



**Indicators Survey
Results 2005**

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Executive summary

In 1997, Texas began an initiative called Aging Texas Well. The goal of this initiative is to help Texas prepare for a rapidly increasing older population. Qualitative and quantitative assessment forms the foundation for the initiative. Research in the initiative has focused on qualitative assessment of the well-being of older Texans.¹ In 2004, Texas conducted a project to establish and objectively measure indicators of successful aging. The gerontology literature on “successful aging” helped define a model for analysis of quantitative indicators of how well Texans are aging.

Using these indicators as a framework, a survey was developed to measure how well older Texans are aging. The Survey Research Center (SRC) at the University of North Texas conducted a telephone survey of older adults in Texas. The purpose of the survey is to provide insight into how well older Texans are doing (based on their own self-report) on key indicators of successful aging across the Aging Texas Well areas of focus.² A telephone survey was conducted in 2004 to collect the data.³ A statistically valid sample of 1,110 older Texans living in the community completed the statewide survey. Some of the highlights from the survey findings include:

Most older Texans have two or more chronic conditions; more than one-third have at least three chronic conditions; and while many exercise at least three times a week, most older Texans are overweight or obese.

More than 25 percent of older Texans report having a mental health diagnosis.

- The great majority of older Texans have some type of health insurance. Nevertheless, 5 percent of older Texans reported being unable to access healthcare when they needed it in the past year. The primary barrier to access was affordability.
- The biggest source of income is retirement income from Social Security. More than half of older Texans have income from personal savings, but only 8 percent report personal savings as their biggest source of income.
- Most older Texans spend at least one-third of their income on housing costs.
- About 15 percent of older Texans are employed. Ten percent of those who are not working are currently looking or plan to look for a job.
- Most older Texans have a will and nearly half have a document such as a healthcare power of attorney that would allow others to make health decisions on their behalf if they became incapacitated.
- Most older Texans feel that they have the supports and services they need to help them live independently in their community. However, only a third have heard about area agency on aging programs.
- Sixteen percent of older Texans provide care to a family member or friend over age 60 or to a child 18 years of age or younger, or both.
- More than 25 percent of older Texans report that loneliness is a problem. About 60 percent report spending time daily with family, friends, or neighbors.
- Most older Texans say that spiritual life is very important.
- Nearly 60 percent of older Texans either currently participate in organized volunteer programs or have in the past.
- Almost three-quarters of older Texans report having a recreational interest or hobby.
- About 8 percent of older Texans currently participate in education classes or formal programs.
- Almost one quarter of older Texans do not currently drive.

1 See various reports at www.agingtexaswell.org.

2 Aging Texas Well is the legacy Texas Department on Aging's framework for analyzing the well-being of older Texans. See www.agingtexaswell.org

3 One limitation to this study is that older Texans without phones or living in institutions did not participate in the study. These Texans might have responded differently than this study's respondents and may have lower socioeconomic status than other individuals.

Introduction

In 1997, Texas began an initiative called Aging Texas Well. The goal of this initiative is to help Texas prepare for a rapidly increasing older population. Qualitative and quantitative assessment forms the foundation for the initiative. Past research in the initiative has focused on qualitative assessment of the well-being of older Texans.⁴ In 2004, Texas conducted a project to establish and objectively measure indicators of successful aging. The gerontology literature on “successful aging” helped define a model for analysis of quantitative indicators of how well Texans are aging.

Using these indicators as a framework, a survey was developed to measure how well older Texans are aging. The Survey Research Center (SRC) at the University of North Texas conducted a telephone survey of older adults in Texas. The objectives of this survey were to assess the status of older Texans with respect to Aging Texas Well life areas, perceptions of individual well-being, preparedness for the future, and awareness of community resources available to assist in preparedness.

The survey is not a “needs assessment.” Rather, the survey focused on individual behaviors and perceptions. Responses provide insight into how well older Texans are doing (based on their own self-report) on key indicators of successful aging. The findings from this project may be used to:

- Understand the status, experience and perceptions of older Texans related to their well-being;
- Compare the results of this study to those of national studies to draw inferences regarding how well Texans are doing compared to other regions of the country;
- Provide data to make informed recommendations on programs and policies in Texas; and
- Help determine the capacity of the state and local infrastructure to support ability to age well.

Future uses of the data will include developing overall benchmarks on the well-being of older Texans.

⁴ See various reports at www.agingtexaswell.org.

Methodology

The conceptual population for the survey was adults age 60 or older who live in households with telephones. A stratified random sampling method was used so that the sample would generally reflect the racial and ethnic distribution of older adults in Texas as a whole. Random digit dialing (RDD) was used as the method of sample generation within each area because it offers the best coverage of active telephone numbers and reduces sample bias. The RDD method ensures that the conceptual frame and sampling frame match, unlisted telephone numbers will be included, and the sampling frame will be as current as possible, thus maximizing the probability that newer residents will be included.

Research indicates that use of the telephone as a survey instrument may systematically exclude responses from the most disadvantaged members of society.¹ This study suggests that people without telephones tend to have lower socioeconomic status than do people with telephones. However, the study also shows that people without phones tend to be younger than 60 years of age. Additionally, data from the 2000 census indicates that about 2 percent of Texans who are 55 or older do not have access to phones.² Thus, the current survey method should adequately sample at least 98 percent of Texas residents age 60 or over who are living in the community. The random digit dialing methodology used by the survey firm did not call older Texans who were living in institutions such as nursing facilities. Four percent of older Texans are living in institutionalized settings.³ When interpreting the results, recognize that excluding these portions of the population may have under- or over-estimated results.

Once a household was contacted, a person within the household was randomly selected by requesting to speak to the person over the age 60 with the most recent birthday. If the selected person was capable of answering the survey but was not available at the time of the call, a callback was scheduled. If no one in the household was age 60 or older, that phone number was removed from the sampling frame.

Sampling results

A total of 1,110 older Texans completed the statewide survey. A total of 30,060 households were contacted, with 15,680 having no one in the target age, 8,551 never answering and 5,219 refusing to participate. In the target age group, 1,518 refused to participate in the study, while 499 partially completed surveys. The response rate ranged from 18 percent to 24 percent, depending on whether partial responses were included (response rate was higher when partially completed surveys were included).

Instrument

The survey instrument was compiled using input from several sources, including a review of similar studies on aging indicators conducted at national level, a review of similar studies on aging indicators conducted by other states or counties, and a review of literature, specifically survey research, for each Aging Texas Well area of focus. The instrument was translated into Spanish. Both instruments were programmed into SRC's Computer Assisted Telephone Interviewing system for survey administration. The system directs the interview along the appropriate branching patterns based on respondents' answers. Both survey instruments were tested among 38 respondents by telephone. Programming accuracy was checked using the data after the testing phase. Feedback from interviewers helped clarify the wording of any questions. A total of 97 interviews were conducted in Spanish.

Data collection

Trained telephone interviewers with experience in telephone surveys conducted the survey. Each interviewer completed an intensive general training session. The purposes of general training were to ensure that interviewers understood and practiced all of the basic skills needed to conduct interviews and that they were knowledgeable about standard interviewing conventions. The interviewers also attended a training session specifically for the project. The project training session provided information on the background and goals of the study. Interviewers practiced administering the questionnaire to become familiar with the questions.

All interviewing was conducted from a centralized telephone bank in Denton, Texas. An experienced telephone supervisor was on duty at all times to supervise the administration of the sample, monitor for quality control, and handle problems. Data for the survey were collected over several weeks. Interviewing began on April 28, 2004.

Report format

This report summarizes the survey responses of older adults at the state level and conditions of older adults throughout the state. The first section provides the demographic characteristics of the sample, followed by general ratings of aging and life satisfaction. The remainder of the report is arranged by Aging Texas Well area of focus, which is defined on the following page. Each Aging Texas Well area of focus is introduced and defined. The *Aging Texas Well: State of Our State* report provides a more comprehensive assessment and discussion of the well-being of older Texans across each of the 14 areas.

Demographic characteristics of sample

Respondents were asked a series of questions regarding personal and household characteristics. The average age of respondents was 71.5 with individuals ranging from age 60 to 93 years. Approximately 7 percent of respondents were over 85 years of age.

Age

| Age group | Percent of respondents |
|-----------|------------------------|
| 60-64 | 23% |
| 65-74 | 42% |
| 75-85 | 28% |
| 85 + | 7% |

Gender

| Gender | Percent of respondents |
|--------|------------------------|
| Male | 30% |
| Female | 70% |

Race/ethnicity

| Race/ethnicity | Percent of respondents |
|------------------|------------------------|
| White | 71% |
| African-American | 9% |
| Hispanic | 18% |
| Other | 2% |

Marital status

| Marital status | Percent of respondents |
|----------------|------------------------|
| Married | 48% |
| Divorced | 12% |
| Widowed | 35% |
| Separated | 2% |
| Never married | 3% |

Income level

| Household Income | Percent of respondents |
|---------------------|------------------------|
| \$10,000 and under | 19% |
| \$10,001 to 20,000 | 22% |
| \$20,001 to 30,000 | 18% |
| \$30,001 to 60,000 | 22% |
| \$60,001 to 75,000 | 8% |
| \$75,001 to 100,000 | 5% |
| More than \$100,000 | 6% |

Education level

| Highest level completed | Percent of respondents |
|---|------------------------|
| Less than high school | 11% |
| Some high school | 12% |
| High school diploma/GED | 35% |
| Two-year college degree | 12% |
| Four-year college degree | 15% |
| Technical college/certification/licensure | 4% |
| Master's degree | 8% |
| Doctoral degree | 3% |

Living alone

| Number living in household | Percent of respondents |
|----------------------------|------------------------|
| 1 | 39% |
| 2 | 46% |
| 3 | 10% |
| 4 | 3% |
| 5 or more | 3% |

Civic engagement

| Vote regularly? | Yes | No |
|--------------------|-----|-----|
| National elections | 81% | 19% |
| State elections | 78% | 22% |
| Local elections | 76% | 24% |

Overview of Aging Texas Well

There have been multiple attempts to define “successful aging” or “aging well.” Havinghurst (1961) referred to “adding life to the years” and “getting satisfaction from life.” The MacArthur studies looked at outcomes pertaining to physical performance and other indicators of functional status. Gibson (1995) stated that successful aging “refers to reaching one’s potential and arriving at a level of physical, social, and psychological well-being in old age that is pleasing to both self and others.” In the *Encyclopedia of Aging*, Palmore (1995) says that successful aging “would combine survival (longevity), health (lack of disability), and life satisfaction (happiness).” Some gerontologists have used terms such as “adjustment” or “adaptation” to aging.⁴ In this framework, indicators of subjective well-being such as life satisfaction, happiness, and perceived importance in all life areas are key components to aging well.

Life satisfaction

Respondents were asked to rate their satisfaction with life and the perceived importance of key areas of Aging Texas Well. Overall, 91 percent of respondents report feeling they are aging well.

| “When you think about life in general, do you agree or disagree with the following statements?” | Strongly agree | Somewhat agree | Somewhat disagree | Strongly disagree |
|---|----------------|----------------|-------------------|-------------------|
| As I look back on my life, I am fairly well satisfied | 63% | 32% | 4% | 3% |
| As I grow older, things seem better than I thought they would be | 41% | 38% | 13% | 8% |
| These are the best years of my life | 29% | 31% | 24% | 16% |

Having a meaningful, vital life

| “For you personally, how important is...” | Very important | Somewhat important | Somewhat unimportant | Not at all important |
|---|----------------|--------------------|----------------------|----------------------|
| Having close relationships with friends and family at this time in life | 89% | 10% | 1% | <1% |
| Taking care of your health | 93% | 6% | <1% | <1% |
| Having a rich spiritual life | 82% | 14% | 2% | 2% |
| Being involved in your community | 45% | 42% | 9% | 4% |
| Recreation and leisure activities | 56% | 37% | 5% | 2% |
| Having new learning experiences | 60% | 33% | 5% | 2% |
| Having a job | 37% | 21% | 21% | 20% |
| Having opportunities to volunteer | 39% | 40% | 12% | 9% |

Physical health

Texans who reach the age of 60 have an excellent chance of living to 80 or beyond. Whether the added years are meaningful and productive often depends on health status.

When asked to rate their overall health, the majority of survey respondents report being in good health.

| "In general, would you say your overall health is..." | Percent of respondents |
|---|------------------------|
| Excellent | 15% |
| Very good | 32% |
| Good | 23% |
| Fair | 21% |
| Poor | 10% |

Differences in the prevalence, incidence, mortality, or burden of disease within minority populations reduces the state's ability to age well.⁵ When asked to rate their physical health, 45 percent of minority populations in the survey rated their health as poor, compared to only 24 percent of whites.⁶

Older adults experience a higher prevalence of chronic health conditions.

| "Have you ever been told by a doctor that you have..." | Percent of respondents |
|--|------------------------|
| Arthritis/rheumatism | 55% |
| Hypertension | 42% |
| Blindness/cataract | 33% |
| Cardiovascular disease | 23% |
| Diabetes | 21% |
| Lung/breathing problems | 19% |
| Cancer | 15% |
| Stroke | 11% |

In national surveys, almost 20 percent of all adults report having two or more chronic conditions, yet the proportion is significantly higher among those age 65 and older. Adults with multiple conditions are more likely to report spending more time in bed sick, missing work, and generally accomplishing less than they would like to.⁷

| Number of chronic conditions | Percent of respondents |
|------------------------------|------------------------|
| None | 15% |
| One | 24% |
| Two | 25% |
| Three or more | 37% |

Survey data indicate that poor physical health kept 29 percent of older Texans from performing their daily activities, work, or recreation for one day or more in the last month and 12 percent reported difficulty performing one or more daily activity (e.g., driving, walking, bathing, eating, dressing, getting around inside home) due to a chronic condition.⁸

Healthy lifestyles

Healthy lifestyle behaviors such as smoking cessation, maintaining a healthy weight, physical activity, proper nutrition, immunizations, and appropriate screening practices are important components of healthy aging.⁹

Smoking

Smoking remains the number one cause of preventable death in the United States. Twelve percent of older adult respondents in the Texas survey smoked.¹⁰ Despite an overall lower prevalence of smoking among older adults compared to younger adults, older smokers are at greater risk because they have smoked longer, tend to smoke more, and are more likely to suffer from smoking-related illnesses.¹¹

Participation in physical activity

Recent studies show that poor diet and physical inactivity may soon surpass tobacco as the leading preventable cause of death.¹² Physical activity can lower the risk of chronic diseases such as cardiovascular disease, hypertension, certain types of cancer, diabetes, and osteoporosis. For those with a chronic condition, physical activity can reduce symptoms such as pain and fatigue; it also improves sleep, reduces depression, and improves cognitive function.¹³ Exercise can also increase strength and balance, which helps prevent falls and maintain independent living.¹⁴

A total of 59 percent of survey respondents reported participating in physical activities or exercises in the past month – such as running, calisthenics, golf, gardening, or walking – in which the heart rate was elevated for 30 minutes or more. Of those who were physically active in the past month, the frequency of activity was as follows:

| Frequency of participation in physical activity | Percent of respondents |
|---|------------------------|
| Every day | 37% |
| 3-5 times a week | 51% |
| 3-5 times a month | 12% |
| Once a month or less | 1% |

Nutrition

Proper nutrition lowers the risk for many chronic diseases, including heart disease, stroke, some types of cancer, diabetes, and osteoporosis.¹⁵ The majority of older adults do not meet the recommendations for a healthy diet that include at least five servings of fruit and vegetables a day.

| Number of fruits and vegetables eaten each day | Percent of respondents |
|--|------------------------|
| One | 31% |
| Two | 33% |
| Three | 21.5% |
| Four | 5.5% |
| Five | 5% |
| More than five | 3% |
| Never eat fruits/ vegetables | 2% |

Obesity and weight management

Approximately two-thirds of older adults in the United States are overweight or obese. While obesity itself is not a chronic condition, it increases the risk for developing type 2 diabetes, heart disease, some forms of cancer, and other disabling medical conditions.¹⁶ Overweight and obesity-related diseases occur at higher rates in racial and ethnic-minority populations such as African-Americans and Hispanic-Americans, compared to other populations.¹⁷

| Body Mass Index (BMI) (calculated by height, weight) | Percent of respondents |
|--|------------------------|
| Underweight | 2% |
| Normal | 35% |
| Overweight | 38% |
| Obese | 25% |

Approximately 23 percent of survey respondents report being told by a doctor, nurse, or health professional in the past year to lose weight. Much of the death, disease and disability associated with obesity can be prevented with physical activity, promoting a better diet, and improved treatment through the healthcare system.

Mental health

Mental health encompasses a positive state of productive activities, fulfilling relationships with other people, and the ability to adapt to change and cope in the face of adversity.¹⁸

When asked to rate their overall mental health, the majority of survey respondents report being in good mental health.

| "In general, would you say your overall mental health is..." | Percent of respondents |
|--|------------------------|
| Excellent | 40% |
| Very good | 35% |
| Good | 16% |
| Fair | 7% |
| Poor | 2% |

While the majority of older Texans enjoy good mental health, national research indicates an estimated 22 percent of older adults in the community experience mental disorders that are not a part of normal aging.¹⁹ The highest rates — 50 percent or more — are found among older adults in institutional settings.²⁰ The most common mental-health problems among the older population are panic or anxiety disorders such as phobias and obsessive-compulsive disorder; severe cognitive impairment including Alzheimer's disease and other related dementias; and mood disorders such as depression.²¹

| "Have you ever been told by a doctor that you have..." | Percent of respondents |
|--|------------------------|
| Depression | 18% |
| Panic or anxiety disorder | 8% |
| Other mental health diagnosis | 2% |

Survey data indicate that 12 percent of older Texans were frequently (3 percent), sometimes (5 percent) or rarely (4 percent) unable to perform their daily activities for a period of two weeks or more due to feeling depressed, overwhelmed, or emotionally unable to function.

Substance use

National estimates for abuse of alcohol and legal drugs among older adults is 17 percent.²² Between 1995 and 1999, admissions to drug treatment centers increased 25 percent for men and 43 percent for women age 55 and older.²³ In Texas only 4 percent of respondents reported having ever attended a meeting of a self-help group such as Alcoholics Anonymous, or receiving education, treatment, or counseling for their use of alcohol or any drug (not counting cigarettes).

Alcohol consumption

Approximately 34 percent of survey respondents report drinking at least one alcoholic beverage (e.g., one can of beer, glass of wine, shot glass of hard liquor) in the past 30 days. Of those who drank alcohol each week (15 percent), 35 percent report having a drink every day of the week.

Accessibility of healthcare services

Pneumonia and influenza are among the leading causes of hospitalization and death among people over age 65.²⁴ While the Centers for Disease Control recommend annual influenza (flu) vaccinations for persons over age 65,²⁵ 69 percent of older Texans responding to the survey received a flu shot in the previous year.²⁶ Fifty-three percent of older Texans reported receiving a pneumococcal vaccine.²⁷

Increasing evidence supports the importance of screening and early detection in fighting chronic disease. Ninety percent of survey respondents say they have received a routine checkup during the previous year and 93 percent report receiving a blood pressure screening, cholesterol, or other cardiovascular assessment within the past year.

Availability of healthcare services

Texans are living longer and healthier lives, making availability, accessibility and affordability of health-care services of all types very important to their well-being.

In the past 12 months, 5 percent of survey respondents reported being unable to access health-care when they needed it. For those who could not access care, the primary barriers included:

| “Primary reason you could not get healthcare...” | Percent of respondents |
|--|------------------------|
| Couldn’t afford it | 86% |
| Provider’s office too far away | 5% |
| Provider’s business hours not convenient | 9% |

Approximately 2 percent reported being unable to access mental healthcare when they needed it. For those who could not access mental healthcare, the primary barriers included:

| “Primary reason you could not get mental healthcare...” | Percent of respondents |
|---|------------------------|
| Couldn’t afford it | 75% |
| Other reason | 25% |

Satisfaction with healthcare services

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|---|----------------|--------------------|-----------------------|-------------------|
| The quality of your current healthcare services | 50% | 35% | 8% | 7% |
| Your ability to obtain healthcare services | 54% | 30% | 8% | 9% |

Affordability and health insurance

Most older Texans have health insurance. The survey found that 72.6 percent of Texans age 60 to 64 have some type of health insurance. Even more (97 percent) of Texans age 65 and older have some type of health insurance. Individuals can have multiple sources of health insurance.

| “What type of health coverage helps pay for your needs... (all that apply)” | Percent of respondents |
|--|------------------------|
| Health insurance through employer | 13% |
| Health insurance through someone else’s employer | 6% |
| Health insurance through former employer | 14% |
| Medicare | 76% |
| Medicaid | 15% |
| Military, CHAMPUS, TriCare, or VA | 8% |
| Medicare Supplemental Insurance | 21% |
| Individual health insurance plan not associated with government or employer | 8% |
| Some other source | 14% |

A total of 60 percent of respondents say they do not know whom to contact for financial assistance or help paying for healthcare services if they needed it. Approximately 64 percent report not knowing whom to contact for financial assistance or help paying for mental health services.

Prescription drug coverage

Seventy percent of respondents say their insurance pays for at least part of their prescription drugs. In addition to insurance coverage, older Texans use the following sources to help obtain needed prescription drugs.

| “Do you have or have you done any of the following to help you obtain prescription drugs?” | Percent of respondents |
|---|------------------------|
| Discount cards available from prescription drug manufacturers (Together Rx card, the Orange Card, the Pfizer Share Card, or the LilyAnswers Card) | 12% |
| Completed an application for free drugs available from prescription drug manufacturers | 7% |
| Discount/reduced cost programs available from your pharmacy | 14% |
| Mail order or Internet from inside U.S. | 22% |
| Mail order or Internet from outside U.S. | 3% |
| Travel outside U.S. to obtain medications | 5% |
| Other | 5% |

**Survey completed prior to availability of Medicare Discount Cards*

Social engagement

The need for socialization and social contact is a critical factor in successful aging.²⁸ Older adults who engage in social activities are more likely to remain mentally and physically stimulated, thereby maintaining better overall health and quality of life.²⁹

Of those who responded to the survey, 26 percent reported loneliness a problem:

- 8 percent say loneliness is a major problem
- 18 percent say loneliness is a minor problem
- 74 percent say loneliness is not a problem at all

Research suggests that daily contact with a family member or friend may make the difference between living independently in the community and institutionalization.³⁰

Frequency of talking to family members, friends, or neighbors over the telephone:

| How often | Percent of respondents |
|-----------|------------------------|
| Daily | 74% |
| Weekly | 22% |
| Monthly | 4% |
| Yearly | <1% |
| Never | <1% |

Frequency of spending time with family members, friends, or neighbors face to face:

| How often | Percent of respondents |
|-----------|------------------------|
| Daily | 58% |
| Weekly | 35% |
| Monthly | 5% |
| Yearly | 1% |
| Never | 1% |

Older Texans frequently interact in the community by leaving their home to go to other locations. A small proportion (3 percent) reported not leaving their home in a typical week.

| How often do you go to other locations outside your house or property in a typical week. | Percent of respondents |
|--|------------------------|
| One time a week | 15% |
| Two to three times a week | 27% |
| Four to five times a week | 26% |
| Several times most days | 27% |
| Never | 3% |

The majority of older Texans are satisfied with their interactions with family and friends:

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|--|----------------|--------------------|-----------------------|-------------------|
| Interaction with friends, family, neighbors and others in your community | 50% | 35% | 8% | 7% |

Spirituality

Spirituality offers a belief system that integrates all aspects of personhood, such as compassion, respect for life and existence, and relationships with the self, others, and the community.³¹ Spirituality serves as a personal pursuit for understanding the meaning of life, regardless of religious affiliation.³² Spirituality facilitates successful aging and can provide a belief system that improves coping with adverse circumstances and a social support system through organized activities.

Older Texans report frequent participation in activities that are spiritually satisfying:

| How often | Percent of respondents |
|-----------|------------------------|
| Daily | 26% |
| Weekly | 53% |
| Monthly | 7% |
| Yearly | 4% |
| Never | 11% |

The majority of older Texans feel that having a rich spiritual life is important to having a meaningful and vital life.

| “How important is ...” | Very important | Somewhat important | Somewhat unimportant | Very unimportant |
|------------------------------|----------------|--------------------|----------------------|------------------|
| Having a rich spiritual life | 82% | 14% | 2% | 2% |

The majority of older Texans are satisfied with their personal spirituality:

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|----------------------------------|----------------|--------------------|-----------------------|-------------------|
| Your personal spirituality | 73% | 24% | 2% | 1% |

Financial preparedness

The economic well-being of older adults has improved over the past century. Various income sources – Social Security, pension plans, personal savings, and employment earnings – affect whether an older person will have an economically secure future.

When asked to identify all their sources of income, respondents reported as follows:

| Income sources (all that apply) | Percent of respondents |
|---|---------------------------|
| Employment | 25% |
| Employer pensions | 40% |
| Social Security disability | 13% |
| Social Security retirement | 70% |
| Personal savings (stocks, IRA, 401(k), bonds) | 54% |
| Supplemental Security Income | 8% |
| Veterans benefits | 10% |
| Cash assistance TANF/AFDC | 1% |
| Food stamps | 7% |
| Some other source (workers' comp, rental income, unemployment income, other) | 13% |

When asked which type of income was their biggest resource, they replied:

| Biggest resource | Percent |
|----------------------------|---------|
| Social Security retirement | 44% |
| Employer pensions | 16% |
| Employment | 10% |
| Personal savings | 8% |
| Social Security disability | 7% |
| Veterans benefits | 3% |
| SSI | 2% |

Approximately 11 percent of older Texans receive their income from other sources not mentioned in this survey.

Some older Texans may need help managing their income. Ten percent of older Texans reported having difficulty managing their bills, specifically in organizing and preparing bills (not in having the financial resources to pay them).

Retirement income sources must be properly planned and adequately managed. Approximately 61 percent of older Texans report knowing where to go if they needed assistance with financial planning. Thirty-three percent of older Texans have ever discussed financial planning needs with a financial advisor.

Some older Texans have taken steps to plan for their financial future by obtaining insurance policies or anticipating large expenses such as funeral costs.

| Have you done any of the following? | Percent of respondents |
|---|------------------------|
| Obtained life insurance | 64% |
| Obtained long-term care insurance | 21% |
| Taken action to plan for funeral expenses | 50% |

Overall, older Texans report feeling very or somewhat prepared for their future financial needs.

| | Very prepared | Somewhat prepared | Somewhat unprepared | Very unprepared |
|---|---------------|-------------------|---------------------|-----------------|
| “How prepared do you feel to meet your future financial needs?” | 38% | 42% | 10% | 9% |

Legal preparedness

Older adults and their families are sometimes unprepared for the difficult and distressing decisions that must be made later in life. There are various ways older adults can plan for the future to ensure that their values, wishes, and choices are known and respected. A will, living trust or other document specifies how property will be distributed in case of death. A durable power of attorney allows a specified person to manage personal or financial matters in case of incapacity. A healthcare power of attorney and other advance planning documents provide direction for end-of-life healthcare.

| Do you have any of the following? | Percent of respondents |
|---|------------------------|
| A will | 69% |
| Another way to distribute belongings after death (living trust, joint ownership) | 27% |
| Any other document that would allow others to make personal or financial decisions on your behalf if you were unable to do so (durable power of attorney) | 49% |
| Any other document that would allow others to make health decisions on your behalf if you were unable to do so (healthcare power of attorney) | 49% |

If assistance was needed with any legal matter, more than 80 percent say they know where to go for help.

Overall, older Texans report feeling very or somewhat prepared for their future financial needs.

| | Very prepared | Somewhat prepared | Somewhat unprepared | Very unprepared |
|---|---------------|-------------------|---------------------|-----------------|
| “How prepared do you feel to meet your future legal needs?” | 38% | 42% | 10% | 9% |

Employment

Older workers will become increasingly important to the labor market. Given that labor force growth is slowing and Americans are enjoying longer and healthier lives, efforts to encourage people to work longer could have important benefits both for individuals and for the national economy.³³

Employment status

Nearly a quarter of the older Texans surveyed indicated they were working full or part time.

| Current employment status | Percent of respondents |
|-----------------------------|------------------------|
| Employed | 15% |
| Unemployed | 5% |
| Retired, not working at all | 64% |
| Retired, working full-time | 1% |
| Retired, working part-time | 8% |
| Homemaker | 6% |

Of the respondents who are not working, 10.4 percent said they are currently looking or plan to look for a job in the future.

There are various reasons why older people choose to continue working:

| Major factor in decision to work now or to look for work | Percent of respondents |
|--|------------------------|
| Needed income | 39% |
| Enjoy the job/enjoy working | 25% |
| Being productive is a way I can help others | 6% |
| It makes me feel useful | 6% |
| To save for retirement | 3% |
| Need to maintain health insurance | 3% |
| Need to support other family members | 2% |
| People have an obligation to work if they can | <1% |
| Need to pay for health costs for self and family | <1% |
| To fulfill pension requirements/qualify for pension | <1% |
| Other reason | 16 % |

When the job task and compensation do not match the individual skill and experience level, older workers are underemployed. Approximately 83 percent feel their current employment adequately uses their skills and capabilities. Almost two-thirds (65 percent) report feeling they are paid at their corresponding skill level, and 68 percent report earning enough money from their primary job to meet basic financial needs.

The majority of older Texans are satisfied with their current employment status:

| How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|---------------------------------|----------------|--------------------|-----------------------|-------------------|
| Your current employment status | 67% | 20% | 7% | 6% |

Job training and employment services

Older Texans were asked if they were aware of any job training and employment services or if they had ever used such services to obtain employment. While some have previously used such services, many were unaware of their availability.

| | Aware of, but have not used | Have used this service | Not aware of this service |
|---|-----------------------------|------------------------|---------------------------|
| Programs to increase current skill level or to obtain a new skill for employment | 34% | 7% | 59% |
| Places in your community where you can go to receive help getting a job (resume, interview skills, job listing) | 44% | 12% | 44% |

Volunteerism

While the “retirement” years are traditionally viewed as a time for recreation and leisure, they also offer the opportunity to actively engage in the community. Volunteerism provides opportunities for individuals to be productive, while serving to strengthen and improve communities.

Volunteerism is typically unpaid service and may range from participation in formal programs (e.g., Foster Grandparents) to informal activity such as providing a ride for a neighbor. A total of 22 percent of older Texans report participation in an organized volunteer program run by a group or organization. Approximately 38 percent are not currently serving as formal volunteers, but have volunteered for such groups and organizations in the past. A total of 39 percent report never volunteering in these settings.

Approximately 33 percent of older Texans report performing volunteer work and helping others on a regular basis without being a member of an organized volunteer program run by a group or organization. Approximately 29 percent do not currently provide unpaid assistance to others, but have in the past. A total of 38 percent report never volunteering in this capacity.

Current volunteers

Current volunteers participate in a variety of activities and services that include:

| Primary type of volunteer activity or service you currently perform | Percent of respondents |
|---|------------------------|
| Provide a service directly to individuals | 62% |
| Clerical services | 3% |
| Professional services | 7% |
| Other | 28% |

Some older volunteers in Texas have only been participating in activities for a few years, while almost one-third are veteran volunteers who report serving for more than 20 years.

| How long have you been volunteering? | Percent of respondents |
|--------------------------------------|------------------------|
| Less than 6 months | 6% |
| Less than 1 year | 5% |
| 1 to 5 years | 33% |
| 6 to 10 years | 14% |
| 11 to 20 years | 8% |
| More than 20 years | 33% |

Older volunteers in Texas vary with respect to the amount of time they spend in volunteer activities and programs:

| Approximately how many hours do you volunteer each month? | Percent of respondents |
|---|------------------------|
| Less than 5 hours | 25% |
| 5 to 10 hours | 35% |
| 10 to 20 hours | 19% |
| 20 to 40 hours | 12% |
| More than 40 hours | 9% |

There are several reasons that lead people to volunteer their time in the community. Almost half of older volunteers in Texas report the desire to help others. Other influences on the decision to become a volunteer include:

| What was the primary influence on your decision to become a volunteer (choose one) | Percent of respondents |
|--|------------------------|
| I just want to help people | 48% |
| Someone asked me | 10% |
| I wanted to put my knowledge and skills to good use in my community | 7% |
| It helps me feel needed | 5% |
| I wanted to contribute to the solution of a particular social, health, or cultural problem | 3% |
| I was looking for something to do | 3% |
| Other | 23% |

Current volunteers become aware of opportunities from a variety of sources. A majority learns of volunteer opportunities from friends, or actively seek activities to participate in organizations that they have a personal interest or connection with. For example, some may choose to volunteer and help others through specific organizations (e.g., Alzheimer’s Association) after personal experience (e.g., loved ones who have lived with the disease).

| How did you first become aware of the volunteer opportunity to participate in? (choose one) | Percent of respondents |
|---|------------------------|
| Word-of-mouth; friend | 73% |
| Sought out a volunteer opportunity at specific organization I was interested in | 17% |
| Formal presentation | 5% |
| Advertisement | 5% |
| Mail | <1% |

Previous volunteers

People stop volunteering for a number of reasons. Among the one-third of older Texans who are not currently volunteers, but who have volunteered in the past, personal health and time commitments were the primary reasons for termination of activity. Other influences on the decision to stop volunteering include:

| What was the primary reason you stopped volunteering? (choose one) | Percent of respondents |
|---|------------------------|
| Personal health | 28% |
| Personal age | 15% |
| Time investment required | 10% |
| Travel related issues (distance, traffic) | 6% |
| Unhappy with management of volunteer program | 2% |
| Disappointed with the volunteer assignment | 1% |
| Other | 37% |

Not a volunteer

There are several reasons that people may not be interested in volunteering. Among the almost 40 percent of older Texans who report not volunteering in organized activities, or helping on an informal basis, personal health and time commitments were the primary reasons for not participating in volunteer activities. Other influences on the choice not to volunteer include:

| What was the primary reason you choose not to volunteer? (choose one) | Percent of respondents |
|--|------------------------|
| Personal health | 22% |
| Do not feel inclined to give my time | 15% |
| Travel related issues (distance, traffic, lack of transportation) | 12% |
| Personal age | 7% |
| Lack of volunteer options I am interested in | 4% |
| Out-of- pocket costs | 2% |
| Orientation and training requirements | <1% |
| Other | 37% |

Approximately 26 percent of non-volunteers would be interested in becoming a volunteer at some point in the future.

When the time came, respondents feel they would know how to get involved. More than two-thirds (69 percent) of non-volunteers report knowing how to find out about volunteer opportunities when they were ready to participate.

Education

Learning is a continual lifelong process that plays a role in keeping mentally active, obtaining new job skills, and promoting personal development.

More than three-quarters of survey respondents had obtained education through high school or higher:

| Highest level completed | Percent of respondents |
|---|------------------------|
| Less than high school | 11% |
| Some high school | 12% |
| High school diploma/GED | 35% |
| Two-year college degree | 12% |
| Four-year college degree | 15% |
| Technical college/certification/licensure | 4% |
| Master's degree | 8% |
| Doctoral degree | 3% |

The majority of older Texans are satisfied with their current level of education:

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|----------------------------------|----------------|--------------------|-----------------------|-------------------|
| Current level of education | 67% | 20% | 7% | 6% |

The education level of the older population, however, is expected to increase in the coming decades as well-educated baby boomers reach older age.³⁴

Current participation

Many opportunities for lifelong learning are available to older adults. Older Texans can participate in formal programs (e.g., degree programs, certification and licensure courses), or informal educational activities (e.g., skill-based, personal enrichment). Such educational opportunities may be available through institutions of higher education, Elderhostels, Lifelong Learning Institutes, adult education providers, public libraries, community and senior centers, and the Internet.

Approximately 8 percent of older Texans currently participate in education classes or formal programs. An additional 9 percent are not currently enrolled but plan to seek education in the near future.

The majority of older Texans seek education for personal growth or recreation. However, there are those seeking degrees, licensure, or skills needed for employment.

| Reason for participating in education | Percent of respondents |
|--|------------------------|
| Personal growth | 51% |
| Recreation/entertainment | 12% |
| Degree seeking | 1% |
| Licensure or certification | 7% |
| Obtain skills needed for employment (other than degree, license, or certification) | 4% |
| Other | 25% |

Those who participate in education programs do so in a variety of settings:

| Way you access education | Percent of respondents |
|---|------------------------|
| Internet/distance learning | 17% |
| University or community college campus (formal or informal program) | 35% |
| Community and/or senior center | 9% |
| Public library | 2% |
| Parks and recreation department | 1% |
| Other | 35% |

Those who do not participate in education classes or programs cite the following barriers:

| Reason not participating in education | Percent of respondents |
|---------------------------------------|------------------------|
| Convenience (travel and time) | 12% |
| Costs | 3% |
| Personal reasons | 7% |
| Not interested | 25% |
| Personal health | 19% |
| Personal age | 15% |
| Other | 19% |

Affordability

The cost of participating in formal education programs (e.g., college courses) can be a barrier for some who are interested in receiving additional education. Texas law allows state-supported institutions of higher education to offer courses to older adults free or at a reduced rate.³⁵ Implementation of these programs, however, is left to the discretion of each institution.

A limited number of older adults are enrolled in tuition waiver/discount programs available through state-supported institutions of higher education. Twenty-seven percent of survey respondents were aware of tuition discounts and waivers available to them.

Students in educational programs may also be eligible to receive a Lifetime Learning Credit, a federal income tax credit for the costs incurred in higher education. Sixteen percent of older Texans were aware of this benefit.

Recreation

Recreation refers to participation in hobbies or other activities of interest and is an important part of aging well. Recreation and leisure allow for social engagement by creating a common bond of interest that facilitates social interaction among participants.³⁶

Almost three-quarters (74 percent) of older Texans report having a recreational interest or hobby that is important in their life. Of those who were involved in recreation and leisure activities, the frequency of activity was as follows:

| Frequency of participation in recreational activities | Percent of respondents |
|---|------------------------|
| Several times a week | 43% |
| Once a week | 17% |
| 2-3 times a month | 11% |
| Once a month | 9% |
| Less than once a month | 5% |
| Never | 15% |

The majority of older Texans are satisfied with their current level of recreational and leisure activities:

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|---|----------------|--------------------|-----------------------|-------------------|
| Your current level of recreation and leisure activities | 52% | 35% | 9% | 4% |

Barriers to participation in recreation and leisure include limited information and access to opportunities available in their communities. Approximately 29 percent of older Texans report not knowing where to go if they wanted to participate in new or different recreational activities.

Community supports

Community support is essential in allowing people get quality services and supports in a manner consistent with their community living preferences.

Most older Texans feel they have the supports and services they need to help them live independently in their community:

| | Strongly agree | Somewhat agree | Somewhat disagree | Strongly disagree |
|---|----------------|----------------|-------------------|-------------------|
| I feel I have the supports and services that I need to help me live on my own in my community | 62% | 27% | 7% | 5% |

In Texas, 28 area agencies on aging (AAA) plan, coordinate, and advocate for a comprehensive service-delivery system addressing older Texans’ short and long-term needs. Only 33 percent of older Texans have heard about Area Agency on Aging programs.

The 2-1-1 system was designed to provide consumers a simple, easy-to-remember number to call when they need help accessing health and human services. At the time of the survey, 8 percent of older Texans were aware of the 2-1-1 service; however, the survey was conducted before a major publicity campaign to increase awareness of 2-1-1.

Fifty percent of survey respondents stated they were aware of specific organizations in their community to assist with daily living needs. Only 4 percent had every attempted to obtain direct assistance from a support service that would help them live on their own in the community.

For those 4 percent who actively sought assistance and support from the community, the first attempt was made to:

| Organization | Percent of respondents |
|---------------------------|------------------------|
| State agency | 21% |
| County or city government | 16% |
| Private pay provider | 11% |
| Area Agency on Aging | 5% |
| Non-profit provider | 5% |
| Other source not listed | 42% |

More than 80 percent of those who needed help were generally satisfied with their ability to obtain assistance and support; however, one-fifth were very dissatisfied.

| How satisfied are you with | Very satisfied | Somewhat satisfied | Very dissatisfied |
|----------------------------|----------------|--------------------|-------------------|
| Your ability to get help | 48% | 33% | 19% |

Transportation

Transportation is an essential component of the community infrastructure that helps people gain access to goods, services, and social contacts that support their daily activities and quality of life.

Approximately 77 percent report driving a vehicle as their primary method of transportation.³⁷

| “When you need to get somewhere, how do you usually get there?” | Percent of respondents |
|---|------------------------|
| Drive self | 77% |
| Get ride with family or friends | 18% |
| Use public transportation | 2% |
| Walk | <1% |
| Take taxi | <1% |
| Use senior or community vans (e.g., dial a ride, not transportation for people with disabilities) | <1% |
| Take transportation provided to people with disabilities who cannot use or get to a public transportation source | <1% |
| Other | 1% |

Overall, the majority of older Texans are satisfied with their ability to get around town:

| “How satisfied are you with ...” | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|---|----------------|--------------------|-----------------------|-------------------|
| Your ability to get around town either by driving or other means of transportation? | 72% | 18% | 6% | 4% |

Availability

Approximately 23 percent of adults age 60 and older do not drive.³⁸ The Texas Department of Aging and Disability Services, in conjunction with area agencies on aging (AAAs), and community-based organizations, help many older people obtain transportation.

Lack of transportation can have an impact on overall quality of life. Compared with drivers, elderly non-drivers make 15 percent fewer doctor visits, 59 percent fewer trips for shopping and dining and 65 percent fewer trips for social, family and religious activities.³⁹

Non-drivers sometimes cannot get where they need to go:

| | Frequently | Sometimes | Rarely | Never |
|---|------------|-----------|--------|-------|
| How often have you been unable to go somewhere (e.g., cancel an appointment, not meet an obligation) because you did not have transportation? | 15% | 20% | 21% | 44% |

For those who rely on alternative transportation services (e.g., rides with others, public transit systems), a common barrier is the amount of time it takes to travel between destinations. Approximately 14 percent of non-drivers report they are unable to get a ride where they needed to go in a reasonable amount of time.

If they needed assistance in getting somewhere, about half (56 percent) of non-drivers report knowing where to go for help with transportation and mobility.

Affordability

For non-drivers, the cost of obtaining transportation services can be a primary barrier in getting where they need to go. Older Texans described the cost of transportation as somewhat (5 percent) or very (16 percent) unaffordable.

Even among drivers, the cost of operating a car can be a problem:

| | Large problem | Moderate problem | Small problem | No problem |
|--|---------------|------------------|---------------|------------|
| Would you say that the cost of operating a car is a problem for you? | 14% | 20% | 20% | 46% |

Housing

Older adults strongly prefer to age in place in their communities. Affordable, accessible, and integrated housing helps older people maintain their independence.

More than 80 percent of older Texans own their own home:

| Do you rent or own your current residence? | Percent of respondents |
|--|------------------------|
| Own; mortgage paid/do not make payments | 60% |
| Own-still make mortgage payments | 21% |
| Rent | 16% |
| Rent-free situation | 3% |

Affordability

High cost is a problem for the 30 percent of elderly households in the United States who pay more than 30 percent of their income for shelter.⁴⁰ Among older Texans, more than half (55 percent) report spending one-third or more of their income on housing costs that include rent/mortgage, housing insurance, utilities, taxes, and other household related expenses combined.

- 45 percent spend less than one-third of income on housing costs
- 36 percent spend one-third to one-half of income on housing costs
- 19 percent spend less more than half of income on housing costs

Less than half (46 percent) of older Texans report knowing where to go if they needed help with any housing related expenses.

Property taxes are a financial burden on older adults. Texas communities have special homestead exemptions that ease the burden of property taxes. Current state law provides for the freezing of school taxes on the homesteads of older Texans 65 and older and provides local option for freeing taxes of other jurisdictions. The survey found that 79 percent of older Texans are aware of such property tax exemptions for people age 65 and older.

Adequacy

The adequacy and condition of housing facilitates aging-in-place. Yet, some older adults live in homes, both rental and owner-occupied, that are in substandard condition and require repair and rehabilitation.

Approximately 14 percent of older Texans report that their home's structural, heating and cooling, electrical or plumbing systems need substantial repair. Twenty-six percent of older Texans do not know where to go for help in making these types of home repairs.

Accessibility

Accessibility improvements refer to architectural design elements that make it easier and safer to carry out daily activities (e.g., accessible entrances, doors, light switches, cabinets) and home modifications that include adaptations designed to accommodate physical impairments (e.g., handrails, grab bars, ramps, elevators, stair lifts, call devices).

| Does your home have any of the following? (check all that apply) | Percent of respondents |
|---|------------------------|
| Accessible entrance (no-step or ramp, wide door) | 62% |
| Accessible interior walkway (wide interior doorways, wide hallways) | 66% |
| Light and electrical switches and thermostats low enough to be reached from a seated position | 80% |
| Kitchen layout with open/wide floor space, low cabinets and sinks, removable cabinets beneath sinks to allow open space under counters | 61% |
| Bathroom layout with open/wide area to right and left of toilet, shower spray units, grab bars, low cabinets and sinks, removable cabinets beneath sinks to allow open space under counters | 49% |
| Features that would accommodate visual or hearing impairments (alarms, displays) | 29% |

Housing accessibility helps to facilitate aging-in-place. Yet, some older adults do not have the accessible home features they need to live safely and comfortably on their own.

The survey found that 12.3 percent of Texans age 60 and older report that their home's doorways, hallways, kitchen, bathrooms, and closets need substantial modification to make it easier to get around inside.⁴¹ Thirty-nine percent of older Texans do not know where to go for help in making these types of home modifications.

Caregiving

Caregivers provide much of the support to people who want to remain in their homes, but need help with daily activities such as bathing, dressing, taking medications, preparing meals, shopping, or transportation. Caregivers also provide resources such as time, money, and/or shared residential spaces that help older people age in place.⁴² According to a recent survey, more than one-quarter of the adult population has provided some type of caregiving in the past year.⁴³

According to survey, 16 percent of older Texans are currently providing care to family member or friend over the age of 60, a child 18 years of age or younger, or both.⁴⁴ Specifically,

- 10 percent are caregivers to a person over age 60
- 4 percent are primary caregivers to relative children age 18 or younger
- 1.4 percent are caring for both persons over age 60 and relative children under age 18

The majority of survey respondents rate themselves as being good caregivers.

| "In general, would you say that as a caregiver you are..." | Percent of respondents |
|--|------------------------|
| Excellent | 32% |
| Very good | 34% |
| Good | 27% |
| Fair | 6% |
| Poor | <1% |

Family caregivers

Family caregivers of a person over age 60 are defined as those who are providing unpaid care to a relative or friend to help them take care of themselves, which may include helping with personal needs, household chores, or finances. The care recipient does not always live with the caregiver.

Of the 10 percent who are caring for a person over the age of 60, the majority are spouses or family members:

| Relationship to you... | Percent of respondents |
|------------------------|------------------------|
| Spouse | 37% |
| Family member | 47% |
| Friend | 5% |
| Other | 11% |

Some caregivers in Texas have only been providing care for a few years, while almost one-quarter report being a caregiver for more than 10 years.

| How long have you been providing care for this person? | Percent of respondents |
|--|------------------------|
| Less than 1 year | 15% |
| 1 to 5 years | 42% |
| 5 to 10 years | 17% |
| More than 10 years | 25% |

Almost one-third of caregivers are providing full-time care (more than 40 hours each week):

| Approximately how much time each week do you spend providing care for this person? | Percent of respondents |
|--|------------------------|
| 0 to 8 hours | 36% |
| 9 to 20 hours | 21% |
| 21 to 40 hours | 11% |
| 41 hours or more | 32% |

The majority (57 percent) of care is provided inside the caregiver’s own home.

Geographic proximity can be a primary factor for many caregivers and care recipients. For the 43 percent of caregivers who provide care outside their home, the majority travel within 15 miles of their current residence. Approximately 5 percent are traveling distances greater than 50 miles to provide care.

| How far do you have to travel to provide care for this person? | Percent of respondents |
|--|------------------------|
| 0-15 miles | 73% |
| 16-50 miles | 21% |
| More than 50 miles | 5% |

Formal supports

Among people needing help with daily activities, 65 percent depend solely on family and friends and an additional 30 percent supplement family care with services from paid providers.⁴⁵ Among Texas caregivers, approximately 16 percent report paying someone else to help care for their family member or friend. Among those who pay for services, 20 percent report that the cost is unaffordable to them.

| Would you say the amount you have to pay for services is affordable to you? | Percent of respondents |
|---|------------------------|
| Very affordable | 50% |
| Slightly affordable | 30% |
| Slightly unaffordable | 10% |
| Very unaffordable | 10% |

Informal supports

Only 5 percent of Texas caregivers receive payments for the care they provide. In 1997, unpaid caregivers provided care worth an estimated \$196 billion nationally.⁴⁶

Factors such as education and awareness of available support impact the caregiver’s utilization of supportive services. Approximately 56 percent of Texas caregivers report being aware of free informational services provided through the area agency on aging, such as information on respite care, referrals to doctors, nursing homes, support groups, and other caregiving tips and advice. Nineteen percent report ever using caregiving resources offered through the Area Agency on Aging.

The most common reasons cited for not using available resources were not wanting to ask for help or not knowing how to find resources.

| “What is the primary reason you have not used any caregiver resources?” (choose one) | Percent of respondents |
|---|------------------------|
| Myself and/or care recipient are not interested, or are embarrassed to get assistance from others | 14% |
| Don’t know how to find caregiver resources | 14% |
| Myself and/or care recipient is not open to non-family, paid caregivers | 5% |
| I do not know what type of service I need | 4% |
| Service/support I need is not available in my community | 3% |
| I am too busy—schedule not convenient | 3% |
| Other | 57% |

Grandparents raising grandchildren

A growing number of people over age 60 are becoming primary caregivers to grandchildren or other relative children. It is estimated that 448,439 children (7.6 percent of children in Texas) live in grandparent-headed households.⁴⁷ These family caregivers, often called “kinship caregivers,” become surrogate parents as a result of divorce, crime, child abuse and neglect, the rise in single-parent households, illness, or substance abuse among the middle generation.⁴⁸

Of the 5 percent of older Texans who are caring for a relative child under the age of 18, the majority have no legal designation or custody other than relative status:

| Are you... | Percent of respondents |
|---|------------------------|
| Relative/grandparent with primary responsibility for child (no legal designation) | 60% |
| Legal guardian | 33% |
| Custodial designee | 7% |

Some kinship caregivers have been providing care for only a few years, while more than one-third report being a caregiver for more than 10 years.

| How long have you been providing care for this person? | Percent of respondents |
|--|------------------------|
| Less than 1 year | 7% |
| 1 to 5 years | 40% |
| 5 to 10 years | 17% |
| More than 10 years | 37% |

Among kinship caregivers, 8 percent pay someone else to help care for their relative child. Among those who pay for services, only a small percentage report the cost as being very affordable. A total of 20 percent report that the cost is unaffordable to them.

| Would you say the amount you have to pay for services is affordable to you? | Percent of respondents |
|---|------------------------|
| Very affordable | 20% |
| Slightly affordable | 60% |
| Slightly unaffordable | 20% |

A total of 14 percent of kinship caregivers in Texas report receiving payments for the care they provide.

Grandparents often lack information about the range of support services, benefits, and policies needed to fulfill their caregiving role. Approximately 39 percent of kinship caregivers report being aware of free informational services provided through the area agency on aging for caregivers of relative children, such as information on education, healthcare, financial assistance, child care, support groups, and other caregiver tips and advice.

The most common reason kinship caregivers cited for not using available resources was not knowing how to find caregiver resources in their community. Other common reasons include:

| “What is the primary reason you have not used any caregiver resources?” (choose one) | Percent of respondents |
|---|------------------------|
| I do not know how to find caregiver resources | 22% |
| I do not know what type of service I need | 9% |
| I am too busy—schedule not convenient | 7% |
| Myself and/or relative child are not interested, or are embarrassed to get assistance from others | 4% |
| I do not want assistance from non-family, paid caregiver | 6% |
| Other | 52% |

Employed caregivers

A total of 36 percent of Texas caregivers are employed either full-time (22 percent) or part-time (14 percent). Since many working caregivers take leaves of absence or stop working temporarily or permanently to care for a loved one, caregiving affects worker productivity, employee turnover, absenteeism, and early retirement.⁴⁹ Estimates show that an employee can lose as much as \$660,000 in lost income, pensions, wages, and Social Security throughout their career.⁵⁰

Employed caregivers have made the following adjustments to their job because of caregiving responsibilities:

| Have you ever done any of the following at your job because of your caregiving responsibilities? (choose one) | Percent of respondents |
|--|------------------------|
| Give up work entirely or take early retirement | 10% |
| Give up work temporarily or take a leave of absence | 21% |
| Go from full-time to part-time work | 11% |
| Turn down a promotion | 7% |
| Make changes in daily work schedule (time off, adjusted hours, take vacation time) | 43% |

Conclusion

Responses to the questionnaire provide meaningful insight into how older Texans are aging. In terms of health, many older Texans appear to be motivated to maintain good physical health; about half exercise at least three times a week. However, most older Texans have chronic conditions and weight problems to contend with. In addition, more than one-fourth of older Texans report having a mental health diagnosis.

The great majority of older Texans have some type of health insurance. Nevertheless, 5 percent of older Texans reported being unable to access healthcare when they needed it in the past year. The primary barrier to access was affordability.

The biggest source of income among older Texans is Social Security Retirement. More than half of the population has income from personal savings, but only 8 percent report personal savings as their biggest source of income. Most older Texans spend at least one-third of their income on housing costs.

While older Texans rely on Social Security Retirement for income, about 15 percent of older Texans are employed. Ten percent of those who are not working are currently looking or plan to look for a job.

Older Texans are planning for major life changes. Most have a will and nearly half have a document such as a healthcare power of attorney that would allow others to make health decisions on their behalf if they became incapacitated.

Even as they are planning for the future, older Texans are also trying to maintain their autonomy. Most feel that they have the supports and services they need to help them live independently in their community. However, only a third have heard about Area Agency on Aging programs.

In addition to focusing on their own futures, 16 percent of older Texans provide care to a family member or friend over 60 or to a child 18 years of age or younger, or both.

While maintaining health and finances are very important, so is maintaining connections with the community. More than one quarter of older Texans report that loneliness is a problem. About 60 percent report spending time with family, friends, or neighbors on a daily basis.

In addition to individual contacts, broader social relationships and memberships are important. Nearly 60 percent of older Texans either currently participate in organized volunteer programs or have in the past. Almost three-quarters of older Texans report having a recreational interest or hobby. About 8 percent of older Texans currently participate in education classes or formal programs. Finally, most older Texans say that a rich spiritual life is very important.

Transportation is necessary to obtain healthcare and maintain social relationships, and it is important to managing financial and legal affairs. Because of this, it is noteworthy that almost one quarter of older Texans do not currently drive.

One limitation to this study is that only older Texans living in communities participated. Responses from residents in institutions such as nursing facilities may differ substantially from the current responses. A second limitation is that only residents with telephones participated. Individuals without phone service may have lower socioeconomic status than other individuals. This may impact the responses. Care should be taken to be sensitive to areas that might be under- or over-estimated by excluding these portions of the population.

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