
- I don't go out alone
- Weather

SOCIAL

26. How many times per week do you participate in social activities (getting together with friends, attending cultural events, taking classes, etc.) (select one only)?

- Once a week or less
- 2-3 times per week
- 4+ times per week

27. Over the last six months, on average, how frequently have you participated in organized religious activities (i.e., church, synagogue, mosque, etc.)?

- Never
- Once a month or less
- 2-3 times per month
- 4 or more times per month
- I'd rather not answer

28. How often do you attend Senior Centers (also known as 50+ Centers) (select one only):

- Regularly (more than 1 time per month)
- Attend but not regularly (less than 1 time per month)
- Very rarely (have only attended a few times ever)
- Never

29. What barriers exist for you in regards to attending Senior Centers (check all that apply):

- Do not know where they are or what takes place there
- Transportation to them is difficult
- Activities are not of interest
- Do not have time to attend
- Do not identify with the people at senior centers
- I'm not interested

30. What is your current living situation (select one only)?

- Live alone
- Live with a family member or friend
- Live with unrelated others

31. What types of activities at a Senior Center might be of interest to you (check all that apply):

- Exercise classes (yoga, weights, etc.)
- Lectures on various topics (e.g., history, science, arts)
- Games (i.e., cards, bridge, pool)
- Group lunches
- Movies or live music events
- Volunteering
- Socialization

PLANNING EFFORTS

32. If you were to become disabled, how knowledgeable do you feel about public or private resources to assist you?

- Feel very knowledgeable
- Feel somewhat knowledgeable, but would like a little guidance
- Know very little about resources available and would need help
- Not aware of resources in community and would need lots of help

33. In relation to a Living will (select one only):

- I have one
- I do not currently have one, but plan to do so in near future
- Do not feel it is important at this time
- Do not wish to have one
- Do not know what this means

34. In relation to Advanced Medical directives (select one only):

- I have one
- I do not currently have one, but plan to do so in near future
- Do not feel it is important at this time
- Do not wish to have one
- Do not know what this means

35. Have you engaged in discussions with family/friends about future care needs and/or preferences if you were to become disabled (select one only):

- Yes
- Not yet, but would be interested in doing so
- No, not interested in doing so
- Do not know what this means

---End of Survey---

Appendix C: IRB Waiver



1204 Marie Mount Hall
College Park, MD 20742-5125
TEL 301.405.4212
FAX 301.314.1475
irb@umd.edu
www.umresearch.umd.edu/IRB

DATE: February 9, 2016
TO: Lynn Cook, MHS
FROM: University of Maryland College Park (UMCP) IRB
PROJECT TITLE: [859827-1] Public Health in the City
SUBMISSION TYPE: New Project
ACTION: DETERMINATION OF NOT HUMAN SUBJECT RESEARCH
DECISION DATE: February 9, 2016

Thank you for your submission of New Project materials for this project. The University of Maryland College Park (UMCP) IRB has determined this project does not meet the definition of human subject research under the purview of the IRB according to federal regulations.

We will retain a copy of this correspondence within our records.

If you have any questions, please contact the IRB Office at 301-405-4212 or irb@umd.edu. Please include your project title and reference number in all correspondence with this committee.

This letter has been electronically signed in accordance with all applicable regulations, and a copy is retained within University of Maryland College Park (UMCP) IRB's records.