# Survey of older adults in Ramsey County

Quality of life and community

DECEMBER 2003

# **Survey of older adults in Ramsey County**

Quality of life and community

**December 2003** 

Prepared by: Cara Bailey and Melissa Barker

Wilder Research Center 1295 Bandana Boulevard North, Suite 210 Saint Paul, Minnesota 55108 651-647-4600 www.wilder.org/research

## **Contents**

Summary	1
Introduction	12
Reasons for the survey	12
Sample selection	15
Geographic distribution of survey participants	15
Additional culture-specific survey	17
Demographics of survey participants	18
Age and gender	18
Race/ethnicity, language, and country of origin	20
Religious preference	21
Household income	21
Education	22
Marital status	24
Survey results	26
Basic needs.	26
Engagement	47
Well-being	63
Community environment	71
Issues to consider	72
References	76
Appendix	77
A-1. Things that give meaning to the lives of survey respondents	79
A-2. What would make your community a better place to live? Responses for city of Saint Paul by Planning District.	84

# **Figures**

1.	A framework for quality of life (Wilder Foundation)	. 14
2.	Geographic distribution of Ramsey County survey respondents by city	. 16
3.	Age distribution of Ramsey County survey respondents	. 18
4.	Gender distribution of Ramsey County respondents	. 19
5.	Age by gender of Ramsey County survey respondents	. 19
6.	Racial or ethnic distribution of survey respondents	. 20
7.	Federal poverty guidelines for 2002	. 21
8.	Income distribution by household size for Ramsey County respondents	. 22
9.	Educational status of Ramsey County respondents	. 22
10.	Education level by gender for Ramsey County respondents	. 23
11.	Marital status by gender for Ramsey County respondents	. 24
12.	Marital status by age group for Ramsey County respondents	. 25
13.	Survey items used to measure the Basic Needs component of the quality of life framework	. 26
14.	Housing type and tenure for Ramsey County respondents	. 28
15.	Living arrangements of Ramsey County survey participants	. 29
16.	Demographics of survey participants living alone	. 30
17.	Housing types preferred by respondents considering a move within the next two years	. 32
18.	Reasons to consider moving within the next two years	. 33
19.	Perceptions of safety among older adults in Ramsey County	. 34
20.	Older adults in Ramsey County who receive nutrition support services	. 36
21.	Older adults in Ramsey County who receive home health and personal care services	. 38
22.	Supportive services received by older adults in Ramsey County	. 39
23.	Profile of typical support service recipient	. 40
24.	Financial security of survey respondents	. 42
25.	Concerns about financial resources	. 42
26.	Perceptions of trust, help, and support among older adults in Ramsey County	. 44
27.	Primary means of transportation among Ramsey County older adults	. 46
28.	Are there any things that prevent you from attending events or activities in your neighborhood or anywhere else?	. 47

# Figures (continued)

29.	Survey items used to measure the Engagement component of the quality of life	
	framework	
30.	Importance of social contacts with family and friends	49
31.	Contacts with a family member or a friend to whom respondent feels close	49
32.	Engaging in community activities	53
33.	Current description of employment status	54
34.	Characteristics of caregiving survey respondents	55
35.	Caregiving activities of survey respondents	56
36.	For you personally, how important is being involved in your community?	60
37.	Importance of having new learning experiences	62
38.	Survey items used to measure the Well-being component of the quality of life framework	63
39.	Respondents' self-assessed general health status	64
40.	How would you rate your overall health?	65
41.	Importance of taking care of your health	65
42.	Concerns about suffering from poor health or from pain	66
43.	Feeling anxious or depressed: seeking help or counseling	67
44.	The importance of having a rich spiritual life	67
45.	For you personally, how important is having a rich spiritual life?	68
46.	Barriers to life satisfaction among survey respondents	69
47.	Respondents' self perception of age	70
48.	Respondents' self perception of age by age group	70

## **Acknowledgments**

We would like to thank the individuals who responded to our telephone survey and provided us with insight into what is important to the quality of their lives.

We would also like to thank the following staff members from the Wilder Research Center who contributed to this report:

Melisa Lopez-Aquino Mark Anton

Mark Miazga Benjamin Bushee Ronald Mortenson

Marilyn Conrad

Kao Moua Phil Cooper

Marion Namenwirth Kari Danielson Michael Osberg Anne Davis Sandra Paddock Swati Deo Margaret Peterson

Cardina Esparza Hannah Repp **Nubberd Gonzalez** Lisa Sell Louann Graham

Corleen Smith Beth Hastings Abigail Struck Deirdre Hinz Dan Swanson Ginger Hope

Lue Thao Jerry Judkins Karen Ulstad Margaree Levy Kristin Ulstad Teresa Libro

Bee Vang Bryan Lloyd

## **Summary**

The anticipated growth in the older adult population over the next 30 years has major implications for people of all ages as well as for local health, social, economic, and other community institutions. Yet it is a mistake to think of the coming "senior boom" merely in terms of higher demand for services. Older adults are vital to their communities. They bring richness of diversity and past life experiences. They are active participants in the social and economic life of their communities.

Locally, it is apparent from the 2000 Census that the number of older adults living in the city of Saint Paul has actually declined in recent years, whereas the number of older adults has increased in most suburban cities in Ramsey County. This change, especially if it continues or becomes more pronounced, could have substantial implications, both for the urban neighborhoods that have a net loss of older adults and for the suburban communities that have a net gain. For example, it could affect the localized need for supportive services and for certain types of housing and transportation, as well as the participation of older adults in community life and local institutions.

These population trends, combined with the current financial straits of local public and nonprofit services for older adults, prompted the Amherst H. Wilder Foundation and the Ramsey County Department of Community Human Services to collaborate on an extensive survey of older adults living in Ramsey County. The survey explored many different dimensions of the quality of life of older adults, ranging from basic needs for food and shelter to the more intangible things that add meaning and satisfaction to life such as spirituality and engagement.

The telephone survey took place February through May 2003, using a random sample of Ramsey County residential telephone numbers. A total of 499 interviews were completed, for a response rate of 74 percent.

The survey sample is representative of the older adult population in Ramsey County in terms of race and ethnicity, age, gender, and income. About half the survey participants lived in Saint Paul and the other half lived in suburban communities; this also closely reflects the actual distribution of people age 65 and older in Ramsey County. The survey sample did not include older adults who were institutionalized.

All interviews were conducted in English (except for one in Spanish) and took 25 to 30 minutes. To explore the perspectives of African American, Hmong, and Latino older adults, Wilder Research Center surveyed a separate sample of 50 African American, 50 Latino, and 50 Hmong older adults. Because the sampling method was different from that used in the main survey group, the results should not be combined or compared.

However, the special survey groups provide a way of hearing from a wider sample of older adults in three of Ramsey County's major cultural groups. Those results are contained in a separate report prepared by Ramsey County.

#### About the survey participants

**Age**. The ages of survey respondents ranged from 65 to 103. The average age was 76 and the median age was 75, meaning that half the participants were younger than 75 and half were older. Similar to the entire older adult population in Ramsey County, 49 percent of the survey participants were age 65 to 74; 41 percent were 75 to 84; and 11 percent were age 85 or older.

**Gender**. More than two-thirds of the respondents were women (68%) and one-third were men (32%). In Ramsey County, 62 percent of older adults are women and 38 percent are men. The men in the survey were younger on average than the women: 55 percent of the men were under age 75, compared to 46 percent of the women.

Race and ethnicity. In this regard the survey group also closely resembled the county's older adult population as a whole. Nearly all (95%) were White; 2 percent were African American, 2 percent were Asian, 2 percent were of another race, and 2 percent did not respond to the question. In addition, 2 percent of the survey participants were of Hispanic origin, which is a separate question from race. English is the main language spoken at home for 98 percent of the respondents.

**Religion**. Half of the respondents indicated that their religious affiliation is with one of the Protestant denominations, 42 percent are Roman Catholic, and 6 percent do not have a religious preference. Other religious affiliations included Eastern Orthodox, Jewish, Quaker, Humanist, Shamanist, and Mormon.

**Household income**. Over half of the survey respondents have household incomes above \$25,000, and about half of those have incomes above \$50,000. On the other side of the coin, about 23 percent of the survey participants are below or just above the federal definition of poverty, having incomes below \$15,000. Lastly, approximately 21 percent of the respondents have income between \$15,000 and \$25,000. This group is often of concern to service providers because their income is too high to qualify for many publicly supported programs, yet they typically cannot afford to pay for substantial support services.

**Education**. Nearly half of the survey group had at least some college or technical training after high school; 32 percent were college graduates, and about 13 percent had a graduate or professional degree. However, over one-third of the women had no more

than a high school diploma, and only 7 percent of the women had completed a graduate or professional degree, compared to nearly one-quarter of the men.

**Marital status**. The men in the survey were more likely to be living with a spouse or partner while the women were more likely to be living alone. Seventeen percent of the men were widowed, compared to 44 percent of the women.

#### Survey results

One of the objectives of this survey was to begin developing and testing a framework that describes aspects of the quality of life for older adults. The Wilder Foundation uses this framework to organize its programs serving older adults and its efforts to help build a community where older adults thrive.

This report presents survey results in categories that correspond to Wilder's framework for quality of life.

#### A framework for understanding older adults' quality of life

Basic needs	Engagement	Well-being
Housing	Social interaction	Spirituality
Safety	Meaningful activities	Physical well-being
Nutrition	Community connections	Mental well-being
Access to needed services	Learning and creative expression	Life satisfaction
Financial security		
Human support (comfort)		
Autonomy and choice		

This survey afforded us the opportunity to learn more about the status of the quality of life and life satisfaction among older adults in Ramsey County using a framework that encompasses not only basic needs such as health and safety, but also higher-level needs related to engagement and overall well-being, such as social interaction, meaningful activity, creative expression and learning, spirituality, and physical and mental well-being.

From this survey we learned that a large majority of older adults in Ramsey County appear to have their basic needs met, are engaged in community life and want to be more engaged, feel good about their health, and are satisfied with their lives. However, some are clearly struggling. It is important to bear in mind, when reviewing the results of this

survey, that a small percentage may amount to a sizeable number when applied to the entire population of Ramsey County older adults.

#### **Basic needs**

**Housing.** Most survey participants (78%) own their home. Of that group, 79 percent live in single family homes. Renters, who made up 19 percent of the survey group, also live primarily in lower-density housing; 83 percent of the renters are in single family homes, duplexes, or triplexes.

Ten percent expect to move within the next two years and would likely stay in Ramsey County. Of those, only half would prefer to own their next home (compared to 78% who currently own their home); the other half would prefer to rent. The type of housing preferred by these potential movers varies:

- 46% would look for an apartment or condo specifically for older adults
- 35% would look for a single family home
- 33% would look for a townhome
- 33% would look for an apartment or condo not specifically for older adults

(Those percentages total more than 100% because people could name more than one type of housing they would prefer.)

Reasons given for planning to move include some "pull" factors (24%) such as wanting to be closer to children, closer to church, closer to shopping, and so on. However, most reasons (76%) would be considered "push" factors such as wanting to reduce home maintenance responsibilities, repairs and renovations, or housing costs. Thirty-five of the 48 potential movers said they anticipate barriers that will make it difficult for them to move, such as finding affordable housing and finding help with moving.

**Sense of safety.** Nearly all respondents said their neighborhood is safe during the day (97%), but about one-quarter (23%) feel their neighborhood is not safe at night. Perceptions of safety vary between Saint Paul and suburban cities; 35 percent of Saint Paul residents reported they feel their neighborhood is not safe at night, whereas 13 percent of those in suburban cities said their neighborhood is not safe at night. Within Saint Paul, residents of Highland and Macalester-Groveland neighborhoods feel the safest and residents of Payne-Phalen feel the least safe at night.

**Meals.** Ten percent of the participants receive shopping assistance, 9 percent currently use congregate dining services (meals served to a group), 6 percent have help with meal

preparation, and 3 percent receive home-delivered meals. In all these cases, only 1 to 2 percent of the people not receiving these services said they need such services.

Home health care and personal care. Seven percent of the survey participants received visits in the past month from a home health nurse who set out and monitored their medications, checked blood pressure and glucose (blood sugar), or provided foot care. Three percent had a recent visit by a home health nurse as a follow up to a recent hospitalization. Within the past month, 3 percent of the survey participants had received personal care (assistance with bathing or dressing) from a home health aide.

Access to supportive services. The survey asked if people had the following kinds of help in the past month: housekeeping; heavy cleaning or chore services; transportation; managing bills and balancing a checkbook; and assistance with completing health insurance, Social Security, or Medicare forms. Overall, the survey participants are not heavy users of supportive services, and their help comes primarily from family and friends. They most commonly had help with heavy cleaning or chores (39% of participants), transportation (19%), and housekeeping (18%). The greatest reported unmet needs in the survey are for housekeeping services (needed by 8%) and heavy cleaning or chore services (9%). Furthermore, a substantial portion (about 20%) said they would not know where to turn for information about supportive services available in their community.

**Who typically uses services?** The older adults who most commonly report they frequently use supportive services in Ramsey County are women over age 75 who live alone on a very limited income.

**Financial security.** Most survey participants appear able to meet basic needs for food, medicine, and health care. Almost all said they had enough money in the past year to pay for needed medical services (96%) and prescription medicines (96%), and 86 percent were able to pay for supplemental insurance. Of those with supplemental insurance, 67 percent have prescription drug coverage. However, over one-half said they are either *somewhat concerned* or *very concerned* about paying for long-term care or outliving their resources.

**Human support (comfort, trust).** The survey asked a series of questions to measure the extent to which people feel they can trust others around them and are helped and supported by others. Overall, older adults in Ramsey County have high levels of trust that their neighbors will look out for them (91%), feel that their neighbors are willing to help each other out (93%), and almost without exception say that they have someone to call on if they need help right away (97%).

**Autonomy and choice.** Several survey questions touched on aspects of autonomy and choice in everyday life. Concerning availability of transportation, 82 percent of the survey group said they drive their own car, which allows substantial freedom to choose when and where one would like to go.

Still, substantial numbers of older adults cited barriers to attending events and activities. The older the person and the lower their income, the more likely they were to say that something kept them from going out to do things they would like to do. This helps explain the substantial difference between the proportion of men (28%) and women (44%) who reported barriers, since the women in the survey were, on average, older with lower incomes. The top three barriers mentioned were health (25%), limited personal mobility (18%), and lack of transportation (15%).

Looking at another aspect of personal autonomy and influence, one survey question asked people whether they have the ability to change things in their neighborhood. Just under half (47%) replied that they feel they have this ability, while 43 percent felt they are not able to change things in their neighborhood. A relatively high percentage (10%) said they do not know.

#### **Engagement**

**Social interaction.** We asked survey participants about the importance of their relationships with family and close friends, and also about the extent to which they have regular contact with these people. Most, but not all, said they highly value close relationships with family and friends (86% said this is *very important*). Likewise, most, but not all, have frequent regular contact with a family member or friend they feel close to: They have telephone calls (94%) or personal visits (82%) at least once a week with a person they feel close to.

A smaller majority have someone they feel close to who lives on their street or in their neighborhood (60%) and a larger proportion (83%) have close family or friends living in Ramsey County. Many of these nearby family members are adult children; most of the respondents have at least one child (90%) and many have two or more children (83%). Of those with adult children, most have at least one living within a 60-minute drive (91%).

Yet a substantial percentage of the older adults in this survey expressed concern about being alone. Although not the majority, 21 percent said they are *somewhat concerned* and 7 percent said they are *very concerned* about the prospect of being alone.

**Community connections.** Nearly all of the respondents said that their neighborhood feels like home (97%) and that they feel connected to the people in their neighborhood

(81%). Three out of four (75%) said that being involved in their community is *important* or *very important*. The prevalence of this belief rises with income and education, and decreases slightly with age.

Activities and events. During the past month, respondents went shopping (92%), ate out at a restaurant (89%), attended religious services regularly (74%), visited public libraries (45%), and engaged in other activities or events associated with their religious affiliation (43%). About one-third said they attended community social clubs such as those at senior centers, attended community events, went to movie theaters, or attended a play, symphony, or some other live entertainment during the past month.

**Employment.** Most survey participants are retired and not working (84%). However, about 1 in 10 (9%) are retired but continue to work, and 6 percent are not retired and continue to work. For those who continue to work, personal preference (39%) and financial need (34%) are the top reasons for continuing to work.

**Volunteer work.** Many older adults view retirement from the paid workforce as an opportunity to contribute to their community. About half (47%) of the respondents reported they volunteer in the community, for an average of 17 hours per month. About half of this volunteer work is for church-related activities. The other half is distributed among work for charities; hospitals, hospice, or nursing homes; delivering Meals on Wheels; or helping out family, friends, and neighbors.

Caregiving. About one out of four older adults (23%) said they either provide help or arrange for help for a family member or friend. Of these 114 caregivers, a majority are women, age 65 to 74 years, with annual income of \$15,000 or more. Strikingly, about half of those with caregiving responsibilities are assisting a friend or a member of their extended family, while a smaller proportion (39%) provide or arrange for care for their spouse, parent, or parent in-law.

Over two-thirds of the caregivers spend four or fewer hours per week on caregiving activities, mainly providing shopping and transportation assistance. At the other end of the spectrum is a core group of caregivers (15% of all caregivers) who assist with more demanding activities such as bathing, toileting, and dressing, and spend an average of 39 hours per week on caregiving activities. This core group of caregivers is about 3 percent of the entire survey group, which would translate to about 2,000 older adults in Ramsey County with major caregiving responsibilities.

Looking at the entire group of caregivers, including those who help just a few hours a week, most (66%) said they do get time off and nearly all (92%) indicated that they have enough time off from caregiving to do other things they want to do. Twelve percent of

the caregivers, however, said they would like additional support to help them in their caregiving role. The need most commonly identified by caregivers was for respite.

About one-quarter of the respondents take care of grandchildren. For most (81%), this care is for a few hours per day. Eight percent of the respondents reported that their grandchildren live with them.

**Learning and creative expression.** Nearly 80 percent of the survey group said that having new learning experiences is either *somewhat important* or *very important* to them. Younger (age 65 to 74) and more highly educated respondents place a higher importance on continued learning. Regarding income, the lowest-income (less than \$10,000 per year) *and* the higher-income (\$25,000 and over per year) respondents tended to place a higher value on new learning experiences, while those with income of \$10,000 to \$24,999 considered it less important.

#### **Well-being**

**Physical well-being.** Eight out of 10 older adults (79%) rated their health as *very good* or *good*. This differed little by age, although those age 85 and older were slightly more likely to rate their health as *fair*. Most, but not all, said it is *very important* to take care of their own health (83%). Half or more voiced concerns about suffering from pain (48%) and poor health (59%). Presumably in most cases these concerns were for the future since most gave good ratings to their current health.

**Mental well-being.** The survey questions related to mental health were intended to gauge specific service needs, not to assess overall mental health of older adults or screen for clinical levels of depression. Even so, the results point to some substantial concerns. About 53 percent reported they are concerned about losing their memory, and about 41 percent said they have felt depressed or anxious at some time during the past year. Of this 41 percent, only about one-third (31%) sought professional help or counseling. When asked about the main reason for not seeking help, most (72%) said they felt they didn't need help.

**Spirituality.** Three-quarters of the older adults in this survey (76%) said spirituality is *very important* and 18 percent said it is *somewhat important* to them. This was somewhat higher for women and for people age 85 and older.

**Life satisfaction.** Nearly all of these older adults said they are either *very satisfied* (51%) or *satisfied* (46%) with their lives. When asked what brings meaning to life, many of the responses echoed elements described in the quality of life framework on which the survey was based. Half of the survey group identified family, friends, and relationships as a major source of meaning in their lives. Others mentioned meaningful work,

recreational activities, religious practice, and actively pursuing hobbies and other interests.

One-quarter of the survey group named barriers that reduce their ability to pursue things that bring meaning to their lives. These typically included poor health, physical ability, and feeling too tired or not having enough energy (72% of those reporting barriers). Another 10 percent said that lack of money prevents them from pursuing things that bring meaning to their lives, and a few mentioned transportation as a barrier.

#### **Community environment**

When we asked survey participants what would make their community a better place to live for older adults, about half had nothing to suggest. (Nineteen percent said they were happy with things as they were, and another 32% simply had no suggestions to offer.)

The other half mentioned specific changes that would make life better for older adults in their community. Some people made more than one suggestion, and each idea is counted separately in the following percentages:

- Transportation (20% of suggestions) primarily improving the public transportation system or providing smaller, more localized transportation (van or small bus).
- Neighborhood improvements (19% of suggestions) most commonly the desire for more stores and other businesses within walking distance.
- Housing (18% of suggestions) primarily touching on affordability and suitability for older adults.
- Specific services (12% of suggestions) primarily better access to community centers, senior centers, and health-related services.
- Safety (9% of suggestions) primarily general concerns about feeling safe in the community, with some requests for more police protection.
- Social connections (8% of suggestions) including social activities as well as informal connections with younger people and with neighbors.
- Enrichment activities (2% of suggestions) including learning opportunities and arts events.
- Miscellaneous other ideas (11% of suggestions).

#### Key themes

#### **Basic needs**

- A sizeable number of respondents (10%) are considering moving within the next two years and expect to stay in Ramsey County. More of them want to rent their next home than currently do. Also, nearly half of the potential movers would prefer an apartment or condominium specifically for older adults. The top reasons for wanting to move are easier home maintenance, avoiding homer repairs and renovations, and affordability.
- Respondents in Saint Paul feel much less safe in their neighborhood at night than do their suburban counterparts (35% in the suburbs, 13% in Saint Paul).
- Relatively few older adults in this survey use supportive services and an even smaller percentage report an unmet need for services, with the exception of higher unmet needs for help with chores, home maintenance, and housekeeping. However, applying these percentages to the entire population of older adults in Ramsey County, the unmet need for services could represent sizeable increases in demand for the organizations currently providing those services.
- The typical older adult who receives supportive services is female, over age 75, and living alone.
- One out of five respondents did not know where to go for information about supportive services, which signifies a need to improve awareness of information sources and service availability in Ramsey County.
- Most survey respondents appear financially able to meet fundamental needs for food, supplemental insurance, and prescription drugs.
- Most respondents feel they can trust others around them, feel that their neighbors are willing to help each other out, and have someone they can call if they need immediate help.
- Health, limited personal mobility, and lack of transportation are keeping about 2 out of 5 Ramsey County older adults (39%) from events and activities they would like to participate in.
- The survey group is quite evenly divided on whether they have the ability to change things in their neighborhood.

#### **Engagement**

- The survey showed high levels of social interaction, which may be correlated with the strong community ties also reported by survey participants.
- Nearly a quarter of the respondents reported being in a caregiving role (providing help or arranging for help for a family member or friend).
- Older adults are a major volunteer force in Ramsey County. About half of them do volunteer work, for an average of 17 hours per month.
- Eight out of 10 respondents reported that having opportunities for learning and creative expression as *very* or *somewhat important* to them.

#### **Well-being**

- Taking care of their own health is *very important* to 8 out of 10 respondents, and 8 out of 10 rate their health as *good* or *very good*.
- These older adults appear more concerned about their mental well-being than about physical health. Over half of the respondents reported they are concerned about losing their memory and 2 out of 5 have felt depressed or anxious at some time during the past year.
- Of those who experienced depression or anxiety, one out of three sought professional help; this amounts to 12 percent of the entire survey group.
- Three quarters of the survey respondents reported that spirituality is *very important* and an additional 18 percent said it is *somewhat important* to them. This is consistent with the high levels of regular attendance at religious services (74%) and participation in other activities connected to their religious affiliation (43%).
- Lastly, nearly all survey respondents take a positive view of their own quality of life. Their comments illustrate the importance of family ties, friendships, neighborliness, meaningful work, cultural and recreational activities, religious practice, hobbies, and continued learning as things that add meaning and richness to later life.

### Introduction

This report presents findings from a survey of older adults in Ramsey County, which explored topics affecting their quality of life and participation in the community. The survey was designed and conducted collaboratively between the Amherst H. Wilder Foundation and the Ramsey County Department of Community Human Services.

#### Reasons for the survey

The projected growth in the population age 65 and older in the next 30 years has major implications for all age groups as well as for local health, social, economic, and other community institutions. Older adults bring richness of diversity and past life experience to their local communities. However, it is apparent from the 2000 Census data that the number of older adults living in the city of Saint Paul is declining. This downward trend may have significant implications for the Wilder Foundation, the city of Saint Paul, and Ramsey County as a whole. The older adult population in Saint Paul and Ramsey County is changing:

- Their numbers are decreasing in Saint Paul and increasing in surrounding suburban communities.
- They are increasingly ethnically diverse, especially in Saint Paul.
- Income is rising for the majority of older adult households, but a growing number and larger proportion of low-income older adult households are Asian, Black or African American, and Hispanic or Latino.
- In the future, a greater number of older adults may live alone, based on increasing life expectancy and greater numbers of middle-age adults living alone.

These trends are explored in greater detail below.

# The population of older adults is decreasing in Saint Paul and increasing in suburban communities

The population age 65 and older living in Saint Paul decreased by 21 percent during the 1990s. However, the number in Ramsey County was unchanged. This reflects an increasing population of older adults in the county's suburban communities.

The shift in the concentration of the older adult population from Saint Paul to nearby suburbs raises several important questions, including the extent to which a direct migration from the city to the suburbs is occurring, and what the city could do to become a better place for older adults to live.

#### **Changing racial and ethnic composition**

While Saint Paul's population of older adults declined between 1990 and 2000, the number of African American older adults grew by 23 percent, the Asian senior population increased by 93 percent, and the Latino senior population increased by 22 percent. These trends raise important questions about the provision of health and social services, especially regarding cultural appropriateness, accessibility, and affordability.

Results of the main survey are not reported by race and ethnicity, because the number in each racial and ethnic group makes up 2 percent or less of the total survey group.

#### Changing income distribution among older adult households

The number and proportion of low income older adult households has decreased since 1990. (In this study, low income is defined as 125% or less of the Federal poverty guideline for a household of two persons [\$13,825 in 1999]. Because the U.S. Census reports household income in categories rather than specific dollar figures, the numbers presented here include households with income up to \$14,999 in 2000.)

In Saint Paul, the proportion of older adult households with low income declined from 31 percent in 1990 to 28 percent in 2000. Similarly, in Ramsey County the proportion declined from 26 percent in 1990 to 23 percent in 2000. Yet there are growing numbers of Asian, African American, and Latino older adult households with low income. For Asians the number nearly doubled and for African American it grew by 26 percent from 1990 to 2000, which mirrors the increase in the overall older adult Asian and African American population during this period. However, the number of Latino low income households more than doubled while the Latino older adult population grew by only 22 percent.

Looking at older adults' income levels from a different viewpoint, three-quarters of the older adult households in Ramsey County have incomes above our threshold for "low income." Research shows that older adults' purchases of local goods and services can contribute substantially to the local economy through business revenue and job creation (Woods, Miller, Voth, Song, & Jones, 1997). The majority of older adults who are not frail and who have discretionary income tend to look for reasons to remain in their community. This suggests that Ramsey County and Saint Paul should assess the availability of meaningful activities including volunteer and paid work and cultural and educational opportunities that match the interest of older adults who live here.

#### **Living alone**

A significant proportion of older adults live alone. In Ramsey County, 32 percent of older adults 65 and older live alone (Minnesota Department of Human Services, 2000).

By 2030, nearly half of the older adult households are expected to be single-person households resulting in the doubling of the number of older adults living alone (Minnesota Department of Human Services, 1998). Combined with having fewer children or being childless increases the likelihood that baby boomers will live alone as they get older. The expected increase in the number of older adults living alone without family caregivers is likely to exert additional pressure on formal services. This survey allows us to gain insight into the demographic characteristics of older adults most likely to live alone, in terms of gender, age group, race and ethnicity, and income.

#### Successful aging and quality of life

In conducting this community survey, the Wilder Foundation and Ramsey County seek to understand the forces behind the trends suggested by the 2000 Census and to understand and improve the local quality of life and community for older adults. Wilder regards older adults as vital to the community: They are "repositories of wisdom and experience and important assets for society...capable of making economic and social contributions that benefit themselves, their families, and their communities; and in need of purposeful and meaningful roles and activities in life" (Kerschner & Pegues, 1998). Wilder views the quality of life for older adults as a two-way street: as the community supports the quality of life for older adults, older adults contribute to the quality of life in the community.

In designing this survey, Wilder Research Center and the Department of Community Human Services at Ramsey County used a framework for describing quality of life that encompasses basic needs, engagement, and well-being. It is comprehensive and community-centered, and is based on the work of Mather Lifeways in Evanston, Illinois. Both the survey itself and this report of results are built on this framework, whose basic elements are shown in Figure 1 below.

#### 1. A framework for quality of life (Wilder Foundation) **Basic needs Engagement** Well-being **Quality of** Physical well-being Housing Social interaction life Nutrition Meaningful activity Mental well-being Safety Spirituality Learning Access to services Creative expression Life satisfaction Health & personal care Financial security Human support Autonomy & choice

## Sample selection

Wilder Research Center purchased randomly created lists of phone numbers of households with addresses in Ramsey County. Wilder interviewers screened these households by asking if there was a person age 65 or older, and if more than one, who was the last one to have had a birthday. Of the 3,699 names and phone numbers purchased, 674 persons (17%) were eligible to participate in the survey. Of these 674 persons, 499 completed interviews for a response rate of 74 percent with a margin of error of +/- 5 percent. None of the persons interviewed was institutionalized at the time of the interview.

The survey began the week of February 24, 2003, and was completed May 16, 2003. The goal was to complete 450 interviews to represent a population of 59,280 older adults in Ramsey County. Initially, we were able to reach only an answering machine at many households, which is considered "passive refusal." However, many of these households were spending the winter months away from Minnesota. Upon retuning, they contacted Wilder Research Center's survey center. Thus, interviewers were able to complete 501 interviews (later review resulted in the retention of 499 completed, eligible interviews).

The interviews were conducted using Computer Assisted Telephone Interviewing (CATI) software. To ensure the sample represented the older adult population in Ramsey County, the distribution by race and ethnicity, age, gender, and income was assessed after 350 interviews were completed. Determining that the completed cases at that point represented the older adult population, data collection staff continued using the remaining list of potential respondents to draw sample. All the surveys but one were conducted in English; one survey was conducted in Spanish. Each interview took approximately 25 to 30 minutes to complete.

#### Geographic distribution of survey participants

The geographic distribution of the survey sample closely reflects the actual distribution of persons age 65 and older in Ramsey County, according to the U.S. Census 2000. Figure 2 shows the distribution and summarizes the location by city of Saint Paul, inner ring suburbs, and outer ring suburbs.

#### 2. Geographic distribution of Ramsey County survey respondents by city

	Number	Percent of survey sample	Percent of all 65+ adults in Ramsey County
Arden Hills	10	2%	2%
Falcon Heights	1	<1%	<1%
Lauderdale	1	<1%	<1%
Little Canada	16	3%	2%
Maplewood	41	8%	9%
Mounds View	6	1%	2%
New Brighton	27	5%	5%
North Oaks	2	<1%	1%
North Saint Paul	13	3%	2%
Roseville	62	12%	11%
Shoreview	29	6%	4%
Saint Anthony Park	2	<1%	1%
Saint Paul	228	46%	50%
Vadnais Heights	14	3%	2%
White Bear	11	2%	2%
White Bear Lake	35	7%	6%
Subtotal*	498	100%	100%
City not provided	1		
Total	499		
Saint Paul	228	46%	50%
Inner-ring Suburbs **	105	21%	22%
Outer Ring Suburbs	165	33%	28%

<sup>\*</sup>Note. Percentage total does not add to 100 due to rounding.

<sup>\*\*</sup>Note. Inner-ring suburbs include Falcon Heights, Lauderdale, Maplewood, and Roseville.

#### Additional culture-specific survey

To further explore the perspectives of African American, Hmong, and Latino older adults, we conducted a separate survey of three targeted samples of 50 African American, 50 Latino, and 50 Hmong older adults. The questions were translated into Spanish and into Hmong. The sampling method was somewhat different from that used in the main survey of 499 older adults. In the main survey, all eligible persons in Ramsey County had an equal chance of being selected to participate. However, for the African American, Hispanic/Latino, and Hmong special samples, we drew phone numbers from census tracts with higher concentrations of the particular racial or ethnic group we wanted to reach. We further refined the Hispanic/Latino and Hmong sample lists by eliminating surnames that were not Hispanic or Hmong. Because of the different sampling method, the results of these three targeted surveys may not be compared to the general sample or to each other. They simply provide additional perspectives from three groups of older adults in specific racial and ethnic groups. The results from these three groups are found in three separate reports.

## **Demographics of survey participants**

Respondents were asked a series of questions about age, gender, and race and ethnicity, to help assess the comparability of our survey respondents with the general population of older adults in Ramsey County, as reflected in the U.S. Census 2000. Additionally, questions about the language spoken in the home, country of origin, religious preference, income level, education level, and marital status were asked to help with the interpretation of survey results.

### Age and gender

The ages of respondents ranged from 65 to 103 years. The mean (average) age was 76 years and the median age was 75 years, meaning that half were older than 75 and half were younger. Seven respondents did not provide the year in which they were born. Figure 3 shows that the age profile of respondents, grouped into five-year categories, closely resembles the age distribution of the county's older adult population reported in the U.S. Census 2000. About half (49%) of the survey respondents were within the 65 to 74 age group, and similarly, 48 percent of older adults in Ramsey County lie within the 65 to 74 age group. Forty-one percent of the survey participants were in the 75 to 84 age group, whereas, that age group comprises 37 percent of the older adult population in Ramsey County. Eleven percent of the sample identified themselves as being in the 85 and older group, whereas, 15 percent of the older adult population in Ramsey County is age 85 or older.

#### 3. Age distribution of Ramsey County survey respondents

	Number	Percent of survey sample	Percent of all 65+ adults in Ramsey County
65 to 74	239	49%	48%
75 to 84	200	41%	37%
85 and older	53	11%	15%
Subtotal	492	100%	100%
No response	7		
Total	499		

**Note.** Percentage total does not add to 100 due to rounding.

The age of the respondent was calculated based on the year of their birth as if the respondent was born on January 1 of the reported year.

Similar to the U.S. Census 2000 results for Ramsey County, women comprise the majority of the survey sample. As shown in Figure 4, men represent 32 percent of the sample and 38 percent of the older adult population in Ramsey County; females represent 68 percent of the sample and 62 percent of the older adult population in Ramsey County.

#### 4. Gender distribution of Ramsey County respondents

	Number	Percent of survey sample	Percent of all 65+ adults in Ramsey County
Men	162	32%	38%
Women	336	68%	62%
Subtotal	498	100%	100%
Unknown	1		
Total	499		

The men who participated in the survey are slightly younger, on average, than the women. The majority of male survey respondents (55%) are 65 to 74 years old, whereas the age of female respondents is fairly evenly distributed between the range of 65 to 74 years (46%) and 75 to 84 years (42%). Female respondents are also more likely than male respondents to be age 85 or older (13% versus 7%).

#### 5. Age by gender of Ramsey County survey respondents

	Number	Percent of survey sample	Percentage of all 65+ adults in Ramsey County
Male			-
65 to 74	87	55%	55%
75 to 84	60	38%	36%
85 years and older	11	7%	10%
Subtotal	158	100%	100%
Female			
65 to 74	152	46%	44%
75 to 84	140	42%	38%
84 years and older	42	13%	18%
Subtotal*	334	100%	100%
Total	492		

<sup>\*</sup>Note. Percentage totals do not add to 100 due to rounding.

#### Race/ethnicity, language, and country of origin

#### Race or ethnicity

The resulting demographic profile of the survey respondents closely reflects that obtained by the Census: nearly all are White and not of Hispanic origin, with 95 percent of the survey respondents indicating they consider themselves White and 98 percent indicating they are not of Latino origin (2% are Latino). Approximately 2 percent of the respondents (10 persons) indicated that they are African American, approximately 2 percent (8 persons) indicated they were Asian or Pacific Islander, and 2 percent (9 persons) indicated that they were of another racial or ethnic origin. Two percent of those surveyed (10 persons) did not respond to the question. Details are displayed in Figure 6.

#### 6. Racial or ethnic distribution of survey respondents

	Number	Percent of survey sample	Percent of all 65+ adults in Ramsey County
White	462	95%	93%
African American	10	2%	3%
Asian or Pacific Islander	8	2%	3%
Other (including bi-racial)	9	2%	1%
Subtotal	489	100%	100%
Missing or refused to answer	10		
Total	499		

**Note.** Percentage total does not add to 100 due to rounding.

#### Country of origin and language spoken at home

Ninety-seven percent of the survey participants were born in the United States. Of the 3 percent (15 persons) born outside the United States, five persons were born in Laos, two were born in China, and two were born in Ireland. Given that the United States is the country of origin for most respondents, it is not surprising that English is the main language spoken in the home for 98 percent of the respondents. Of the 2 percent (11 persons) who reported that English is not the main language in their home, five persons reported that Hmong is their household language, two persons reported that Chinese is their household language, and two persons reported that their household is bilingual in Spanish and English.

#### Religious preference

Approximately 50 percent of the respondents indicated that their religious preference is one of the Protestant denominations, 42 percent reported they are Roman Catholic, and 6 percent reported they do not have a religious preference. Other religious affiliations included Eastern Orthodox, Jewish, Quaker, Humanist, Shamanist, and Mormon.

#### Household income

The 2002 federal poverty guidelines are displayed in Figure 7; the income levels of survey respondents are shown in Figure 8. About 20 percent of the respondents refused to provide income information, which is not uncommon for surveys of this type. Of those respondents willing to provide income information, 16 percent of one-person households reported incomes below \$10,000, which is slightly below the threshold of 125 percent of the federal poverty guidelines for one-person households. Approximately 8 percent of two-person households have incomes below \$15,000 per year, which is approximately equal to 125 percent of the federal poverty guidelines for two-person households. Over half (57%) of all respondents have household incomes ranging from \$25,000 to over \$50,000 per year. Of particular concern is the \$15,000 to \$24,999 income range, which includes 21 percent of the total number of respondents (27% of all one-person households and 15% of all two-person households). Households with incomes in this range often find it difficult meet their financial needs, but do not qualify for many public assistance programs.

#### 7. Federal poverty guidelines for 2002

Household size	Poverty level	125 percent of poverty level
1 person	\$8,860	\$11,075
2 persons	\$11,940	\$14,925
3 persons	\$15,020	\$18,775
4 persons	\$18,100	\$22,625
For each additional household member	\$3,080	\$3,850

#### 8. Income distribution by household size for Ramsey County respondents

#### Household size

	1 person		2		3 or more		To	otal
	N	Р	N	Р	N	Р	N	Р
Less than \$10,000	30	16%	1	<1%	1	6%	32	8%
\$10,000 to \$14,999	42	23%	14	7%	3	18%	59	15%
\$15,000 to 24,999	50	27%	30	15%	2	12%	82	21%
\$25,000 to \$34,999	18	10%	40	20%	1	6%	59	15%
\$35,000 to \$49,999	18	10%	37	18%	1	6%	56	14%
\$50,000 or more	25	14%	79	39%	9	53%	113	28%
Total	183	100%	201	100%	17	100%	401	100%
Refused to answer							98	
Total, including refusals							499	

**Note**. Percentage totals may not add to 100 due to rounding.

#### **Education**

Twelve percent of the respondents reported they did not complete high school. Generally, however, the respondents have at least a high school diploma or GED. Over half of the respondents (57%) reported they graduated or received their GED and completed *some* college or technical training. Approximately 16 percent of the respondents reported they are college graduates, and 13 percent reported they have a graduate or professional degree.

#### 9. Educational status of Ramsey County respondents

Number	Percent
59	12%
142	29%
137	28%
78	16%
16	3%
62	13%
494	100%
5	
499	
	59 142 137 78 16 62 494 5

**Note**. Percentage total does not add to 100 due to rounding.

The women in this survey have lower levels of academic education, on average, than the men. The proportion that has only a high school diploma or GED differs dramatically, with 18 percent of the men and 34 percent of the women having high school as their highest level of education. Relatively equal proportions of men and women have some college or technical training, a college degree, or some graduate school. However, the proportion of men with a graduate or professional degree is much higher: 23 percent of the men and only 7 percent of the women.

#### 10. Education level by gender for Ramsey County respondents

	Number	Percent
Men		
Less than high school	17	11%
High school diploma or GED certificate	28	18%
Some college or technical training	41	26%
College graduate	29	18%
Some graduate school	7	4%
Graduate or professional degree	37	23%
Subtotal	159	100%
Women		
Less than high school	42	13%
High school diploma or GED certificate	114	34%
Some college or technical training	96	29%
College graduate	49	15%
Some graduate school	9	3%
Graduate or professional degree	25	7%
Subtotal	335	100%
Total	494	

**Note**. Percentage totals may not add to 100 due to rounding.

#### Marital status

Marital status differs substantially by gender. Whereas 17 percent of the men in the survey are widowed, 44 percent of the women are widowed. Similarly, whereas 70 percent of the men currently live with a spouse or partner, only 39 percent of the women do.

#### 11. Marital status by gender for Ramsey County respondents

	Number	Percent
Men		
Living with a spouse or partner	114	70%
Widowed	28	17%
Divorced	11	7%
Separated	0	0%
Never married	8	5%
Subtotal	161	100%
Women		
Living with a spouse or partner	129	39%
Widowed	147	44%
Divorced	37	11%
Separated	2	1%
Never married	19	6%
Subtotal	334	100%
All respondents		
Living with a spouse or partner	243	49%
Widowed	175	35%
Divorced	48	10%
Separated	2	<1%
Never married	27	6%
Total	495	100%

**Note.** Percentage totals may not add to 100 due to rounding.

Examining marital status by age also yields interesting differences, and may raise issues to consider with respect to living alone and the need for supportive services. Nearly two-thirds (63%) of the younger respondents (age 65 to 74) reported living with a spouse or partner. The proportion declines as age increases, with 42 percent of the middle group (age 75 to 84) living with a spouse or partner and 13 percent of the older respondents (age 85 and older) reporting that they live with a spouse or partner. The results of marital status by age group are presented in Figure 12.

#### 12. Marital status by age group for Ramsey County respondents

	Age groups  Middle Younger (75 to 84 (65 to 74 years)  Age groups  (85 years and older)			Total				
	N	Р	N	Р	N	Р	N	Р
Living with spouse or partner	149	63%	84	42%	7	13%	240	49%
Widowed	39	16%	93	47%	42	79%	174	35%
Divorced	34	14%	12	6%	2	4%	48	10%
Separated	1	<1%	1	<1%	0	0%	2	<1%
Never married	15	6%	10	5%	2	4%	27	5%
Total	238	100%	200	100%	53	100%	491	100%

**Note.** Percentages may not add to 100 due to rounding.

In summary, characteristics of the participants in this survey have demographic characteristics comparable to the entire Ramsey County older adult population, as described in the U.S. Census 2000. This allows us to draw inferences from survey findings to the general population of the same age.

## **Survey results**

#### Basic needs

As mentioned earlier in this report, we are examining survey results through the lens of the Wilder Foundation's quality of life framework for older adults. One of the three principal components of this framework is the category of Basic Needs. This component includes several different aspects outlined in Figure 13. The figure also shows the survey questions used to capture and evaluate each aspect of Basic Needs. Some of the survey questions apply to more than one category; where applicable, that has been noted.

## 13. Survey items used to measure the Basic Needs component of the quality of life framework

#### Housing

- Type and location of current housing
- Current living arrangements
- Housing preference
- Reasons for considering relocation

#### Safety

- Neighborhood safety
- People in the neighborhood make it a difficult place to live
- Generally trust neighbors to look out for him/her (Also applies to Human Support)

#### Nutrition

- Receiving home delivered meals
- Assistance with shopping and meal preparation
- Use of congregate dining

#### Health and personal care

- Assistance from a home health aide or a nurse
- Assistance from a nurse because of a recent hospital stay

#### Access to supportive services

- Assistance with housekeeping, heavy cleaning, or chores
- Assistance with transportation
- Assistance with managing household finances
- Identification of service provider (such as a family member or service organization)

# 13. Survey items used to measure the Basic Needs component of the quality of life framework (continued)

#### Financial security

- Concerns about having to pay for long-term care for himself/herself or a loved one (Also applies to Mental Well-Being)
- Concerns about outliving his/her financial resources (Also applies to Mental Well-being)
- Enough money to pay for food, medical services, supplemental medical insurance, and medications

#### **Human support (comfort, trust)**

- Neighbors willing to help each other
- Generally trust neighbors to look out for him/her (Also Safety)
- Presence of family members or friends whom respondent could call upon for help immediately
- Presence of family members or friends whom respondent could rely on for care for a week to indefinitely
- Presence of family to whom respondent feels close
- Someone to count of for understanding and advice

#### Autonomy & choice

- Mode of transportation
- Sense of ability to change things that are important to respondent
- Conditions present that prevent respondent from attending events or activities in neighborhood or elsewhere

#### **Housing**

The respondents were asked a series of questions pertaining to their current place of residence, their previous residence, and reasons for moving if they had moved within the last two years. These questions were asked to develop an understanding of the reasons older adults choose either to remain in their longtime residence or to move. Specifically, respondents were asked about the type of housing they currently live in; whether they rent or own or have some other arrangement; with whom they currently live; the number of years they have lived in their current residence; and if less than two years, they were asked from which city they moved. If they moved from Saint Paul, they were asked from which neighborhood.

#### Housing type and tenure

About two-thirds of the respondents (65%) reported they currently live in single family homes, 14 percent live in an apartment or condominium not specifically limited to older adults, and 11 percent live in an apartment or condominium specifically limited to older adults. The remaining 10 percent live in other housing types, including a townhome (6%), duplex or triplex (3%), or mobile home (less than 1%).

Given the proportion of respondents living in single family homes, duplexes, and townhomes, it is not surprising that 78 percent of the respondents own their home and 19 percent rent their homes. The proportion of these older adults who are homeowners is approximately 10 percentage points higher than that of the general population, according to the U.S. Census 2000. Housing type and tenure of survey respondents is shown in Figure 14.

#### 14. Housing type and tenure for Ramsey County respondents

	Newska	D	U.S. Census
	Number	Percent	2000
Own			
All respondents	388	78%	71%
Single family house	306	79%	-
Duplex or triplex	13	3%	-
Townhome	32	8%	-
Apartment or condo not specifically for older adults	24	6%	-
Apartment or condo specifically for older adults	10	3%	-
Mobile home	3	<1%	-
Subtotal	388	100%	-
Rent			
All respondents	95	19%	29%
Single family house	5	39%	-
Duplex or triplex	2	44%	-
Townhome	0	0%	-
Apartment or condo not specifically for older adults	43	11%	-
Apartment or condo specifically for older adults	45	1%	-
Mobile home	0	6%	-
Subtotal	95	100%	-
Other arrangement	16	3%	-
Total	499		-
-		3%	-

**Note.** Percentage totals may not add to 100 due to rounding.

Respondents were given an opportunity to report that they have "some other housing arrangement" rather than reporting they rent or own. Sixteen respondents indicated they have some other arrangement. Fourteen said they live with family members who own the house; one respondent reported selling the house to his adult children and not paying rent; and one respondent reported living in a cooperative, and thus neither owning nor renting her apartment, but owning a share of the entire property.

#### Living arrangements

Respondents were asked if they currently live with a spouse or partner, their children, family members, friends, alone, or in other arrangement. In total, 59 percent of the respondents indicated they live with other people. Respondents could choose more than one category, which revealed the presence of extended families: 44 percent live with a spouse or partner only; 6 percent live with their children only; 4 percent live with a spouse or partner and with their children; and 2 percent indicated they live with family members other than their spouse or children. Of the remaining 16 respondents, seven live with children and other family members; five live with a spouse or partner, with their children, and with other family members; three live with friends; and one respondent lives with a spouse or partner and with other family members. Details on living arrangements are shown in Figure 15.

#### 15. Living arrangements of Ramsey County survey participants

	Number	Percent
With a spouse or partner	218	44%
Alone	204	41%
With their children	31	6%
With a spouse or partner <b>and</b> children	19	4%
With other family members	10	2%
With children and other family members	7	1%
With spouse and children, and other family members	5	1%
With friends	3	1%
With a spouse or partner and other family members	1	<1%
Subtotal	498	100%
Refused	1	
Total	499	

#### Living alone

Forty-one percent of the respondents indicated that they currently live alone, but two-thirds (67%) have at least one adult child living within 20 minutes of them and 91 percent have at least one adult child living no more then one hour way from them who may be available to provide support. On the other hand, 18 percent of those living alone do not have children. The number of older adults living alone in Ramsey County may become a growing concern if a greater number of older adults have fewer or no children to help with transportation, housekeeping, shopping, or chores and household maintenance for their parents. Older adults living alone in the community without family support, often provided by adult children, may have an impact on formal community-based services, and thus, is one of the trends being monitored by Wilder Foundation.

Looking more closely at survey participants who reported that they live alone (n=203), approximately 8 percent (n=16) are women over the age of 75 with annual incomes of less than \$10,000. Higher age tends to correlate with low income, particularly for women; the proportion of women living alone and in poverty rises with age. Looking at women in the survey who live alone, 12 percent of women who are age 65 to 74 have annual incomes below \$10,000 (n=6); 14 percent of women age 75 to 84 have annual incomes below \$10,000 (n=8); and 40 percent of women age 85 years and older who live alone have annual incomes below \$10,000 (n=8). These older and less affluent female respondents tend to report frequent use of supportive services, which suggests that they may be frail and at risk of institutionalization. These findings are further discussed later in the report under *Access to supportive services*.

#### 16. Demographics of survey participants living alone

		Percent of those who
	Number	live alone
Gender (n=202)		
Men	34	17%
Women	128	63%
Age group (n=200)		
65 to 74	65	33%
75 to 84	96	48%
85 and over	39	20%

## 16. Demographics of survey participants living alone (continued)

	Number	Percent of those who live alone
Annual income (n=160)		
Less than \$10,000	24	15%
\$10,000 to \$14,999	39	24%
\$15,000 to 24, 999	42	26%
\$25,000 to \$34,999	18	11%
\$35,000 or more	37	23%
Number of children (n=203)		
No children	37	18%
1 or 2 children	70	35%
3 or more children	96	47%

## Staying and moving

The decreasing older adult population of Saint Paul, evident in the change from the 1990 to the 2000 U.S. Census, has raised questions about migration patterns to and from the city. When we asked survey participants how long they have lived at their current address, 68 percent indicated that they have lived at their current address for more than 13 years, indicating that these respondents have not moved since the 1990 U.S. Census, and 5 percent had moved within the last two years; the median number of years spent at their current address is 26 years, with the number of years ranging from less than 1 year to 75 years. Of the recent movers, there was no evidence of out-migration from Saint Paul to the suburbs. However, this question does not account for 27 percent of the respondents that moved sometime between 2 and 13 years ago nor does the question capture those residents who moved out of the county, and therefore, are not represented by our sample.

Twenty-three out of 499 respondents (5%) reported they have lived at their current address less than two years. These 23 respondents were asked in what city was their prior residence; 35 percent (8 respondents) reported Saint Paul was their prior residence and 65 percent (15 respondents) reported they previously lived in places other than Saint Paul. All 8 respondents reporting Saint Paul as their previous city of residence continue to reside in Saint Paul. Of the 15 respondents reporting they previously lived elsewhere (other than Saint Paul), five currently live in Saint Paul, which means Saint Paul gained five of the movers.

Additionally, respondents were asked if they are considering moving in the next two years, and if so, whether they would expect to stay in Ramsey County. Sixteen percent (n=78) said they are considering a move. Seventy-two percent (48 respondents) of those considering a move said they would expect to stay in Ramsey County. Of those who said they were considering a move and would expect to stay in Ramsey County, 51 percent reported a preference to own their next home and 49 percent reported a preference to rent. The preferred type of housing varies, as shown in Figure 17, although the largest proportion of respondents (46%) indicated they would prefer an apartment or condominium specifically for older adults. (Respondents could select more than one category.)

# 17. Housing types preferred by respondents considering a move within the next two years (n=48)

	Number	Percent of respondents
Apartment or condo specifically for older adults	22	46%
Single family home	17	35%
Townhome	16	33%
Apartment or condo not specifically for older adults	16	33%
Duplex or triplex	5	10%
Mobile home	0	0%

**Note.** The percentages exceed 100 percent, because respondents were able to indicate more than one type of preferred housing.

#### **Reasons for relocating**

The respondents who are considering a move within the next two years and would likely remain in Ramsey County (48 respondents) were asked why they might consider a move. Of the 75 responses provided, some could be considered "pull" factors (features of other locations that are attractive) whereas other responses indicated certain "push" factors (features of current living arrangements that make it difficult to continue to live there, such as need for renovation or unaffordable costs). "Push" responses were more common than "pull" responses. The most frequent response was "to live in a house or apartment that is easier to care for" with 54 percent of the 48 potential movers choosing that response. The next most frequent responses were "to avoid making repairs and renovations" (36%). The third most frequent response was "to live in a more affordable house or apartment" (29%. One-third of the potential movers (16 people) offered other

reasons for considering a move. The most frequent open-ended response, which was provided by six of the respondents, was to improve accessibility (for example, stairs or steps pose a problem in the current residence). Thus, the most common reasons to consider a move appear to concern maintenance or repair requirements and the accessibility of the current residence.

#### 18. Reasons to consider moving within the next two years (n=48)

	Number of responses	Percentage of total responses
Pull factors		
Closer to children	5	7%
Closer to shopping and other services	5	7%
Closer to church	4	5%
Closer to doctor or hospital	4	5%
Subtotal	18	24%
Push factors		
Easier home maintenance	26	35%
Avoid repairs and renovations	17	23%
More affordable home	14	19%
Subtotal	57	76%
Total	75	100%

**Note.** The percentages may not equal the total or subtotal due to rounding.

In addition to noting the push-pull factors related to potential moves, respondents were asked how important it is for them to stay in their current neighborhood if they do choose to move. The 48 potential movers were fairly evenly divided: 56 percent (27 respondents) said it would be important to stay and 44 percent (21 respondents) said it would not. Those who wanted to stay in their current neighborhood included people currently living in both Saint Paul and surrounding suburbs; a pattern of desiring to leave certain neighborhoods does not emerge from these responses.

Lastly, 35 of the 48 potential movers listed barriers that could make it more difficult for them to move. Affordability was the most frequent barrier, mentioned by 37 percent (13 respondents). The second most frequently reported barrier was "lack of help with moving" with 14 percent (5 respondents) providing this response. Two respondents indicated that their spouse or partner is not ready to move. Other potential barriers to

moving include: not being aware of other options; lack of other options in the neighborhood; don't want to leave until grandkids can be on their own; don't know or haven't decided where to go; difficulty finding an affordable home; finding suitable space (for instance, wood floors because of allergies); and unable to sell current house.

#### Safety

As a fundamental aspect of well-being, "safety" is an underlying dimension of many of the other components in the quality of life framework. For example, the category of "Human Support" includes interpersonal trust and the ability to rely on others. These items speak to the issue the person's overall safety and reduced vulnerability as independent adults. However, in this section of the report, the main focus is on the perceived sense of safety around the home. Results for the survey questions that directly address perceptions of safety are displayed in Figure 19.

19.	Perceptions of	f safety among	older adults	in Ramsey C	ounty
-----	----------------	----------------	--------------	-------------	-------

	Yes		ı	No
	N	%	N	%
Is it safe to walk around your neighborhood at night? (456 responses)	352	77%	104	23%
Is it safe to walk around your neighborhood during the day? (493 responses)	480	97%	13	3%
Do you generally trust your neighbors to look out for you? (478 responses)	433	91%	45	9%
Do people in your neighborhood make it a difficult place to live? (496 responses)	30	6%	466	94%

**Note.** The total number of responses varies due to respondents replying "Don't know" or refusing to answer.

As indicated in Figure 19, the majority of respondents feel safe in their neighborhoods both during the day and at night. About 8 in 10 (77%) said that it is safe to walk in their neighborhood at night, and virtually all (97%) reported that it is safe to walk around during the day. Ninety-one percent said they generally trust the neighbors to look out for them, and only a small percentage (30 respondents) reported that people in the neighborhood make it a difficult place to live.

Perceptions of safety vary between residents of the city of Saint Paul and residents of suburban cities; 35 percent of Saint Paul respondents reported they feel their neighborhood is not safe at night, whereas, 13 percent of residents of suburban cities said their neighborhood is not safe at night. Within the city of Saint Paul, residents of

Highland and Macalester-Groveland neighborhoods feel the safest and residents of Payne-Phalen feel the least safe at night.

Survey results show that older women in Ramsey County feel less safe than older men. Also, respondents in the younger age group, 65 to 74 years, are more likely than older respondents to have less trust in their neighbors and to have the perception that the people in their neighborhood make it a difficult place to live. No clear age pattern emerged in the tendency to feel unsafe outside at night, but it is clear that those who do not feel safe during the day tend to be in the oldest age group, 85 and older.

Of the 23 percent who feel it is not safe to walk around their neighborhood at night, gender is a major factor and, to a lesser degree, so is age. The great majority of those who feel unsafe at night (86%) are women. By age (looking at both men and women), 32 percent are age 65 to 74, 46 percent are 75 to 84, and 22 percent are age 85 or older. (The difference between men and women is statistically significant, as is the difference between the oldest group and the two younger groups.)

Of the 13 respondents reporting that it is not safe to walk around their neighborhood during the day, all are women and about half (6 respondents) are age 85 or older.

Of those who said they do not feel they can trust their neighbors to look out for them, 60 percent (27 respondents) are women and 53 percent are in the 65 to 74 age group. There are no statistically significant differences by gender or by age group regarding trust in one's neighbors.

Of the small portion of respondents (6%, or 30 people) who said that people in their neighborhood make it a difficult place to live, 69 percent are female and 60 percent are in the 65 to 74 age group. The gender difference is statistically significant, but the age difference is not significant.

#### **Nutrition**

The survey explored several aspects of nutrition, such as access to food delivery services, shopping assistance, and meal preparation. The relevant questions included the following:

- In the past month, have you received home delivered meals?
- In the past month, have you received shopping help?
- In the past month, have you received help preparing meals?

■ In the past month, have you received meals served in a dining room at a community center or housing complex?

For each of these nutrition services, respondents were asked to indicate whether they currently receive this support and, if so, from whom. The first set of responses, shown in Figure 20 below, indicates that very few respondents receive meal assistance.

## 20. Older adults in Ramsey County who receive nutrition support services (n=496)

	Number receiving	Percent receiving	Percent not receiving but in need
Home delivered meals	15	3%	2%
Shopping help	49	10%	1%
Meal preparation	28	6%	1%
Congregate dining	42	9%	2%

#### Home delivered meals

Only 3 percent (15 respondents) said they receive home delivered meals; 12 of them receive meals from an organization such as Meals on Wheels, two have friends or family who deliver meals for them, and one receives meals from both an organization and friends or family members. Two percent (10 respondents) indicated they do not receive home delivered meals, but feel they need this service.

#### **Shopping assistance**

Ten percent of the respondents reported they receive shopping assistance, most frequently provided by a family member or friend (78%). One percent (7 respondents) said they do not receive shopping assistance, but feel they need this service.

#### Meal preparation

Six percent of the respondents reported they have help preparing meals, usually from a family member or friend (86%). One percent (6 respondents) of the survey respondents indicated they do not receive assistance with preparing meals, but feel they need this help.

#### Congregate dining

Lastly, 9 percent of the respondents reported they had received meals in a dining room at a community center or housing complex during the last month. As may be expected, 95 percent said this service was provided by an organization. The remaining 5 percent (two respondents) indicated that the congregate meal service was provided by a family member or friend and may not have fully understood the question. Two percent (8 respondents) indicated they do not receive congregate dining service, but feel they need this service.

## Home health and personal care

For the purpose of this study, home health refers to meeting basic health care needs through a home health nurse who provides medication set-up and monitoring, blood pressure checks, glucose screening, and/or foot care; or it may refer to a recent visit by a home health nurse due to a recent hospitalization. Personal care refers to assistance from a home health aide with bathing or dressing. The survey asked about each of these three types of home health care and personal care:

- In the past month, have you received help from a home health aide?
- In the past month, have you received help from a home health nurse with medications, blood pressure checks, glucose screening, or foot care?
- In the past month, have you received nurse visits because of a recent hospitalization?

The results are displayed in Figure 21 below. As with home-delivered meals, very few respondents had received home health care in the past month. Three percent of the respondents reported they had received home health aide visits, 7 percent had received home health nurse services, and 3 percent had received a home health nurse visit due to a recent hospitalization. Most respondents reported they receive health or personal care services through an organization rather than informally from family and friends; this was true for 82 percent of those who received personal care services, 90 percent of those who received home health nurse services, and 94 percent of those who received a home health nurse visit from a nurse. (The three respondents indicating they receive these types of services from family members or friends may be referring to the actual service performed. For example, we asked if they have received help from a home health nurse with their medications and three respondents indicated that service came from family members or friends.)

## 21. Older adults in Ramsey County who receive home health and personal care services (n=495)

	Number receiving		
	support	Percent	
Home health aide	17	3%	
Home health nurse	30	6%	
Home health nurse (following recent hospital stay)	17	3%	

#### **Access to supportive services**

The survey explored access to other supportive services through the following questions:

- In the past month, have you received housekeeping help?
- In the past month, have you received help with heavy cleaning, snow shoveling, or yard work?
- In the past month, have you received help with transportation?
- In the past month, have you received help with managing your bills and balancing your checkbook?
- In the past month, have you received help with filling out health insurance forms, Social Security forms, or Medicare forms?

As displayed in Figure 22, the most frequently used supportive service is heavy cleaning or chore assistance used by 39 percent of the survey participants in the past month. The second and third most frequently used services are transportation and housekeeping services (19% and 18%, respectively). In contrast to home health and meal services, which are provided primarily by organizations, family members or friends provide the majority of heavy cleaning or chore services (58%), housekeeping help (54%), transportation help (60%), assistance with financial management (87%), and assistance with filling out health insurance, Social Security and Medicare forms (78%).

## 22. Supportive services received by older adults in Ramsey County

	Number	Percent	Provided by family or friend	Provided by organization
Heavy cleaning or chore services (n=495)	191	39%	58%	38%
Transportation services (n=496)	95	19%	60%	25%
Housekeeping services (n=496)	87	18%	54%	47%
Managing bills and balancing checkbook (n=495)	32	7%	88%	13%
Completing health insurance, social security, and Medicare forms (n=495)	55	11%	78%	20%

**Note.** When the last two columns do not equal 100 percent, the remaining percentage said the service is provided both by family members or friends and by organizations.

When those not receiving services were asked if they felt they needed that service, two unmet needs emerged: housekeeping services (needed by 8%) and heavy cleaning or chore services (9%). For the remaining supportive services, no more than 2 percent said they needed but were not receiving that service.

#### Who is the "typical" recipient of services?

By examining the survey results on service usage by gender, living arrangement, age group, and annual household income, we developed a demographic profile of a typical user was developed. The services included in this profile are:

- Home delivered meals
- Shopping help
- Meal preparation assistance
- Congregate dining
- Home health aide for personal care
- Nursing care
- Home health nurse visits because of a recent hospital stay
- Housekeeping assistance

- Heavy cleaning, chore help
- Transportation

## ■ Financial management

In general, the typical older adult receiving supportive services from organizations, family, or friends in Ramsey County is female, over age 75, and lives alone. Income levels vary, with no discernible pattern among service users. However, there may be correlations between service type and eligibility requirements for programs targeted to low-income individuals (such as Meals on Wheels, Minnesota Medical Assistance, and Alternative Care programs).

## 23. Profile of typical support service recipient

(n= total number of respondents receiving each service)	Gender	Age group	Income	Living alone or with others
Home delivered meals (n=15)	Female	75+	Less than \$10,000	Alone
Shopping assistance (n=49)	Female	75 to 84	Less than \$25,000	Alone
Help preparing meals (n=28)	Female	75 to 84	All incomes	With others
Housekeeping help (n=87)	Female	75 to 84	\$50,000 and over	Alone
Chore help (n=191)	Female	75 to 84	\$15,000 to \$24,999 and \$50,000 or more	Either alone or with others
Help from home health aide with personal care (n=17)	Female	65+	Less than \$50,000	Either alone or with others
Help from a home health nurse (n=30)	Female	75+	Less than \$25,000	Alone
Visit from home health nurse due to recent hospital stay (n=17)	Female	65+	All incomes	With others
Transportation (n=95)	Female	75 to 84	Less than \$15,000	Alone
Congregate dining (n=42)	Female	75+	Less than \$35,000	Alone
Financial management (n=32)	Female	75+	All incomes	Alone
Completing forms (n=55)	Female	75 to 84	Less than \$10,000 and \$50,000 or more	Alone

**Note:** Groups (i.e., gender, age, income, live alone) were characterized as a "typical service user" if the number of respondents in that group was the highest by a margin of five responses.

#### Information sources about support services

Respondents were asked, "If you needed the kind of support services we just talked about [listed above], who might you ask for information about what services are available?" One-quarter (23%) of the respondents indicated that they would turn to family and friends for information. Another 11 percent said they would turn to government sources, 9 percent (45 respondents) indicated they would turn to their doctor or nurse, and 5 percent (25 respondents) would turn to their church or religious organization for information.

One in five of the respondents (20%) said they didn't know where they would get the information they needed about support services. In these cases, survey interviewers provided the phone number for the Senior Linkage Line referral service.

#### **Financial security**

The survey included seven questions used as indicators of financial security:

- In the past year, have you had enough money to purchase the food you need?
- In the past year, have you had enough money to pay for any medical services you needed?
- In the past year, have you had enough money to pay for supplement medical insurance?
- Does your insurance cover prescription drugs?
- In the past year, have you had enough money for any medications needed?
- Thinking about your life, how worried are you about having to pay for long-term care for yourself or a loved one?
- Thinking about your life, how worried are you about outliving your financial resources?

For the most part, survey participants appear to be relatively economically secure. Almost all said they have had enough money to pay for needed medical services (96%) and prescribed medications (96%) in the past year, and 86 percent had enough money to pay for supplemental insurance. Of those respondents with supplemental insurance, 67 percent have prescription drug coverage.

## 24. Financial security of survey respondents\*

	Yes		No	
	Number	Percent	Number	Percent
In the past year, have you had enough money to purchase the food you need? (496 responses)	479	97%	17	3%
In the past year, have you had enough money to pay for any medical services you needed? (493 responses)	475	96%	18	4%
In the past year, have you had enough money to pay for supplement medical insurance?** (488 responses)	417	86%	25	5%
Does your insurance cover prescription drugs? (445 responses)	299	67%	146	33%
In the past year, have you had enough money for any medications needed? (487 responses)	465	96%	22	5%

\*The total number responding to each question varies due to respondents replying "Don't know" or refusing to answer. Percentages may not equal 100 due to rounding.

\*\*Of the 488 persons responding to this question, 46 persons (9 percent) did not have supplemental insurance.

In addition, survey respondents were each asked about the degree to which they are worried about some specific financial burdens that often create critical "end of life" concerns for seniors. The response categories included: *not at all concerned*, *somewhat concerned*, and *very concerned*. The responses are found in Figure 25. About half of the respondents indicated that they are *not at all concerned* about paying for long term care (45%) or outliving their resources (57%). Equal portions of the remaining respondents were either *somewhat concerned* or *very concerned* about these financial matters. This means that close half of the respondents have financial worries for the future. Moreover, one out of five respondents have substantial concerns about paying for long-term care, and one out of eight have substantial concerns about outliving their financial resources.

#### 25. Concerns about financial resources

Thinking about your life, how worried are	Not at all	concerned	Some	ewhat erned	Very co	ncerned
you about?	Number	Percent	Number	Percent	Number	Percent
having to pay for long-term care for yourself or a loved one?	223	45%	174	35%	98	20%
outliving your financial resources?	282	57%	150	30%	64	13%

#### **Human support (comfort, trust)**

The sense that one can trust others around them and is helped and supported by others is a fundamental human need. The survey asked a series of questions to measure the extent to which this need is being met. Overall, the survey participants indicated high levels of human support. The following questions assessed this basic aspect of the quality of life:

- Do you generally trust your neighbors to look out for you?
- Are people in your neighborhood willing to help each other out?
- Are there friends or family members you could call on to get help right away?
- Do you have someone who could take care of you if were sick or disabled for a short period of time, like a week?
- Do you have someone who could take care of you if were sick or disabled for a longer period of time, like a month?
- Do you have someone who could take care of you if you were sick or disabled indefinitely?
- Do you have family members or friends you feel closest to who live...
  - On your street or in your neighborhood?
  - In Ramsey County?
  - Outside Ramsey County, but in Minnesota?
  - Outside Minnesota?
- Is there someone you feel you can tell just about anything to, someone you can count on for understanding and advice?

Over 90 percent of the respondents reported that they feel they can trust their neighbors to look out for them and that their neighbors are willing to help each other. Almost all (97%) also reported that they have friends or family members they can call for immediate assistance. Nine out of 10 (88%) said they have someone who could take care of them if they became sick or disabled for a short period of time; two-thirds (66%) have someone to take care of them if they were sick or disabled for a month; and a surprisingly high 43% said they have someone in their life who could take care of them indefinitely. Yet inversely, 51 percent of the respondents indicated they do not have someone in their lives that could take care of them indefinitely. This finding underscores the need for continued research and public policy development related to long-term care financing and community-based, in-home service options. Figure 26 presents these findings.

Considering the large proportion who said they have someone to take care of them if they became sick or disabled, it is not surprising that a large proportion have family members or friends who live nearby. Sixty percent have family members or close friends living on their street or in their neighborhood; and 83 percent have family members or close friends living in Ramsey County. Most of these older adults' informal support networks extend into other parts of Minnesota and outside the state: 83 percent have family members or close friends in Minnesota but outside Ramsey County; and 71 percent have family members or close friends outside Minnesota. Figure 26 displays the location of the current place of residence of family members and friends to whom the respondent feels close.

In addition to having family members or friends close by, it is important to have someone in whom one may confide and seek understanding and advice. Nearly all (94%) of the survey participants indicated they have such a person in their lives.

## 26. Perceptions of trust, help, and support among older adults in Ramsey County

	Y	Yes		lo
	Number	Percent	Number	Percent
Trust				
Do you generally trust your neighbors to look out for you? (478 responses	433	91%	45	9%
Help				
Are people in our neighborhood willing to help each other out? (457 responses)	426	93%	31	7%
Are there friends or family members you could call on to get help right away? (497 responses)	481	97%	16	3%
Do you have someone who could take care of you if were sick or disabled for a short period of time, like a week? (489 responses)	429	88%	60	12%
Do you have someone who could take care of you if were sick or disabled for a longer period of time, like a month? (474 responses)	311	66%	163	33%
Do you have someone who could take care of you if were sick or disabled indefinitely?	200	43%	265	57%
(465 responses)	200	43%	265	57%

# 26. Perceptions of trust, help, and support among older adults in Ramsey County (continued)

	Yes		N	lo
	Number	Percent	Number	Percent
Support				
Do you have family members or friends you feel closest to who live on your street or in your neighborhood? (499 responses)	299	60%	200	40%
Do you have family members or friends you feel closest to who live in Ramsey County? (498 responses)	414	83%	84	17%
Do you have family members or friends you feel closest to who live outside Ramsey County, but in Minnesota? (496 responses)	412	83%	84	17%
Do you have family members or friends you feel closest to who live outside Minnesota? (499 responses)	356	71%	143	29%
Is there someone you feel you can tell just about anything to, someone you can count on for understanding and advice? (495 responses)	467	94%	28	6%

**Note.** Percentages may not equal 100 due to rounding.

#### **Autonomy and choice**

The inclusion of these concepts in the quality of life framework is based on the recent work of Rosalie Kane (2001). The survey asked about a few aspects of autonomy and choice:

- Means of transportation
- Are there any things that prevent you from attending events or activities in your neighborhood or elsewhere?
- Do you feel you have the ability to change things in your neighborhood that are important to you?

Four out of five respondents reported they commonly drive their own car, as shown in Figure 27. Other means of transportation are much less commonly used: 26 percent frequently get a ride from someone else and 22 percent frequently walk. Only 9 percent use the public bus system as one of their main means of transportation, similar to the

proportion that use a special transportation service for seniors or people with disabilities. (Respondents could provide more than one answer.)

### 27. Primary means of transportation among Ramsey County older adults (n=496)

What are the means of transportation that you use most frequently?	Number of respondents	Percent of respondents
I drive my own car	405	82%
I get a ride from someone else	131	26%
I walk	107	22%
I use a public bus	44	9%
I use a special transportation service, such as one for seniors or people with disabilities	35	7%
I call a taxi	16	3%
I ride a bicycle	7	1%

**Note:** Percentages exceed 100 percent because respondents could select more than one answer.

As another measure of autonomy and choice, respondents were also asked whether they had any limits in their capacity to attend and participate in activities. As shown below in Figure 28, 39 percent of the respondents reported limits in their ability to attend events or activities in their neighborhoods or elsewhere. This means that 61 percent of the respondents reported no substantial limits on their capacity to attend events or activities in their neighborhoods or elsewhere. For those who did report limitations, the top three reasons for not attending events in their neighborhoods or elsewhere are: health (25%); lack of personal mobility (18%); and lack of transportation (15%).

However, there are subgroups that have notably higher rates of barriers that prevent them from attending events or activities in their neighborhood or elsewhere. The groups that had a majority of members reporting limits on their activities include those age 85 or older (64%) and those in the lowest income category of less than \$10,000 per year (66%).

# 28. Are there any things that prevent you from attending events or activities in your neighborhood or anywhere else?

	Some lir	nitations	No limi	tations
	Number	Percent	Number	Percent
Gender				
Men (162 responses)	46	28%	116	72%
Women (336 responses)	147	44%	189	56%
Living arrangement				
Lives alone (194 responses)	93	48%	101	52%
Lives with others (304 responses)	110	36%	194	64%
Age				
65 to 74 (239 responses)	71	30%	168	70%
75 to 84 (200 responses)	86	43%	114	57%
85 and older (53 responses)	34	64%	19	36%
Household income				
Less than \$10,000 (32 responses)	21	66%	11	34%
\$10,000 to \$14,999 (59 responses)	32	54%	27	46%
\$15,000 to \$24,999 (82 responses)	35	43%	47	57%
\$25,000 and over (228 responses)	59	26%	169	74%
All respondents	194	39%	305	61%

Nearly half of the survey participants (47%) said they feel they have the ability to change things in their neighborhood that are important to them. This is one significant indicator of a strong sense of autonomy and self-efficacy. Forty-three percent said they do not feel they have the ability to change things in their neighborhood, and a substantial 10 percent (50 respondents) said they don't know if they have such ability.

## Engagement

The second cluster of components in the quality of life framework used for this study, called engagement, includes such dimensions as social interaction, meaningful activity, learning and creative expression, and community connections. The principal survey questions for each of these components are outlined below in Figure 29.

## 29. Survey items used to measure the Engagement component of the quality of life framework

#### **Social interaction**

- Having close relationships with family and friends
- Frequency of contact with a family member or friend to whom respondent feels close
- Presence of and proximity to adult children
- Concern about being alone

## Meaningful activity

- Concern about not having enough opportunities to do something useful
- Participation in community activities, ranging from religious services to civic groups and local government meetings to visiting restaurants, movie theaters, or local stores
- Employment status
- Community volunteer work
- Caregiving

#### **Community connection**

- Importance of being involved in the community
- Likelihood of meeting friends and acquaintances when shopping
- Neighborhood "feels like home"
- Feeling connected to people in neighborhood
- Having a pleasant place to go outdoors in neighborhood

#### Learning and creative expression

Importance of having new learning experiences

#### **Social interaction**

The level of human support and comfort an older adult may feel is likely to correspond to the degree of social interaction they experience on a daily, weekly or monthly basis. To determine the extent to which the survey participants regularly meet with, interact with, or engage in meaningful contact with a family member or friend they feel close to, the survey included these questions:

■ For you personally, how important is having close relationships with your family and friends?

- How often do you have contact with a family member or a friend you feel close to through ...
  - a personal visit?
  - a telephone call?
  - letters?
  - email?
- How many living children do you have? How far away is your nearest child?
- How concerned are you about being alone?

As shown in Figure 30, (86%) indicated that having a close relationship with family and friends was *very important* to them. Additionally, another 12 percent (61 people) indicated that these relationships were at least *somewhat important* to them.

#### 30. Importance of social contacts with family and friends

For you personally, how	Very important		Somewhat important		Not at all important	
important is?	N	%	N	%	N	%
Close relationships with family and						
friends	425	86%	61	12%	9	2%

Given the high value that survey participants place on close relationships with family and friends, it is important to note the degree to which they actually have contact with people who are important to them. Survey questions about the frequency of contacts included several kinds of direct or indirect contact. The response categories for these questions included: *at least once a week, at least once a month, at least once every few months, at least once a year*, or *not at all*. The responses are displayed in Figure 31.

### 31. Contacts with a family member or a friend to whom respondent feels close

How often do you have contact with a family		At least once a week		At least once a month At least once every few months			an once a not at all	
member or a friend you feel close to through	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Personal visits (495 responses)	405	82%	66	13%	18	4%	6	1%
Telephone calls (496 responses)	467	94%	20	4%	8	2%	1	<1%
Letters or cards (496 responses)	52	11%	173	35%	163	33%	108	22%
Email (497 responses)	131	26%	29	6%	8	2%	329	66%

**Notes.** The total number responding to each question varies due to respondents replying "Don't know." Percentages may not equal 100 due to rounding errors.

The most prevalent form of contact with close family members and friends is weekly phone calls (94%). This is followed by a fairly high degree of personal contact through weekly visits (82%). Email correspondence appears to occur either frequently or not at all: for one-quarter of the respondents it is weekly (26%); however, two-thirds of the respondents (66%) do not exchange any email with family or friends. Contact by mail tends to occur monthly (35%) or every few months (33%), although 22 percent indicated that they do not receive cards or letters from close family or friends. It is likely that telephone and personal contacts are greatly facilitated by the relative proximity of the family members of most of the respondents. As discussed in the section on Human Support, the majority of respondents have family members or friends they feel close to who live on their street or in their neighborhood (60%), in Ramsey County (83%), and elsewhere in Minnesota (83%).

Many of respondents have their adult children living nearby. Approximately 83 percent of all respondents said they have two or more children, 7 percent have one child, and 10 percent have no children. Of those with at least one child (90% of the respondents), 71 percent said the nearest child lives less than 20 minutes away and 20 percent reported the nearest child is 20 to 60 minutes away.

Lastly, respondents were asked how concerned they are about being alone. The response categories were: *not at all concerned, somewhat concerned,* and *very concerned.*Seventy-two percent of the respondents reported they are *not at all concerned* about being alone, followed by 21 percent reporting they are *somewhat concerned.* Only 7 percent said they are *very concerned.* The large proportion of respondents "not at all concerned" about being alone seems to reflect the strong social network of family members and friends identified in questions discussed previously.

#### **Meaningful activity**

Just as the opportunity to have contact with close family and friends is an important aspect of engagement, so is the opportunity to join with others in meaningful activities. In some cases these activities may be transitory or for entertainment, but in other cases the interaction may result in the accomplishment of tangible goals or in benefits for others. Both types of activities have important roles in the quality of life older adults.

Survey respondents were asked about their opportunities to do "something useful." Follow-up questions asked about the kinds of activities in which they participate, their employment status, and their volunteer work in the community. Finally, respondents were asked if they provide care for someone; and if they do help someone regularly, a series of questions addressed their caregiving roles.

Questions used to measure meaningful activity include:

## Opportunities for meaningful activity

■ How concerned are you about not having enough opportunities to do something useful?

## Participation in community activities

- In the past month, have you ...
  - Participated in religious services or other activities or events associated with your religious affiliation?
  - Participated in community social groups such as a city seniors club, or community center or senior center groups?
  - Participated in civic group meetings or activities such as Veteran of Foreign Wars (VFW), Lion's Club, or Kiwanis?
  - Participated in community events such as library events, school events, or block group events?
  - Attended in planning district or city council meetings?
  - Eaten out at a restaurant?
  - Gone shopping?
  - Gone to a movie theater?
  - Attended a play, symphony, or other live entertainment
  - Visited a public library?

#### **Employment status and community work**

- Are you currently retired, employed, or other? If you continue to work, why?
- Do you help out in the community (that is, do volunteer work)? If so, what do you do, and on average, how many hours per month do you spend doing this work? If not, what prevents you from doing community work?

#### Caregiving role

- Do you provide or arrange help for a relative or a friend because of an illness or disability he or she has? If so, how many people do you do that for?
- Regarding the person you provide the most care for, what is that person's relationship to you?

- For this person, do you help or arrange help with food preparation, shopping, bathing, toileting, dressing and grooming, nursing care, light chores, heavy chores, finances, or transportation? (each item asked separately)
- On average, how many hours per week do you spend providing care for this person?
- Do you sometimes get relief or time off from this responsibility?
- Do you feel that you have enough time off from your caregiving responsibilities to do other things you want to do?
- Would you like to receive additional support to help you in your caregiving role? If so, what kind of help do you feel you need to support you in your caregiving role?
- Do you care for grandchildren? If so, how many and how often do you care for them?

## Opportunities for meaningful activity

Survey results suggest that a large proportion of older adults in Ramsey County feel they have ample opportunities to do something useful. Seventy percent said that they are *not* at all concerned about not having enough opportunities to do something useful, 21 percent are *somewhat concerned*, and 7 percent are *very concerned* about not having enough opportunities to do something useful.

#### Participation in community activities

Two out of three respondents reported that they do not get involved with many community activities. Survey respondents were also asked a series of questions concerning specific types of community activities and how recently they have participated in these events. Upon closer examination, as shown in Figure 32, the majority of survey respondents appear to be engaging in some community activities. The most common activities were eating out at a restaurant, shopping, and attending religious services. Furthermore, during the last month, nearly half of the respondents had attended activities associated with their religious affiliation or visited a public library, and about one out of three respondents had attended at least one of the following: a community social group; a community event; a movie theater; or a play, symphony or other live entertainment.

Other community activities reported by at least 5 percent of respondents included:

■ Sports, which included playing sports (golf, bowling) and attending games

- Exercise such as biking, walking, swimming, attending YMCA/YWCA classes and gym
- Volunteer work, which included working for Habitat for Humanity, helping with blood pressure check clinics and doing volunteer work at casinos
- Card group that plays Bridge or Bingo
- Travel
- Visiting casinos

## 32. Engaging in community activities

In the past month have you attended	During the last month		7	d but not last month	Not something you usually do		
or participated in (499 responses)	Number	Percent	Number	Percent	Number	Percent	
Religious services	376	74%	35	7%	88	18%	
Other activities or events associated with your religious affiliation	214	43%	106	21%	179	36%	
Community social groups (a city seniors club, community center or senior center groups)	147	30%	76	15%	276	55%	
Civic group meetings Veterans' of Foreign Wars (VFW), Lion's Club, Kiwanis Club)	74	15%	62	13%	361	73%	
Community events (library events, school events, block group events)	150	30%	109	22%	239	48%	
Planning district or city council meetings	37	7%	66	13%	396	79%	
Eaten out at a restaurant	443	89%	33	7%	23	5%	
Gone shopping	460	92%	14	3%	25	5%	
Gone to a movie theater	160	32%	103	21%	235	47%	
Attended a play, symphony, or other live entertainment event	166	33%	168	34%	164	33%	
Visited a public library	224	45%	103	21%	172	35%	
Other community activities (volunteered by respondent; 165 of 499 respondents (33%) offered other activities)	147	30%	18	4%	-	-	

Note. Percentages may not equal 100 due to rounding

#### **Employment status and community work**

Most respondents reported that they are retired and not working. Figure 33 displays the way survey respondents identified their current employment situation. As shown below, more than four out of five respondents (84%) indicated that they are currently *retired and not working*. On the other hand, a small proportion of respondents (47 persons or 9%) indicated that they are currently *retired, but working*, and a small proportion (29 persons or 6%) reported they are *not retired and working*. Three respondents identified themselves as homemakers or housewives, and one respondent reported having never worked.

#### 33. Current description of employment status

	Number	Percentage
Retired and not working	419	84%
Retired, but working	47	9%
Not retired and working	29	6%
Other (Homemaker/housewife (n=3); Never worked (n=1))	4	1%
Total	499	100%*

Among those who are currently working, 26 of 76 respondents said they continue to work for financial reasons; 30 of 76 respondents said they continue to work because they like to work, and 20 respondents provided other reasons for continuing to work, such as socializing, meeting people, keeping busy, and to keep their mind "active and fresh."

Older adults often use their retirement period as an opportunity to engage in community volunteer activities. Roughly half of the respondents (47%) reported that they *help out in the community* and 53 percent said they do not. Respondents who said they help out in the community (235 persons) were asked what type of community work they do. Fifty percent (117 persons) of those respondents who do volunteer work said they help with church-related activities. Additionally, 10 percent (24 persons) of these respondents volunteer for charities (help with fundraisers, for example), 9 percent (22 persons) deliver Meals on Wheels, 7 percent (16 persons) reported they volunteer at a hospital, hospice, or nursing home, and 6 percent (15 persons) said they help neighbors, family and friends. On average, respondents spend 17 hours per month doing volunteer community work, ranging from one hour to 125 hours per month. The median number of hours respondents spend doing volunteer work is 10 hours per month (meaning that half do more than 10 hours and half do less).

Of those not engaged in community work, 34 percent (89 persons) reported they are physically unable to do so, 22 percent (57 persons) said they are *just not interested*, 12

percent (32 persons) reported they do not have time or they are too busy, 5 percent (13 persons) reported they are still employed, and 5 percent (13 persons) said they are busy taking care of a family member.

#### Caregiving role

Providing care for an ill or disabled family member has become a responsibility for many middle-age (roughly 35 to 64 years) and older (65 and older) adults. To gauge the extent of caregiving as a concern for older adults, survey respondents were asked if they *provide help or arrange help for a relative or a friend because of an illness or disability*. Approximately one in four (23%, or 114 persons) reported they either provide help or arrange for help for a family member of a friend. Of these 114 caregivers, a majority are female aged 65 to 74 years, and not low income (defined as having annual income of \$15,000 or greater). Figure 34 displays the caregiver profile. These 114 persons were then asked a series of questions related to their caregiving activities.

Of the 114 respondents who said they provide help or arrange help for someone, 70 percent reported they do this for one person and 20 percent said they do this for two persons. Eleven respondents reported they provide help or arrange for help for three or more persons. Subsequently, respondents were asked a series of questions concerning the one person for whom they provide the most care.

Interestingly, over 50 percent of the respondents who are providing or arranging care for another person are doing so for an extended family member (someone other than their child, spouse, parent, or in-law) or for an unrelated friend, as shown in Figure 34. Twenty-one percent of the respondents with a caregiving role reported they provide or arrange help for a spouse or partner, and 18 percent provide or arrange help for parents or parents-in-law. Nine percent of the respondents reporting a caregiver role indicated they provide or arrange for help for their own child (adult or minor).

#### 34. Characteristics of caregiving survey respondents

	Number	Percent
Gender (114 responses)		
Male	40	35%
Female	74	65%
Age (112 responses)		
65 to 74	70	63%
75 to 84	35	31%
85+	7	6%

## 34. Characteristics of caregiving survey respondents (continued)

	Number	Percent
Income (94 responses)		
Low income (less than \$15,000 per year)	17	18%
Not low income	77	82%
Relationship of care recipient (114 responses)		
Child	10	9%
Spouse or partner	24	21%
Parents or Parents-in-law	21	18%
Another relative	29	25%
Non-relative friend	30	26%

**Note.** The total number responding to each question varies due to respondents replying "Don't know" or refusing to answer. Percentages may not equal 100 due to rounding.

Those with caregiving responsibilities were asked about the types of help they provide directly or for which they make arrangements. As shown in Figure 35, a large number of the caregivers provide shopping, transportation, food preparation, do light chores, or take care of finances for the care recipient. The top two tasks are shopping and transportation, and 64 percent of the caregivers who help with these tasks spend four or hours or less per week providing care. Forty-four percent (50 respondents) provide five or more hours of care, helping primarily with food preparation, shopping, light chores, finances, and transportation. Fifteen percent (17 respondents) provide bathing, toileting, and dressing assistance and spend, on average, 39 hours per week on caregiving.

## 35. Caregiving activities of survey respondents

For the person you do the most caregiving for, do you help with or arrange for help with... (113 responses)

or arrange for help with (113 responses)	Number	Percent
Shopping	85	75%
Transportation	85	75%
Food preparation	56	50%
Light chores, such as doing dishes, straightening up, bed making, or light cleaning	56	50%
Taking care of their finances	50	44%
Heavy chores, such as scrubbing floors, mowing grass, shoveling snow, or washing windows	34	30%
Bathing	24	21%
Nursing care, such as changing dressings or giving medicine	23	20%
Dressing and grooming	22	20%
Toileting	21	19%
Emotional support and companionship	13	12%

When asked if they sometimes get relief or time off from their caregiving responsibility, 66 percent of survey respondents with caregiver responsibilities reported they do get time off. Nine out of 10 (92%) indicated that they have enough time off from caregiving responsibilities to do other things they want to do, and 12 percent (13 respondents) said they would like additional support to help them in their caregiving role.

Of the 13 caregivers who expressed a need for additional support, 12 identified the kind of help they feel they need most. The largest need appears to be related to respite. Here are all 12 responses:

## Respite

Someone who could take of [care recipient] so I could go on a trip.

Some additional support, a break, it's a full time job taking care of stroke survivor

Someone to come in once in a while and give me a break.

Family.

#### Financial

Financial - [care recipient] lives in California - more financial help to supply for more needs

Financial help.

The only kind of help [I] would [need is] monetary.

#### Coordination of care

The biggest help was to ensure that caregivers are available when [care recipient] needed them; it took me a while to get that set up.

#### General support

Support in care giving.

Catholic Charities and Lutheran Services have been helping out.

No specific help needed at the present time (These two respondents had reported they need additional support in their caregiving role in previous question.)

Don't need [help] right now.

It's not that hard.

Finally, caregivers were asked if they care for one or more grandchildren. One out of four (27%, or 138 respondents) reported they care for a grandchild or for grandchildren. Fifty percent of those who care for grandchildren reported they care for two or more. On average, these grandparents care for three grandchildren. However, most (81%) do so only occasionally for a few hours. Approximately 11 percent of the grandparents who care for grandchildren do so daily for a few hours or for most of the day (for example, providing child care for working parents). Eight percent of the respondents caring for grandchildren reported their grandchild or grandchildren live(s) them.

## **Community connection**

The notion of community connection was explored through survey questions about the importance of being involved in one's community, a sense that the neighborhood "feels like home," a feeling of "connectedness" to people in the neighborhood, and the likelihood of meeting friends and acquaintances when out shopping. Also, we included a question about the importance of having a pleasant place to go outdoors, because outdoor space is important to the identity of a place, such as a neighborhood, and being outdoors can help tie people to their community.

## Importance of community involvement

Survey results reflect mixed levels of the value placed on community involvement. Three out of four (75%) of the respondents reported that it is *somewhat* or *very important* to be involved in their community (51% *somewhat important*; 24% *very important*), whereas 25 percent reported that being involved in their community is *not at all* important, as shown in Figure 35. The relative importance of being involved in one's community varied little by gender in the survey: 23 percent of the men and 26 percent of the women reported that being involved in the community is *not at all important*, while 78 percent of the men and 74 percent of the women said it is at least *somewhat important*. (Percentages may not add to 100% due to rounding.)

There is a balanced distribution of survey respondents in terms of the relative importance they tend to attach to involvement in their community. As shown in Figure 36, there are roughly equal groups of approximately 25 percent each who either believes that community involvement is *very important* or *not important at all*. The remaining 50

percent of the respondents are clustered in the middle, or *somewhat important* category. Further analyses suggest that this distribution (25-50-25) is relatively common among subgroups of respondents, with some notable exceptions in the age, household income, and education attainment level subgroups.

#### Differences by age group

Respondents in the 85 and older age category differ from the 25-50-25 pattern; a higher percent do not feel that community involvement is important. Twenty-six percent of the oldest respondents reported community involvement is *very important*, but 38 percent reported community involvement is *somewhat important* and 36 percent of the respondents age 85 years and older reported that community involvement is *not important at all*.

#### Differences by income

Similarly, the respondents with income less than \$10,000 per year have a different pattern of responses than most other groups. Sixteen percent said community involvement is *very important*, 50 percent reported it is *somewhat important*, and 34 percent reported it s *not important at all*. In contrast, more of those with income of \$25,000 or more reported that community involvement is important. Twenty-five percent of the respondents earning \$25,000 or more per year said community involvement is *very important*, 57 percent reported it is *somewhat important*, and 19 percent reported it is *not important at all*.

#### Differences by education level

The 25-50-25 pattern of the relative importance of community involvement did not hold true within the education attainment categories of *less than high school degree*, *high school degree or GED*, and graduate or professional degree. Of those with less than high school degree, 30 percent said community involvement is *very important*, 40 percent reported it is *somewhat important*, and 40 percent reported it s *not important at all*. Of those with only a high school diploma or GED, 15 percent said community involvement is *very important*, 54 percent reported it is *somewhat important*, and 31 percent reported it s *not important at all*. Inversely, 31 percent of those with some graduate school reported that involvement is *very important*, 50 percent reported it is *somewhat important*, and 19 percent reported it is *not important at all*. Lastly, 34 percent of the respondents with a graduate or professional degree reported that community involvement is *very important*, 48 percent reported it is *somewhat important*, and 18 percent reported it is *not important at all*.

## 36. For you personally, how important is being involved in your community?

	Very important			ewhat ortant	Not at all important		
	Number	Percent	Number	Percent	Number	Percent	
All respondents (494 responses)	118	24%	251	51%	125	25%	
Gender							
Men (161 responses)	41	26%	83	52%	37	23%	
Women (332 responses)	77	23%	168	51%	87	26%	
Age group							
65 to 74 (235 responses)	59	25%	128	55%	48	20%	
75 to 84 (200 responses)	43	22%	101	51%	56	28%	
85 and over (53 responses)	14	26%	20	38%	19	36%	
Household income							
Less than \$10,000 (32 responses)	5	16%	16	50%	11	34%	
\$10,000 to \$14,999 (59 responses)	13	22%	29	49%	17	29%	
\$15,000 to \$24,999 (82 responses)	18	22%	36	44%	28	34%	
\$25,000 and over (226 responses)	56	25%	128	57%	42	19%	
Education attainment level							
Less than high school (57 responses)	17	30%	23	40%	17	30%	
High school or GED (14 responses)	21	15%	76	54%	43	31%	
Some college or technical training (137 responses)	31	23%	74	54%	32	23%	
College graduate (78 responses)	22	28%	39	50%	17	22%	
Some graduate school (16 responses)	5	31%	8	50%	3	19%	
Graduate or professional degree (62 responses)	21	34%	30	48%	11	18%	

## **Neighborhood ties**

Respondents were asked if their neighborhood "feels like home" and whether they feel connected to the people in their neighborhood. Almost all (97%) said their neighborhood "feels like home" and 81 percent reported they feel connected to the people in their neighborhood. Lastly, 91 percent of the respondents strongly affirmed that "having a pleasant place to go outdoors" in their neighborhood is important to them.

## Friends and acquaintances

The likelihood of meeting friends and acquaintances when out shopping was included in the survey as one measure of community connectedness. Approximately 63 percent of the respondents reported that they are likely to meet friends and acquaintances when out shopping. This finding suggests that for many respondents, their friends and acquaintances and their daily activity are at least partly based in their own neighborhoods.

#### **Learning and creative expression**

Opportunities for lifelong learning and outlets for creative expression are considered important examples of meaningful activity that can affect the quality of life for older adults. It should be noted that further definition is planned for the development of the *Learning and Creative Expression* components of the quality of life framework. At this time, only one question pertaining to these components was included in the survey of older adults in Ramsey County: *For you personally, how important is having a new learning experience?* Nearly 80 percent reported that new learning experiences are important to them (38% *somewhat important*; 41% *very important*); whereas 21 percent reported that learning experiences are *not at all important* to them. Detailed results are found in Figure 36.

Further analysis showed notable differences on the question by age group, household income, and education level, as shown in Figure 37. Younger respondents, the least affluent and most affluent respondents, and the most highly educated respondents all tended to place a higher value on having new learning experiences. Younger respondents (age 65 to 74 years) tended to place a higher value on having new learning experiences: 48 percent of these respondents in the 65 to 74 years age group compared with 35 percent of the two older age groups reported that having new learning experiences is *very important*. Interestingly, over 80 percent of the respondents with household incomes of less than \$10,000 per year (82%) and those with incomes greater than \$25,000 per year (88%) feel it is at least *somewhat important* have new learning opportunities. Lastly, as might be expected, the value of having new learning experience increases with education attainment: 25 percent of the respondents with less than a high school reported that having new learning experiences is *very important* as compared to 69 percent of respondents with a graduate or professional degree who reported that having new learning experiences is *very important*.

## 37. Importance of having new learning experiences

	Very important		Somewhat important		Not at all important		Total	
	N	%	N	%	N	%	N	%
All respondents	204	41%	188	38%	101	21%	493	100%
Gender								
Males	69	43%	55	34%	36	23%	160	100%
Females	135	41%	133	40%	64	19%	332	100%
Age group								
Age 65 to 74	115	48%	94	40%	29	12%	238	100%
Age 75 to 84	69	35%	77	39%	51	26%	197	100%
Age 85 and over	18	35%	15	29%	19	37%	52	100%
Household income level								
Less than \$10,000	13	41%	13	41%	6	19%	32	100%
\$10,000 to \$14,999	17	29%	22	38%	19	33%	58	100%
\$15,000 to \$24,999	26	32%	30	37%	26	32%	82	100%
\$25,000 and over	110	48%	91	40%	26	11%	227	100%
Education attainment level								
Less than high school degree	15	25%	21	36%	23	39%	59	100%
High school degree or GED	37	26%	60	43%	43	31%	140	100%
Some college or technical training	60	44%	57	42%	18	13%	135	100%
College graduate	39	50%	26	33%	13	17%	78	100%
Some graduate school	10	63%	5	31%	1	6%	16	100%
Graduate or professional degree	42	69%	17	28%	2	3%	61	100%

## Well-being

The third and final component of the quality of life framework is *Well-being*; it includes four aspects. These four aspects and the specific questions used to explore them are displayed in Figure 38.

## 38. Survey items used to measure the Well-being component of the quality of life framework

#### Physical well-being

- Self-assessed rating of overall health
- Importance of taking care of one's own your health

#### Mental well-being

- Presence of feeling depressed or anxious and receipt of mental health services
- Respondent's concerns about losing his or her memory
- Respondent's concerns about suffering from pain
- Respondent's concerns about suffering from poor health

## **Spirituality**

Importance of having a rich spiritual life

#### Life satisfaction

- Overall satisfaction with life
- Meaning in daily life and barriers that may prevent respondent from doing those things that are most meaningful to him/her
- Perception of oneself as young, middle-age, old, or very old

## **Physical well-being**

The Survey of Older Adults in Ramsey County did not include a comprehensive assessment of the respondent's health status; instead the respondents were asked two general questions about their health and two questions about concerns they may have related to their health. These questions included:

- In general, how would you rate your overall health? Would you say it is, ...
- For you personally, how important is taking care of your health?

- Thinking about your life, how concerned are you about suffering from pain?
- Thinking about your life, how concerned are you about suffering from poor health?

Respondents were asked to rate their overall health as being *very good*, *good*, *fair*, or *poor*. In response, 78 percent of the respondents rated their health as *good* or *very good* (*Very good*=33%; *good*=46%), as shown in Figure 39. An additional 19 percent reported the general health as *fair* with the remaining three percent reporting their general health status as *poor*.

### 39. Respondents' self-assessed general health status

	Number			
Very good	162	33%		
Good	227	46%		
Fair	93	19%		
Poor	15	3%		
Total	497	100%		

**Note.** Percentage may not add to 100 percent due to rounding errors.

Further analyses, as shown in Figure 40, were conducted to determine if there were any differences among the various groups of respondents. It is interesting to note that females were more likely than male respondents to rate their overall health as *very good*. The relative percentages are 36 percent of the female respondents versus 26 percent of the male respondents. With respect to age, there do not appear to be any substantial differences between the age groups, except that the 85 and older age group is more likely to rate their health as *fair* compared to the other two younger age groups.

#### 40. How would you rate your overall health?

	Very good		Good		Fair		Poor		Total	
	N	%	N	%	N	%	N	%	N	%
All respondents	162	33%	227	46%	93	19%	15	3%	497	100%
Gender										
Males	41	26%	80	50%	33	21%	7	4%	161	100%
Females	121	36%	147	44%	59	18%	8	2%	335	100%
Age group										
Age 65 to 74	81	34%	107	45%	39	17%	10	4%	237	100%
Age 75 to 84	66	33%	92	46%	39	20%	3	2%	200	100%
Age 85 and older	13	25%	25	47%	13	25%	2	4%	53	100%

Figure 41 displays the findings for the general question pertaining to the importance of taking care of one's own health. Five out of six respondents (83%) indicated that taking care of their health is *very important*, 14 percent responded that taking care of their health was *somewhat important*, and 12 respondents indicated that they thought caring for one's own health was *not important at all*.

## 41. Importance of taking care of your health

	Very important		Somewhat important		Not at all important		Total	
	N	%	N	%	N	%	N	%
For you personally, how important is taking care of your health?	413	83%	71	14%	12	2%	496	100%

Additionally, respondents were asked if they are concerned about suffering from poor health and suffering from pain. Approximately 50 percent of the respondents indicated they are *somewhat concerned* about suffering from poor health and 9 percent reported they are *very concerned* about suffering from poor health. Slightly fewer respondents were concerned about suffering from pain. Approximately 39 percent of the respondents reported they are *somewhat concerned* about suffering from pain and 9 percent reported they are *very concerned* about suffering from pain. For the most part, the respondents reporting they are *very concerned* about suffering from poor health are also *very concerned* about suffering from pain. Results are presented in Figure 42.

#### 42. Concerns about suffering from poor health or from pain

	Very concerned		Somewhat concerned		Not at all concerned		Total	
	N	%	N	%	N	%	N	%
How concerned are you about suffering from poor health?	44	9%	250	50%	204	41%	496	100%
How concerned are you about suffering from pain?	46	9%	191	39%	258	52%	495	100%

#### **Mental well-being**

Recent literature identifying depression as a critical health and aging issue prompted the development of a series of questions pertaining to the respondent's emotional outlook and overall mental well-being. Yet, it is important to note that the survey items included here were tied to specific service needs and do not represent a mental health assessment tool for the purposes of diagnosis or treatment. Instead, respondents were asked, in general, to comment on areas that might be a source of concern regarding their cognitive ability and mental health. The questions included:

- Thinking about your life, how concerned are you about losing your memory?
- In the past year, was there a time when you felt depressed or anxious? If yes, did you obtain help or counseling? If not, what was the main reason you did not obtain help or counseling?

About 47 percent of the respondents reported they are *not at all concerned* about losing their memory, but 53 percent of the respondents reported being *somewhat concerned* or *very concerned* about losing their memory (somewhat concerned=34%; very concerned=19%).

Additionally, respondents were asked about being anxious or feeling depressed. Survey findings show that a substantial portion of older adults interviewed have felt depressed or anxious: 41 percent of the respondents (204 respondents) reported there was time when they felt depressed or anxious. Of these 204 respondents, 30 percent obtained help or counseling. The remaining 70 percent of the respondents, who did not obtain help or counseling, were asked about their main reason for not seeking help. Seventy-two percent (102 respondents) who didn't seek help replied said they didn't obtain help, because they decided they didn't need it. The second most common reason for not seeking help was "I coped/I tried to help myself" with 6 percent (9 respondents) who

didn't seek help providing this reason. Four percent (6 respondents) said they talked to family or friends instead of seeking professional help.

#### 43. Feeling anxious or depressed: seeking help or counseling

	Yes		No		To	otal
	N	%	N	%	N	%
In the past year, was there a time when you felt depressed or anxious?	204	41%	293	59%	497	100%
Did you obtain help or counseling?	62	30%	142	70%	204	100%
What was the main reason you did not obtain help? Respondent decided s/he didn't need it.	102	72%	-	-	142	100%
What was the main reason you did not obtain help? Respondent coped/helped himself/herself.	9	6%	-		142	100%
What was the main reason you did not obtain help? Respondent talked to family/friends instead.	6	4%	-		142	100%

### **Spirituality**

For many, the notion of leading a "rich and full life" would be incomplete without the inclusion of the spiritual side of human existence. In considering this aspect of well-being, a question was asked about the importance spirituality in the daily lives of the survey respondents. The specific question asked was:

■ For you personally, how important is having a rich spiritual life?

The results are found in Figure 44. As shown below, over three-quarters (76%) of the respondents find having a rich spiritual life to be *very important*. Of the remaining group, 18 percent find it to be *somewhat important* and only 6 percent indicated that spirituality was *not at all important* to them.

### 44. The importance of having a rich spiritual life

	Very important		Somewhat important		Not at all important		Total	
	N	%	N	%	N	%	N	%
For you personally, how important is having a rich spiritual life?	375	76%	89	18%	30	6%	494	100%

Further analyses were conducted to determine if there were any subgroups that displayed any notable differences in terms of the importance placed on having a rich spiritual life. These differences, broken down by subgroups, are provided in Figure 45. As shown in the table, there is a slight difference on the basis of gender, i.e., there is a higher percentage of female respondents who indicated that having a rich spiritual life was *very important* as compared to the percentage of male respondents. Approximately 83 percent of all female respondents indicated that having a spiritual life is *very important*, whereas 63 percent of all male respondents reported that having a spiritual life is *very important*. Older respondents were more likely to report that having a spiritual life is *very important* than other age groups. Approximately 89 percent of respondents age 85 years and older reported a spiritual life as *very important*. As age decreases, so does the importance of a spiritual life: 77 percent of the respondents age 75 to 84 years reported a spiritual life is *very important* and 72 percent of the respondents age 65 to 74 years reported that a spiritual life is *very important*.

### 45. For you personally, how important is having a rich spiritual life?

	Very important		Somewhat important		Not at all important		Total	
	N	%	N	%	N	%	N	%
Gender								
Males	101	63%	43	27%	17	11%	161	100%
Females	274	83%	45	14%	13	4%	332	100%
Age group								
Age 65 to 74	171	72%	48	20%	18	8%	237	100%
Age 75 to 84	152	77%	34	17%	12	6%	198	100%
Age 85 and older	47	89%	6	11%	0	0%	53	100%

#### Life satisfaction

The final element of the quality of life framework is *Life Satisfaction*. In the Survey of Older Adults in Ramsey County, this area was explored by first asking directly: "Taking everything into consideration, how satisfied are you with your life at the present time?" and then followed up with two qualitative ("open ended") questions. These questions included:

- What gives meaning to your daily life?
- Are there any barriers to doing those things that are most meaningful to you, and if so, what are these barriers?

Two additional questions were asked of respondents to gauge their overall satisfaction with their lives and to understand how they perceive themselves in terms of being *young*, *middle-age*, *old*, or *very old*.

Overwhelmingly, respondents reported they are quite satisfied with their lives: 51 percent of the respondents reported they are *very satisfied* and 46 percent reported they are *satisfied* with their lives at the present time. We then asked "What gives meaning to your life?" to explore the possible basis for that high level of life satisfaction. The respondents were given the opportunity to comment and their answers were recorded for subsequent analysis. Responses were coded and then clustered into themes. These themes, with examples of the kinds of statements that were made by the respondents, are presented in Figure A-1 in the appendix. The items the respondents identified as giving meaning to their daily lives are not particularly surprising. In fact, many of the responses match various components previously identified in the quality of life framework. These included such things as family, friends, social interactions, meaningful work, recreational activities, religious practice, and actively maintaining hobbies and other interests. Each person was allowed to name as many as three items; therefore, the percentages given in Figure A-1 reflect the proportion of all respondents who named that particular item (i.e., the percentages do not add to 100).

Given the significance activities and events play in the enjoyment and overall life satisfaction of older residents, a set of follow-up questions was added: *Are there any barriers to doing those things that are most meaningful to you? If so, what are those barriers?* The first question elicited yes or no responses; the second question was "openended" and the responses were categorized into common themes. As shown in Figure 46, 75 percent of the respondents do not feel that there are any barriers to doing those things that are most meaningful to them. Yet, a notable subgroup of 125 respondents (25%) indicated that there were barriers that limited their capacity to engage in activities or events that are important contributors to their overall satisfaction with life.

46. Barriers to life satisfaction among survey respondents								
	Yes		No		Total			
	N	%	N	%	N	%		
Are there any barriers to doing those things that are most meaningful to you?	125	25%	370	75%	495	100%		

Several common themes were shared among the 125 respondents who had indicated that there were barriers to engaging in the kinds of activities that bring meaning to their daily lives. Many identified a specific health-related reason for their lack of participation, while some others identified a generalized feeling of incapacity due to health or age, as also reported about barriers to attending community events. Overall, 72 percent of these respondents indicted health, physical function, feeling too tired, or not having energy, as the primary barrier keeping them from engaging in activities that would bring meaning to their daily lives. Approximately 10 percent of these respondents indicated that money was a primary factor, and a few others mentioned transportation as a problem. Physical health and mobility seem to play significant roles in limiting the activities of those who have identified specific barriers.

Lastly, respondents were asked how they perceived themselves, as being *young*, *middleage*, *old*, or *very old*. Most of the respondents indicated that they consider themselves to be *middle-age* or *old*, as shown in Figure 47. Examining self-perceptions of age by age groups shows that most respondents age 65 to 74 years tended to consider themselves as being *middle-age* while respondents 75 years and older tended to consider themselves as being *old*. These findings are shown in Figure 48.

### 47. Respondents' self perception of age

	Number	Percentage
Young	88	18%
Middle-age	187	38%
Old	193	39%
Very old	25	5%
Total	493	100%

**Note.** Percentage may not add to 100 percent due to rounding errors.

#### 48. Respondents' self perception of age by age group

	Young		Middle-age		Old		Very old		Total	
	N	%	N	%	N	%	N	%	N	%
65 to 74 years	48	20%	110	46%	74	31%	5	2%	237	100%
75 to 84 years	31	16%	61	31%	95	48%	11	6%	198	100%
85 years and older	7	14%	13	25%	23	44%	9	17%	52	100%

### **Community environment**

Respondents were asked what would make their community a better place to live for older adults. Responses were coded in terms of the themes of the elements of the quality of life framework: housing; safety; access to services; human support/companionship; transportation; social interaction; learning and meaningful activity; and community connections/community involvement. We included two categories that are not elements of the quality of life framework: neighborhood improvements and being happy with their community. For the most part, Saint Paul respondents offering remarks indicated they are happy with the way their community is at the present time. Concerns or things that could be improved include issues of housing (affordability, options, absentee landlords), safety, transportation (bus service, transportation to a grocery store), and neighborhood improvements (improved pedestrian access to shopping such as cleared sidewalks when snowing, more curb cuts, grocery shopping within walking distance). Responses of those living in the city of Saint Paul are presented by Planning District in Figure A-2 in the appendix.

### **Issues to consider**

The purpose of the Survey of Older Adults in Ramsey County was to gather data about residents age 65 years and older concerning their quality of life, community life, and their need for community-based support services. The findings of the Survey of Older Adults in Ramsey County have many implications for Wilder Foundation services and its *Successful Aging* strategic initiative. The findings also have broader policy implications regarding some of the topics covered in the survey. Overall, survey respondents reported being satisfied with life, feeling good about their health in general, and having strong family connections and neighborhood ties.

The broader implications of the survey findings address issues of housing alternatives and transportation. Open ended responses to the question about what their community can do to make it a better place to live for older adults emphasize that many respondents see housing affordability and housing alternatives, transportation, and neighborhood improvements, especially pedestrian access to grocery shopping, as areas where their communities can do better.

Affordability and alternative housing options appear to be an issue for many of the survey respondents. When asked about housing preferences if they choose to move (16% said they are considering a move within the next two years), respondents indicated they would prefer a variety of housing types from which they may choose. The largest proportion, 46 percent, indicated they would prefer an apartment or condo specifically for older adults.

Many respondents replied that they would appreciate a grocery store within walking distance of their home. Approximately 22 percent of the respondents reported that they walk as a regular means of transportation. Furthermore, the expressed preference for services within walking distance suggest a rethinking of where communities locate housing for older adults and neighborhood services such as a grocery store.

Eighty-two percent of all respondents reported they most often drive their own car as a regular mode of transportation. Given the current public debate on age restrictions on driving privileges, modes of transportation as alternatives to driving may be warranted so that older adults may be able to maintain mobility without having to drive. In fact, a number of responses to the question about what their community can do to make it better for older adults to live there suggested providing alternatives means of transportation, such as handicapped accessible van or small bus service, and a need for city planning that results in pedestrian-friendly urban design.

More specific to Wilder's Successful Aging initiative and service delivery planning are issues of living alone, the profile of the typical service user, caregiving and care receiving, mental health needs, and barriers to engaging in activities that give meaning to people's lives.

Approximately 41 percent of the survey respondents live alone and 63 percent of those are female. Moreover, upon further examination, we found that most respondents living alone are female, over the age of 75, and have limited incomes. As the age increases of the female respondent living alone, so to does the likelihood that she has an annual income below \$10,000. Whereas, 12 percent of female respondents age 65 to 74 years who live alone have annual incomes below \$10,000, 40 percent of female respondents age 85 years and older who live alone have annual incomes below \$10,000. These older, less affluent respondents tend to be frequent users of supportive services indicating their possible frailty and risk of institutionalization.

Generally, respondents were not high volume supportive service users. In fact, 20 percent of the respondents did not know where to look for information about services. When asked about supportive service usage, the largest number of respondents (39%) uses heavy cleaning or chore services. The second and third most frequently used services are transportation (19%) and housekeeping (18%). When respondents not receiving a specific service were asked if they need that service, the largest proportion of respondents reported they need but do have chore services and housekeeping services (9% and 8%, respectively). These findings reveal that the typical service user is female, over 75 years, and lives alone. Income levels vary with no discernable pattern among service users.

Overall, respondents reported they had enough money over the last year to pay for basic expenses such as food, medical services and insurance, and prescription drugs. However, when asked about their future financial concerns regarding paying for long-term care or having enough to live on for the rest of their lives, respondents appear to be equally divided between being not at all concerned and being either somewhat or very concerned. This finding suggests that the older adult population in Ramsey County may benefit from education about managing retirement investments and income and about long-term care insurance.

For the most part, respondents have strong family or friend connections that may provide them with care and support in the event they become ill or disabled. Eighty-eight percent of the respondents reported they have someone in their lives that could care for them for a week and 66 percent reported they have someone in their lives that could care for them for a month. Nearly half of the respondents (43%) said they have someone that can take care of them indefinitely. Although these proportions represent strong family or friend

ties, approximately 51 percent of the respondents do not have someone in their lives that can care for them indefinitely. These findings indicate a need for Wilder Community Services for the Elderly insofar that Wilder's clients tend to be chronically ill and/or disabled requiring care indefinitely. On a broader scale, these findings suggest the need for continued research and public policy development related to long-term care financing and community-based, in-home service options.

Seventy-six percent of the respondents reported that it is very important or somewhat important to be involved in their community. While nearly half of the survey respondents reported they help out in the community (i.e., volunteering), 34 percent of those who do not volunteer said they do not volunteer because they are physically unable to do so. On average respondents spend 17 hours per month on volunteer activities. Generalizing to the large older adult population, this finding represents a significant amount of hours available for community volunteer activities.

Approximately 23 percent (114 persons) of the survey respondents reported they either provide help or arrange for help for a family member or a friend. Seventy percent of these caregivers reported they do this for one person and 20 percent said they do this for two persons. Approximately, 50 percent of the respondents providing care for another person reported that they provide help or arrange for help for extended family (i.e., someone other than their child, spouse, parent, or in-law) or a non-relative friend. Twenty-one percent of the respondents with a caregiving role reported they provide help or arrange for help for a spouse or partner, 18 percent provide for or arrange for such help for parents or parents-in-laws. Nine percent of the respondents reporting a caregiver role indicated they provide or arrange for help for their child (adult or minor). These findings indicate that caregivers have a variety of relationships with care receivers suggesting a wide range of potential issues regarding communication and expectations.

For the most part, caregiving respondents provide shopping, transportation, food preparation, do light chores, or take care of finances for the care receiver. Over two-thirds of the caregiving respondents provide shopping and transportation and spend four or less hours per week on caregiving tasks. Conversely, there appears to be a core group of caregiving respondents (15% of caregiving respondents) that provides a combination of bathing, toileting and dressing assistance and spends, on average, 39 hours per week on caregiving activities. Overall, caregiving respondents reported that they get relief or time off from their caregiving responsibilities (66%) and they have enough time off from their caregiving responsibilities to do other things they want to do (92%). Nonetheless, 12 percent of the caregiving respondents reported that they would like additional support to help them in their caregiving role. The largest need for support appears to be related to respite.

Survey respondents appear to have some concern about their mental well-being. When asked if they are concerned about losing their memory, over half reported they are somewhat or very concerned about losing their memory. Respondents were also asked about being anxious or feeling depressed. Approximately 41 percent (204 respondents) reported having felt anxious or depressed. Of these 204 respondents, 30 percent sought professional help. Most of those who did not seek help reported they decided they didn't need help. A small portion of those not seeking help reported they did not seek help because they "coped," tried to help themselves, or they talked to family or friends. It is not possible to discern from this survey how many of the 70 percent who did not seek help truly needed help. This finding, however, emphasizes the importance of Wilder's efforts to increase their capacity to address the mental health needs of older adults in the community.

Respondents appear to be highly satisfied with their lives: findings indicate that 51 percent of the respondents reported they are *very satisfied* and 46 percent of the respondents reported they are *satisfied* with their lives at the present time. Things that bring meaning to the lives of at least five percent of the respondents include: family, friends, and relationships; having basic needs met and having a health body; religion or spirituality; engaging in meaningful activity such as being a caregiver, volunteering, working on personal projects, and teaching; hobbies; exercise and sports; and reflecting inwardly and just being alive. These findings present life satisfaction as having a rich family or social life, being healthy, and engaging in a variety of meaningful and interesting activities. Approximately 25 percent of the respondents reported barriers to being able to engage in things that would bring meaning to their lives; 72 percent of these respondents said they feel constrained by poor health, physical function, or feeling too tired to participate. These findings point to the importance of programs that empower and teach individuals how to overcome obstacles to leading satisfying lives and improving the quality of their lives.

In summary, this survey has afforded us the opportunity to learn more about the status of the quality of life among older adults in Ramsey County, and most importantly, what may improve their quality of life in the community.

### References

- Kane, R. (2001.) Long-term care and good quality of life: Bringing them closer together. *The Gerontologist*, *41*, 293-304.
- Kerschner, H., & Pegues, J. (1998). Productive aging: A quality of life agenda. *Journal of the American Dietetic Association*, *98*, 1445-1448.
- Minnesota Department of Human Services. (2000). *Aging Initiative, Long-term care task force, Family support, Table F-2*. Saint Paul, MN. [Internet: <a href="https://www.dhs.state.mn.us/agingint/ltctaskforce/tableF2">www.dhs.state.mn.us/agingint/ltctaskforce/tableF2</a>].
- Minnesota Department of Human Services. (1998). *Aging Initiative: Project 2030 Final Report*. Saint Paul, MN.
- U.S. Census Bureau. (2000). Summary file 1 (100% Data).
- U.S. Census Bureau. (1990). Census of Population and Housing, Summary tape file 1 (100% Data).
- U.S. Census Bureau. (1990). Census of Population and Housing, Summary tape file 3 (Sample Data).
- Woods, M., Miller, W., Voth, D., Song, B., & Jones, L. (1997). Economic impacts of inmigrating retirees on local economies. *Journal of the Community Development Society*, 28, 206-224.

# **Appendix**

Figure A-1. Things that give meaning to the lives of survey respondents

Figure A-2. What would make your community a better place to live? Responses for the city of Saint Paul by Planning District

## A-1. Things that give meaning to the lives of survey respondents

Themes	Examples of typical responses	Number of responses	Percentage (Base= 487)*
Family, friends, and	Mostly being involved with younger people, grandchildren.	245	50%
relationships (social	Being here, being happy, being with my family.		
interaction, human	Children, family, relationship with partner.		
support)	The love I get from my kids.		
	Human contact.		
	I think the caring of my family is something that astonishes me every day.		
	Taking care of my grandchild.		
	Visiting with neighbors. They know that I will help them if they need help, and that gives meaning to life.		
	Lunch. There is a group of us that have had lunch together for 35 years. The children and being all together up at the lake.		
	My husband. My children. My friends.		
	Friends. Phone calls, mostly. My friends re old, older than me.		
	Watching grandchildren grow up, time with wife.		
	I want to live to take care of my husband.		
	Interactions with coworkers and family, being a valued member of my family and my community at work.		
	Support group.		
Having basic needs	Being able to be independent.	198	41%
met, healthy body	Having good health.		
	Waking up in the morning and getting up.		
	My good health, still having my mental faculties, still being able to participate in sports – you get peace of mind doing stuff like that.		
	Being able to do the things I want to do, and being in generally good enough health to be able to do them.		
	That I wake up and I'm healthy and I go to work, that God has granted me another day, I'm a cancer survivor.		
	Waking up well everyday.		
	Getting up and being able to move around.		
	The fact that I am breathing and that I can do all things I want to do.		
	Taking care of self.		
	Just feeling good and being healthy.		
	Taking care of myself.		
	There are too many to mention – being able to get around, drive my own car, tend to myself, the general everyday things that you do.		
	Wake up every morning and looking down at the green grass and not up at it.		
	Being alive!		

Themes	Examples of typical responses	Number of responses	Percentage (Base= 487)*
Religion/Spirituality	My faith.	111	23%
	Church.		
	Spirituality.		
	Prayer.		
	Religion.		
	My spiritual life with God.		
	My relationship with God.		
	My relationship to Jesus Christ.		
	Basically my faith and the opportunity to demonstrate it and live it out.		
	Serving my Lord, reading my Bible.		
	My spiritual path is most important.		
	Being on a spiritual journey.		
Meaningful activity	Being active and involved in projects and activities that interest me.	75	15%
	Being involved in church.		
	I guess it's a feeling that I've accomplished something each day towards a goal.		
	Getting up and doing something for somebody.		
	I drive a bus for a bus service for handicapped, disabled persons.		
	Keeping busy.		
	Having work.		
	Taking care of the house/property.		
	Being a caregiver.		
	Working on personal projects.		
	Volunteering.		
	Job as a senior companion.		
	Teaching, helping the kids/loves teaching.		
	Being able to serve others through teaching.		
	Just having a routine – responsibilities and activities.		
	Going to work.		
	Being of value and use to other people – making people's lives better in some way.		

Themes	Examples of typical responses	Number of responses	Percentage (Base= 487)*
Hobbies	I like to read.	53	11%
	I like to sew, make clothing for grandchildren, knitting.		
	Reading books		
	I read a lot and enjoy that.		
	Some hobbies/having hobbies.		
	Computer/internet.		
	Play with the computer.		
	Collect music.		
	Restore old cars.		
	Reading the paper.		
	Shopping.		
	Cooking.		
	Quilting club.		
	Crafts.		
	Antiquing.		
Exercise, sports	Golf, fish, and hunt.	33	7%
	Working out in the gym/the gym.		
	Ski.		
	Being active is important to me. I like to exercise; I like walking, playing golf in the summer, that kind of stuff. Mainly I enjoy walking, anything I can do to get around seeing things, being active in that way.		
	As long as I can keep going with sport activities.		
	A lot of exercise, time to do what you want to do like fishing and biking and hunting.		
	Riding wheelchair around the parking lot.		
	Taking part in sports activities.		
	Get physical exercise.		
	Walking, exercise.		
	Playing golf.		
	Go walking, treadmill, bicycling.		
	Bike riding daily.		
	Walks by the river.		

Themes	Examples of typical responses	Number of responses	Percentage (Base= 487)*
Inner reflections	Just enjoying the day.	27	6%
	I thank God for another day every morning when I wake up/I thank God for the gift of another dayI have many blessings.		
	Just enjoying the world around me, the beauty of the earth, things like that.		
	I am just content the way things are. I have a lovely family.		
	Making myself peaceful as much as possible in some way.		
	Satisfaction that I have done a good job. It (this question) is hard to answer, because you don't have the responsibilities of your work anymore. It is tough to make the adjustment from work to retirement. I don't have the challenge anymore, my work responsibilities.		
	Being alive, I'm curious about the future.		
	The challenge of life.		
	Living, just being a good human being.		
Home and garden	Gardening.	20	4%
	Flower garden.		
	Work out in the yard.		
	Shoveling snow.		
	Work around the house.		
Learning	Learning something new everyday.	18	4%
experiences	I try to keep current on current affairs, keeping my brain active, learning.		
	Some sort of accomplishment, learning.		
	I keep up with current affairs.		
	I also like learning things, taking classes on things.		
	The ability to learn something new once in a while.		
Free time/money to have freedom	Money is also important, we wonder if we'll have to give up things, if we'll be able to keep up our same lifestylewe want to keep our house, but we don't know if we'll be able to afford it as we get older.	16	3%
	Happiness (from) having no financial pressures.		
Food/coffee	Eating.	15	3%
	Good meal.		
	My cup of coffee.		
	Having food on the table and able to afford it.		
	Good food (cooking).		
Travel	Planning a trip.	10	2%
	Someday I would like to go to Switzerland.		
	Going out of town to see Grandson.		
	Vacations, trips.		
	Travel.		

Themes	Examples of typical responses	Number of responses	Percentage (Base= 487)*
Outdoors	Just getting out and enjoying nature, going on metro area hiking trails, parks, the Mississippi	9	2%
	The outdoors and my patio with my birds. And I have a lot of windows. I'm in a nice area with a lot of trees. It's private, but there is always activity outside with people pushing baby carriages. There's a big lawn outside and so I see a lot of activity. In the summertime, I sit out on my patio and people come up to say hello. So I really feel happy to be surrounded by so much life and vitality.		
	Seeing the outdoors.		
	Nature/Nature – I am a nature nut.		
	Walking when it's warm.		
	The birds, the sky, the trees, nature. I can sit in my chair and look out my window and watch it all.		
	Feeding the birds, enjoying wildlife, building birdhouses.		
Television	Watching ball games.	7	1%
	Watching movies.		
	Watching TV politics.		
	Watching the news.		
Music	Music.	6	1%
	Playing the organ.		
	Playing the piano (pianist).		
Writing	Writing poems.	4	1%
	Just wrote a book.		
	Writing, currently writing memoirs.		
Indoor games	Bingo.	4	1%
	Cards.		
	Bridge.		
	Crossword puzzles.		
Pets/animals	Going for a walk with my dog.	6	1%
	My cats for companions, it would be awfully empty without them.		
	I feed the squirrels peanuts in the shell every 2 <sup>nd</sup> to 3 <sup>rd</sup> day and some cracked corn for the birds or squirrels whoever is there first.		
	Cat.		
	Dog.		
Art, painting	Painting.	2	<1%
	Stain glass painting.		

# A-2. What would make your community a better place to live? Responses for city of Saint Paul by Planning District

Planning District/Themes	Examples of typical response	Number of responses
Battle Creek-Highwood (n=21)		
Happy with community	Our neighborhood is a good environment for older people	10
Housing	More housing options.	1
Access to services	I moved to Minnesota from somewhere where we had a county-wide number we could call if we needed help getting things done. People would pay if they could, but could also get help free if they couldn't pay. I have not found here anything like this. I can find some young people in the neighborhood who can do things for me, but I really haven't been able to find the same kind of assistance here.	1
Learning/Meaningful activity	More volunteer programs.	1
Community connections	A lot of new Asian people moved in and they are very friendly, and I have made friends with them.	1
Neighborhood improvements	Less noise, in general - I live near the freeway and all the activities that come with it, like being close to traffic noise. Also noise from boom boxes, etc, but not to the extent of being annoying.	2
Other	Not sure, lower the taxes.	1
Don't know/nothing		8

Planning District/Themes	Examples of typical response	Number of responses
Greater East Side (n=31)		-
Happy with community	I can't think of anything. My neighborhood has quite a few seniors. What would we want? We have everything we need here.	
	So far everything is fine. The bus is close by, and that is an important thing.	5
Housing	Housing would be the biggest problem - not enough affordable housing; have to wait too long to get into the high rise.	
	They could have more housing for those who can't afford it.	4
Safety	More lighting, street lighting.	
	Crime seems to be increasing; older people don't feel safe; we feel vulnerable.	4
Transportation	I would like to see an upgrade in shopping opportunities so people don't have to carry groceries on the bus a long way from home.	
	[I] use to have bus service right at the door, but now they changed the bus route to six blocks away [and I] can't walk that far.	2
Social interaction	Some way to meet new neighbors. I use to know everyone on the block. Now there are so many new people. I don't know most people now.	2
Community connections	If people would get together a little more with community meeting and things, help people to know each other and look out for one another more.	1
Neighborhood improvements	A supermarket closer to home.	
	Probably have more convenient grocery stores.	3
Other	No "other" comments that were relevant to community improvements	2
Don't know/nothing		8

Planning District/Themes	Examples of typical response	Number of responses
West Side (n=11)		
Happy with community	Our church is also pretty active in providing fish fries, etc, which are well-attended by seniors.  We also have a good library.	1
Housing	Be nice to have lower rent in this area.	
	Our problems have been mainly with transient housing, bought out by absentee landlords who know nothing about the people they rent to, which has resulted in more police calls in our neighborhood over recent years. Also, with absentee owners, properties fall into ill-repair.	3
Access to services	A senior center near my house.	1
Learning/Meaningful activity	Some more organized activities such as day trips: going to Como Park, the Theodore Wirth Garden, Tour of an interesting town like Red Wing, or Stillwater, Going out to lunch. An outing to city or state park for those who still like to walk.	1
Neighborhood improvements	We need a space to walk around, like courtyards.	1
Other	If we had more recognition of our original Hispanic communityit is now so imbedded with too many others.	1
Don't know/nothing		3
Dayton's Bluff (n=11)		
Housing	If we can stay in our houses and in our neighborhoods.	1
Safety	There needs to be more safety for people.	1
Neighborhood improvements	Less bars. In general, I think they are rude people that go there, with disregard for the neighborhood and the people here. Inconsiderate people.	1
Other	If we were all on free or low cost drugs (not specific to the community).	1
Don't know/nothing		7

Planning District/Themes	Examples of typical response	Number of responses
Payne-Phalen (n=12)		
Happy with community	I think everybody is pretty well satisfied here.	2
Safety	More security. There lots of goings on in the East Side like break-ins. Someone was attacked on my street corner, I read in the police report in our local community paper.	
	Safer to be outside more often.	3
Transportation	Free bus service for seniors.	2
Neighborhood improvements	All residents should take care of the neighborhood.	
	Basically, if people would keep the neighborhood cleaner. One of the big problems is rental housing with absentee landlords.	2
Other	There are improvements that could be made, but I don't get involved anymore.	2
Don't know/nothing		1
North End (n=21)		
Happy with community	I can't think of anything. [We have] block nurse plans, Meals on Wheels.	2
Safety	That we wouldn't have violence. Sometimes there is stuff that goes on from kids walking around the streets at night. They put graffiti on our garages, etc	1
Social interaction	All the neighbors who have lived here for years have now passed away. So I don't know anybody anymore.	1
Neighborhood improvements	Clean up the streets; get rid of the gang bangers who beat up older people.	
	Break these crack houses. It isn't safe to be out at night.	
	[Neighborhood] could use a grocery near by, the one is far away.	
	Maybe a grocery store, more of a neighborhood grocery.	
	Teaching the younger children and adults in the neighborhood to respect our property.	8
Other	Plenty of services now, but I am worried about cut backs keeping people in their homes.	3
Don't know/nothing		7

Planning District/Themes	Examples of typical response	Number of responses
Thomas-Dale (n=9)		
Housing	If we can get senior housing, maybe there will be better care for seniors.	2
Safety	I've lived in this neighborhood since I was 6 years old. You have to lock your door at all timeseven when you go to the garbage can. It will never be the way it used to be when I was a growing kid. The younger generation has no respect for anybody.	
	Feeling secure and safe, like when we had extensive police action to clean up the drugs and crime in the neighborhood.	2
Transportation	[I] would like an apartment close to my church and better bus service.	1
Social interaction	More respect for the elders.	1
Don't know/nothing		3
Summit-University (n=7)		
Access to services	There is a nurse block program, but I haven't heard much about it.	1
Neighborhood improvements	There is no close- by drug or grocery store in my area.  There isn't much around hereIt's all residential. There should be more things [older adults] could afford to get out to do.	2
Other	Respondent made a comment about the usefulness of resident council's in public housing.	1
Don't know/nothing		4
West Seventh (n=5)		
Housing	The price of rents. If you can't get reduced housing or something, it would be nice to be able to get an apartment or something where you didn't have to depend on the government to help you out.	1
Safety	We would like to see more patrolling of the neighborhood especially at night, up and down especially on the side streets; been burglarized three times this year.	1
Don't know/nothing		3

Planning District/Themes	Examples of typical response	Number of responses
Como (n=12)		
Happy with community	Not sure. For us, we are satisfied.	1
Safety	If they didn't have these drugs around.	1
Access to services	Someplace to get people to shovel snow.	1
Transportation	Better sidewalks.	
	More accessibility to small van or bus service a couple times a week.	2
Social interaction	If people were more stable, treat neighbors well.	1
Don't know/nothing		6
Hamline-Midway (n=14)		
Happy with community	No, they have so many things going on now, that older people don't have to be lonely now.	
	I don't know if I could make it a better place to live. There are no complaints from people who live here. It is a safe place to live.	4
Housing	Probably there should be more senior housing.	1
Transportation	Better transportation to take seniors to shop.	1
Community connections	More participation by the younger people. Most of them are two-job families, and they don't have time to participate like we did when we were young.	1
Neighborhood improvements	'I have called the mayor's office about this, but the alley (at the far end) looks like the city dump, taking care of the alley would be good. So far the mayor's office has not returned our calls - CLEANING UP THE ALLEY'S WOULD MAKE IT A BETTER PLACE, not just our alley but most alleys in St Paul.	
	Better school and probably an addition to the playground.	2
Don't know/nothing		7

Planning District/Themes	Examples of typical response	Number of responses
St. Anthony Park (n=4)		
Housing	If we had an apartment building for seniors in the neighborhood, so I could stay in the neighborhood.	1
Transportation	Provide a bus service, like metro transit, and private bus service from retirement communities, makes it cost effective.	
	The ones that can't really get around like I do (so, transportation?) Yes, for people who can't drive, or for people who are housebound, I guess it would be nice for them to organize a way to get them around to get groceries.	2
Social interaction	Contacts with other generations provides employment and social and political needs of people	1
Learning/Meaningful activity	A multigenerational center where people of all ages can come to together to exercise, take classes, in computer techniques, all in one building, keeps the cost down, supply and parties for seniors and lunch.	1
Other	More tolerance of pets.	1
Merriam Park, Lexington- Hamline (n=10)		
Access to services	[it would help] if you are not able to get around that you would be able to [have someone] come into the home to help you, not sure of those services.	1
Transportation	Transportation. It could be nicer.	1
Social interaction	Seniors' gatherings.	1
Neighborhood improvements	Sidewalks when snowing and icy should be cleared better for older adults to feel safe out side The city does not plow her alley, everyone has to clean their own area and when others don't she can't get out. It would be really nice to have curb cuts on more corners, for those who grocery shop and come home walking, its really hard to get over the curbs with out them, causes stumbling, hard lifting etc. for seniors. It would help with mothers and strollers as well as seniors.	2
Don't know/nothing		6

Planning District/Themes	Examples of typical response	Number of responses
Macalester-Groveland (n=17)		
Happy with community	Good enough as it is.	
	The transportation services are wonderful at the moment, so hopefully they won't change that. But I think they will change it when the light rail comes in. But at the moment it's wonderful for anybody.	6
Housing	More senior housingaffordable housing.	
	Some newer townhouses in Ramsey County	3
Transportation	Well, they're talking about taking a bus service out. The service like the one that comes to take us out grocery shopping once a week is nice.	1
Other	Respondent made a comment about the negative change in community-college relations.	2
Don't know/nothing		6
Highland (n=37)		
Happy with community	I have no problems with anything, I am very independent. I have not thought much about it there are a lot of services for people.	
	I think this is perfect.	4
Housing	I don't know who to call to find alternative housing or housing aid.	1
Safety	Secure adequate police protection. Making their presence know in the neighborhood during the night as well as the day.	2
Access to services	It would be better if we had a good inventory of older people who are living alone and if we had a mentor family that was totally connected to each one of them to do odd jobs and look in on them. We need to have neighborhoods caring about those in their own neighborhood. We need more organization for this. Faith Communities would be a good place to start.	1
Transportation	A grocery store a bus line on Lexington Parkway.	
	I guess there are a lot of nice places to go, but, if you are handicapped like me, you can't. People don't like to take me in their cars, because they are worried I might fall when they would be helping me.	
	Probably good bus service for people who don't drive.	3

Planning District/Themes	Examples of typical response	Number of responses
Highland (n=37) (continued)		
Social interaction	Sociability - having activities like golf, church where you can meet people, socialize.	1
Community connections	Friendlier neighbors, more block parties.	1
Neighborhood improvements	Shopping closer to us.	
	I don't think there is much within walking distance for grocery shopping or other shopping.	5
Other	'I've not given it any thought; I can still get around and play ball and things like that.	
	Really frustrated with the prices of medication right now, all the prices going up for advertising not research like they say, and seniors paying for it, ridiculous because most insurances do not cover it.	6
Don't know/nothing		15
Summit Hill (n=5)		
Happy with community	The local community center and the Y are huge assets that help older people feel mentally and physically active.	
	It is OK the way it is.	2
Safety	Oh gosh. The bottom line is public safety. My neighborhood is pretty safe but I wouldn't walk at night. I've had two break-ins in my house. Public safety is a concern. Older people aren't as mobile, can't avoid danger as easily.	1
Transportation	One thing is that they might be taking the bus services off of St. Clair and I hope they would continue.	1
Community connections	Ability for young families to move in.	1
Don't know/nothing	<u>-</u>	1

Planning District/Themes	Examples of typical response	Number of responses
Downtown (n=4)		
Safety	We live close to downtown St. Paul, close to Dorothy Day center. [We have] a problem with a lot of street people and that is threatening to a lot of older people, they drink/do drugs, etc., prevents night activities. When we call the police, they do answer right away, but it is at night it is and it is possible the call was not taken care of, but not sure because too afraid to go out.	1
Transportation	I think where I live downtown they should allow people free parking access. We also need more merchants downtown.	1
Human support/companionship	I enjoy plays, musicals but not high buck ones. If we could get together more and have activities. I'm alone and I don't like to go by myself.	1
Learning/Meaningful activity	(See Human Support)	1
Neighborhood improvements	We also need more merchants downtown.	1
Don't know/nothing		1