
Seniors' Needs Assessment:2001

Quantitative Survey Results Presentation

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1. Introduction

Objectives

- Gain in-depth, quantitative insights into the concerns and unmet needs expressed by older adults in the twenty-town south central Connecticut region.
- Based on the above, allocate resources and develop programs/services to effectively and efficiently meet the most urgent needs, giving special priority to the needs of low-income and minority elders.

1. Introduction

Methodology

- Develop structured questionnaire based on previous exploratory focus group learning
- Train staff members to administer this questionnaire
- Determine appropriate broad sample of respondents
- Administer the questionnaire
- Determine how best to analyze the data generated, including key relevant subgroups for analysis (e.g., females vs. males)
- Conduct analysis: identify key findings; draw relevant, supportable conclusions and formulate recommendations

1. Introduction

Methodology

Overview Of Who We Interviewed And How The Data Was Analyzed

- Total Sample (N=311/100%)
- Gender:
 - Females = 225/72%
 - Males = 86/28%
- Self-described Heritage:
 - European-American = 209/67%
 - African-American/Caribbean-American = 40/13%
 - Latino-American/Hispanic-American = 17/6%
 - Native American = 13/4%
 - Other = 23/3%

1. Introduction

Methodology

Overview Of Who We Interviewed And How The Data Was Analyzed (cont.)

- Program Source:
 - Home Care Program = 111/36%
 - Alzheimer's Respite, Bridge Program, Aging Resource Center = 46/15%
 - Senior Service Corps Programs = 40/13%
 - Adult Day Centers = 41/13%
 - Title III Grantees = 60/19%
 - Board of Directors/Advisory Council = 13/4%
- Feeling About Self:
 - Great = 61/19%
 - Pretty Good = 180/58%
 - Not So Good = 58/19%
 - Not Good at All = 12/4%

1. Introduction

Methodology

Overview Of Who We Interviewed And How The Data Was Analyzed (cont.)

- Self-described Health Status:
 - Very Healthy = 55/18%
 - Somewhat Healthy = 164/53%
 - Not All That Healthy = 77/25%
 - Not Well At All = 14/4%
- Self-described Level of Activity:
 - Very Active = 89/29%
 - Somewhat Active = 134/43%
 - Not Very Active = 87/28%

1. Introduction

Methodology

Overview Of Who We Interviewed And How The Data Was Analyzed (cont.)

- Self-described Future Outlook:
 - Very Positive = 80/26%
 - Somewhat Positive = 82/27%
 - Sort of Neutral = 87/28% *“It depends on the day, how I feel”*
 - Somewhat Negative = 47/15%
 - Very Negative = 12/4%
- Self-described Need for Outside Help:
 - A Lot of Help = 22/7%
 - A Moderate Amount of Help = 171/55%
 - Little or No Help = 116/38%

1. Introduction

Methodology

Overview Of Who We Interviewed And How The Data Was Analyzed (cont.)

Household's Total Monthly Income Level:

At or Below Poverty Level = 64/21%

125% of Poverty Level = 46/15%

150% of Poverty Level = 49/16%

175% of Poverty Level = 30/10%

200% of Poverty Level = 11/3%

Over 200% of Poverty Level = 47/15%

Refused = 64/20%

2. Conclusions And Recommended Actions

Conclusions

- **Three service needs stand out as key areas:**
 - * Transportation
 - “*Getting out is everything, otherwise you're isolated*”
 - * Care for Self
 - “*Of all things, help at home removes any need of worrying about what is going to happen to me . . . you have a sense of security*”
 - * Help with Chores
 - “*Need help with heavy cleaning, outside work*”

2. Conclusions And Recommended Actions

Conclusions

- **In addition, the following constituencies report needing the most help:**

- * Hispanics/Latinos

“a veces nosotros venimos a este pais aqui, y necesitaríamos . . . que nos orientaran de esos sitios que . . . en algún momento podríamos nosotros necesitar . . . pues ni los utilizamos y sufrimos de muchas cosas nuestro que no sabemos de esos servicios ”

(“sometimes we come to this country here and we need to get orientation about those places which, at some moment, we could need . . . because we don't use them and we suffer from many things because we don't know about these services ”)

- * Individuals age 64 or younger (in 24 out of 31 need areas – both in meeting their own needs and providing support for their caregiving activities)

“I don't know whether I'm more worried about my mother or myself”

2. Conclusions And Recommended Actions

Conclusions (cont.)

- It is important to note that relatively few of our constituents think of formal, elderly services organizations as either the first “top of mind” or even secondary, source of assistance in solving a problem that they and their family members cannot resolve.

“I’d feel most comfortable calling one of my friends”

“I can’t stand using those automated phone systems – you never get a human being”

“sometimes you just get passed around . . . no one seems to have an answer”

2. Conclusions And Recommended Actions

Conclusions (cont.)

- Several new service/program ideas that we explored with Seniors in this research were well received and look promising:

- * On-call transportation service (most favorably received)

“I really need this – buses are slow and it's hard to make reservations”

- * In-home prescription evaluation by pharmacist and nurse
- * Caregiver training sessions

2. Conclusions And Recommended Actions

Recommended Actions

- **Based on the above conclusions and learning, SCCAA plans to prioritize its actions as follows:**
 - * By working through a network of stakeholders in various minority communities, to refine SCCAA’s knowledge of family dynamics and service preferences among minority populations, especially Hispanic and Latino elders, to guide funding and delivery of services

2. Conclusions And Recommended Actions

Recommended Actions (cont.)

- * To re-orient outreach efforts to focus on entry points such as physicians' offices and age peers that have been identified by older adults as their preferred sources of help

- * To target outreach efforts under the new Older Americans Act Family Caregiver Initiative to older adults age 60-64

3. Key Learning

Seniors' Mindset -- A Context

- Respondents expressed a preference for being known as “just a person” (39%) when asked what definition best captured them. The second highest response was for “senior citizen” (35%). *“I am just a person who happens to be older”*
- Many respondents (39%) said that life is “somewhat more difficult” for them than when they were younger.
- A majority of respondents (58%) described themselves as being “somewhat healthy”.
- Respondents generally felt that they were active, with 43% describing themselves as “somewhat active” and 29% as “very active”.
- While responses to the question that asked respondents to describe their future outlook were fairly evenly divided: 26% described their outlook as being “very positive”, 26% as “neutral”.

3. Key Learning

To Whom Do Seniors Currently Turn To For Help?

Seniors were asked whom they turned to for help – both “first to mind” and then “all others”:

“My friends help me out when I have a question”

- In terms of “first to mind”:
 - “Neighbor/friend” was mentioned most frequently (20%)
 - “Doctor” was also mentioned with some frequency (12%)
 - “SCCAA”, “CHOICES”, “SCCAA Home Care” were collectively mentioned by only 8% of respondents
- In terms of “all others”:
 - “Doctor” was mentioned most frequently (23%)
 - “Neighbor/friend” was also frequently mentioned (22%)
 - “SCCAA”, “CHOICES”, “SCCAA Home Care” were collectively mentioned by 23% of respondents

3. Key Learning

Top Concerns of Seniors

Seniors were taken through a list of issue areas (developed from the Focus Groups) and asked to express how concerned they felt about each one.

- Among respondents who indicated that they were “**Very Concerned**” about an issue:
 - “Concern for your health” was mentioned most frequently (31%)
 - “Concern for transportation/getting around” was also mentioned with some frequency (25%)

“Hard to schedule . . . not enough service . . . hard for people who use wheelchairs”

- Target constituencies showing the greatest levels of concern included:
 - Hispanics/Latinos (across most issues)
 - Individuals age 64 and younger

3. Key Learning

Need Areas

Seniors were taken through another list of some 32 service areas (also developed from the Focus Groups) and asked about how much help they felt they needed with each one:

- Among respondents who indicated that they “Need **Much** Help” with an issue:
 - “Transportation” was mentioned most frequently (24%)
 - “Physical Health” was also mentioned with some frequency (19%)
- Target constituencies showing the greatest need for help included, again:
 - Hispanics/Latinos (across most issues)
 - those age 64 or younger (across most issues)

3. Key Learning

Need Areas (cont.)

- Top priority need areas include the following (% = much + some help needed):
 - **Physical Health (69%)** *“I feel like I need a mediator between me and my doctor”*
 - **Transportation (56%)** *“There should be more service for shopping, seeing friends”*
 - **Self-Care (50%)** *“Who will be there to help me if I get sick?”*
 - **Mobility (48%)** *“I mostly live downstairs now that stairs are a problem”*
 - **Help with Chores (48%)** *“Keeping up the yard is difficult”*

3. Key Learning

Need Areas (cont.)

- Second level priority need areas include the following (% = much + some help needed):
 - Understanding My Benefits (41%) *“I feel like I fall above all of the income limits”*
 - Emotional Health (40%)
 - Finding A Homemaker (40%)
 - Knowing Which Agency to Call (39%)
 - Prescription Costs (38%) *“Even though I’m not supposed to, I break some of my pills in half so they last longer”*
 - Safety In Community (38%)
 - Trusting Help (36%)
 - Loneliness (34%) *“Everyone needs friendship, attention, and affection”*
 - Medical Costs (34%)
 - Finding Help (32%)
 - Safety At Home (31%)

3. Key Learning

Need Areas (cont.)

- Lower level priority need areas include the following (% = much + some help needed):
 - Managing Finances (29%)
 - Understanding My Bills (29%)
 - Loss Of Person/Pet (29%) *“I can't even think about the idea of losing my wife - it's too overwhelming.”*
 - Utility Costs (29%)
 - Keeping Active (26%)
 - Housing Costs (25%) *“need more affordable, assisted living”*
 - Getting Meals (25%)
 - Communicating with Family (25%)
 - Housing Options (20%)
 - Contact with Friends (19%)
 - Contact with Youth (17%)
 - Paying Taxes (17%)
 - Caring for Spouse/Companion (15%)
 - Caring for Child/Grandchild (7%)

3. Key Learning

Reactions To New Service Ideas

Seniors were read descriptions of three new service ideas and asked about how about how helpful they felt each might be:

Service Idea #1: Transportation Service

We offer a discounted on-call transportation service . . . day and night. You call the hotline 24 hours before you need a ride to make an appointment and the service will be there to pick you up at your home, drop you off where you want to go, and then bring you back home when you want to go.

- This idea was the most well received of the three.
 - “*This is where I really need help ... nothing else works well now!*”
- Some 66% stated that they expected it to be very helpful.
- Minority respondents and those age 75-84 responded most favorably to this idea.

3. Key Learning

Reactions To New Service Ideas (Cont.)

Service Idea #2: Prescription Evaluation

We offer a “Prescription Evaluation” program where a nurse and a pharmacist come out to your home, review your medications to make sure none of them interact negatively, and help you understand how and when to take them.

- This idea was ranked second by respondents.
“This would help people who can't get to the drugstore”
- Some 42% expect it to be very helpful.
- Hispanic/Latino elders and those 64 and younger responded most favorably here.

3. Key Learning

Reactions To New Service Ideas (Cont.)

Service Idea #3: Caregiver Training

We provide “Caregiver Training” classes for individuals assisting family members with Alzheimer’s or other dementia.

- Some 37% of respondents expect this service to be very helpful.

“This could be a big relief”

- Hispanic and Latino elders, and those 64 and younger responded most favorably to this idea.