Indiana Family and Social Services Administration
2017

Report Highlights

CASOA™
Community Assessment Survey for Older Adults™

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Introduction

The Community Assessment Survey for Older Adults (CASOA™), administered by National Research Center, Inc., provides a statistically valid survey of the strengths and needs of older adults as reported by older adults themselves in communities across America. Used in conjunction with the CASOA Strategies and Resources Handbook (provided under separate cover), CASOA is intended to enable local governments, community-based organizations, the private sector and other community members to understand more thoroughly and predict more accurately the services and resources required to serve an aging population. With this report, Indiana Family and Social Services Administration (IFSSA) stakeholders can shape public policy, educate the public and assist communities and organizations in their efforts to sustain a high quality of life for older adults. The objectives of the CASOA are to:

- Identify community strengths in serving older adults
- Articulate the specific needs of older adults in the community
- Estimate contributions made by older adults to the community
- Determine the connection of older adults to the community

The results of this exploration will provide useful information for planning and resource development as well as strengthen advocacy efforts and stakeholder engagement. The ultimate goal of the assessment is to create empowered communities that support vibrant older adult populations.

The CASOA questionnaire contains many questions related to the life of older residents in the sixteen Area Agencies on Aging (AAA) within the State of Indiana:

- Northwest Indiana Community Action Corporation
- REAL Services, Inc.
- Aging and In-Home Services of Northeast Indiana (AIHS)
- Area IV Agency on Aging and Community Action Programs, Inc.
- Area Five Agency on Aging
- LifeStream Services, Inc. (Area 6)
- Area 7 Agency on Aging and Disabled/WCIEDD
- CICOA Aging and In-Home Solutions
- LifeStream Services, Inc. (Area 9)
- Area 10 Agency on Aging
- Thrive Alliance
- LifeTime Resources, Inc.
- Generations Vincennes University
- LifeSpan Resources, Inc.
- Hoosier Uplands
- SWIRCA & More

Survey participants were asked to rate their overall quality of life, as well as aspects of quality of life in Indiana. They also evaluated characteristics of the community and gave their perceptions of safety. The questionnaire assessed the individual needs of older residents and involvement by respondents in the civic and economic life of Indiana.

Study Methods

The CASOA survey and its administration are standardized to assure high quality survey methods and comparable results across communities. Participating households with residents 60 years or older were selected at random and the household member who responded was selected without bias. Multiple mailings gave each household more than one prompt to participate with a self-addressed and postage-paid
envelope to return the survey. Results were statistically weighted to reflect the proper demographic composition of older adults in the entire community.

The survey was mailed on September 14, 2017 to a random selection of 31,805 older adult households in Indiana. Older adult households were contacted three times about participation in the survey. A total of 4,766 completed surveys was obtained, providing an overall response rate of 16% and a margin of error of plus or minus 1% around any given percent and one points around any given average rating for the entire sample.

Since this was the second CASOA of Indiana older adults, the 2017 results are presented along with the 2013 ratings, when available. Differences between 2013 and 2017 can be considered “statistically significant” if they are two percentage points or greater than any given percent and one point or greater than any given average rating. Trend data for the AAA represent important comparisons and should be examined for improvements or declines.

For more methodological information, refer to the Report of Results, available under separate cover.
Each section discusses older adult ratings of the community, participation in activities and potential problems faced by older adults as related to each of the six dimensions. The final section of the report, Community Readiness, summarizes these dimensions as index scores and provides an overall picture of Indiana as a livable community for older adults.

**Figure 2: Community Dimensions Assessed through CASOA**

| Overall Community Quality | - Community as a place to live and retire  
| - Recommend community to others  
| - Residential stability |
| Community and Belonging | - Sense of community  
| - Overall safety  
| - Valuing older residents in community  
| - Crime victimization and abuse |
| Community Information | - Availability of information about older adult resources  
| - Financial or legal services |
| Productive Activities | - Civic engagement - volunteerism, voting, civic attentiveness  
| - Social engagement - social and religious activities  
| - Recreation - recreational activities, personal enrichment  
| - Caregiving - providing care for children or adults  
| - Economic contribution - the dollar value of activities |
| Health and Wellness | - Physical health - physical fitness, fitness opportunities, diet  
| - Mental health - emotional well being, quality of life, confusion  
| - Health care - health services, medications, oral and vision care  
| - Independent living - activities of daily living, hospitalizations |
| Community Design and Land Use | - Housing variety and availability  
| - Ease of travel by car, foot and bus  
| - Access to daily needs  
| - Overall quality of life |
Key Findings

Not all older adults complain, nor does every community leave older adults raving about the quality of community life or the services available for active living and aging in place. Communities that assist older adults to remain or become active community participants provide the requisite opportunities for recreation, transportation, culture, education, communication, social connection, spiritual enrichment and health care.

Further, older adults, more than others, face difficulties with aspects of everyday life. For many older adults these difficulties vastly exceed the minor physical pains or small losses of function that characterize almost everyone’s circumstances after a certain age. When individual problems are added together, a group picture emerges that provides a useful description of the entire community.

The results of this survey describe Indiana as a livable community for older adults within six community dimensions of Overall Community Quality, Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use. The extent to which older adults experience difficulties and problems within these dimensions is also described.

Overall Community Quality

Overall Community Quality explores how older residents view the community overall, how connected they feel to the community and how well they can access information and services offered by IFSSA, as well as how likely residents are to recommend and remain in the community.

- Over three-quarters of Indiana’s older residents gave high ratings to the community as a place to live.
- Services offered to older adults were considered “excellent” or “good” by about two in five of older residents.
- Most residents had lived in the area more than 20 years and almost 9 in 10 seniors planned to remain in the area throughout their retirement.
- Generally, residents rated these aspects of the community similar to or lower than the national average.

Community and Belonging

A “community” is often greater than the sum of its parts, and having a sense of community entails not only a sense of membership and belonging, but also feelings of emotional and physical safety, trust in the other members of the community and a shared history. Older residents rated several aspects of Community and Belonging, including their sense of community and overall feelings of safety, as well as the extent to which they felt accepted and valued by others.

- Almost two-thirds of respondents reported “excellent” or “good” overall feelings of safety and between 7% and 23% had experienced safety problems related to being a victim of crime, abuse or discrimination.
- The proportion of elders reporting problems with being the victim of fraud or a scam increased from 14% in 2013 to 20% in 2017.
- About half of older residents rated the sense of community as “excellent” or “good”; similar ratings were provided for neighborliness and valuing of older residents.
- When compared to other communities in the U.S., older residents in Indiana tended to assess aspects of the community lower than the national average and experienced problems at rates similar to the national average.
Community Information

The education of a large community of older adults is not simple, but when more residents are made aware of attractive, useful and well-designed programs, more residents will benefit from becoming participants.

- About half of survey respondents reported being “somewhat” or “very” informed about services and activities available to older adults, which was similar to reports from other communities in the U.S., but a slight drop from 2013 (56%) to 2017 (52%).
- One-third of older adults felt they had good information about resources for older adults and about two in five felt they had good financial or legal planning services.
- Almost two-thirds of respondents had problems knowing what services were available, which was similar to reports from other communities in the U.S., but a slight increase from 2013 (61%) to 2017 (64%).

Productive Activities

Productive activities such as traditional and non-traditional forms of work and maintenance of social ties combine with health and personal characteristics to promote quality of life in later life and contribute to active aging.² Productive Activities examined the extent of older adults’ engagement participation in social and leisure programs and their time spent attending or viewing civic meetings, volunteering or providing help to others.

- While elders rated the opportunities to participate in community matters higher in 2017 than in 2013, they attended or watched fewer local public meetings in 2017 than in 2013.
- About 1 in 10 used a senior center, which can often serve as a social hub for many seniors; its use by older residents was lower in 2017 than in 2013, yet similar to senior center use in other communities.
- Half seniors said that they had at least “minor” problems having interesting social events or activities to attend, which was similar to other communities.
- The majority of older residents (59%) rated the recreation opportunities in their communities as “excellent” or “good”; participation in recreational and personal enrichment activities tended to be lower in Indiana than in other communities.
- About three in five older residents in Indiana said they were caregivers and they averaged between 9 and 11 hours per week providing care for children, adults and older adults.
- Over one-quarter of older adults felt physically, emotionally or financially burdened by their caregiving.
- About 7 in 10 respondents were fully retired and just over one-third of all respondents experienced at least minor problems with having enough money to meet daily expenses.
- The value of paid (part- and full-time work) and unpaid (volunteering, providing care) contributions by older adults in Indiana totaled about $19 billion in a 12-month period.
Health and Wellness

Of all the attributes of aging, health poses the greatest risk and the biggest opportunity for communities to ensure the independence and contributions of their aging populations. Health and wellness, for the purposes of this study, included not only physical and mental health, but issues of independent living and health care.

- Most older residents rated their overall physical health as “excellent” or “good” with about one-third participating in healthy activities such as eating fruits and vegetables and exercising regularly. Survey respondents in Indiana engaged in these healthy activities less frequently than elders in other communities across the nation.
- The most common physical health problems, cited by about three in five respondents, included respondents’ own physical health, doing heavy or intense housework and staying physically fit. Seniors in Indiana experienced these problems at rates similar to the national averages, but reported more problems with maintaining a healthy diet in 2017 than in 2013.
- About 3 in 10 older residents felt there was “excellent” or “good” availability of mental health care in Indiana while 8 in 10 rated their overall mental health/emotional wellbeing as “excellent” or “good.”
- Elders in Indiana were more likely than their national peers to cite problems with feeling bored and experiencing confusion or forgetfulness.
- In Indiana, about three in five older residents rated the availability of preventive health services favorably which was similar to other communities.
- Older residents reported fewer problems with finding affordable health insurance in 2017 than in 2013 but more problems with having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid.
- One-quarter of respondents reported spending time in a hospital and one-third had fallen and injured themselves in the 12 months prior to the survey. Falls and hospitalizations in Indiana occurred at rates similar to the national average.
- Many older adults reported problems with aspects of independent living, including having problems with performing regular activities, including walking, eating and preparing meals (37%); no longer being able to drive (17%); or falling and injuring themselves in their homes (29%).

Community Design and Land Use

The movement in America towards designing more “livable” communities – those with mixed-use neighborhoods, higher-density development, increased connections, shared community spaces and more human-scale design – will become a necessity for communities to age successfully. Communities that have planned for older adults tend to emphasize access – a community design that facilitates movement and participation.

- Three-quarters of older residents rated their overall quality of life as “excellent” or “good”, though IFSSA’s quality of life was rated lower than other communities in the U.S.
- Most respondents rated the ease of getting to the places they usually have to visit (67%), ease of car travel (72%) and ease of walking (55%) as “excellent” or “good.” Ratings of these aspects of travel were similar to the national average.
- Some older adults experienced problems related to basic necessities of daily living including having safe and affordable transportation available (26%), having housing to suit their needs (19%) or having enough food to eat (14%). Daily living problems in Indiana were similar to other communities across the nation.
Community Readiness

Communities that assist older adults to remain or become active community participants provide the requisite opportunities for recreation, transportation, culture, education, communication, social connection, spiritual enrichment and health care. It is not a package mix, so each community must identify what its older adults seek and what the community provides. The judgments of the residents for whom community planning takes place provide the elements of an equation that describes overall community quality in Indiana (Figure 3).

The following section of this report summarizes how older residents view Indiana as a community that creates a thriving environment for its older adults within the six community dimensions of Overall Community Quality, Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use.

Further, older adults, more than others, face difficulties with aspects of everyday life. For many older adults these difficulties vastly exceed the minor physical pains or small losses of function that characterize almost everyone’s circumstances after a certain age. When individual problems are added together, a group picture emerges that provides a useful description of the entire community. Nationally, areas where older adults face the largest share of life’s challenges include caregiving, health and mental health, in-home support, nutrition and food security and transportation. This study also explored specific problems or stressors encountered by older adults in Indiana, such as physical and emotional difficulties and injuries that have compromised their independence. Within the five community dimensions of Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use, the magnitude of these individual-level needs is presented (Figure 5).
Opportunities and Challenges

Survey respondents were asked to rate a number of aspects of the community which were converted to an average scale of 0 (the lowest rating, e.g., “poor”) to 100 (the highest rating, e.g., “excellent”) and then combined to provide one overall rating (index1) for each of the six dimensions of Community Readiness. Summary scores provide a broad picture of the perceived fit between what IFSSA offered to older adults and what older residents needed:

- Older residents felt their needs were best met in the area of Overall Community Quality.
- Community Information was rated least favorably.
- Ratings of Community and Belonging, Community Information and Community Design and Land Use decreased slightly between 2013 and 2017 while Opportunities for Productive Activities increased slightly (see Figure 4).

Figure 3: Indiana Community Readiness Chart

1 These ratings are not to be understood like ratings from school tests. Because they are summaries of several questions that range from 0 as “poor,” 33 as “fair,” 66 as “good” and 100 as “excellent”, a score of 58, as one example, should be interpreted as closer to “good” than “fair” (with the midpoint of the scale, 50, representing equidistance between “good” and “fair”).
Figure 4: Indiana Community Readiness by Year

- Quality of Community Index: 2017 - 64, 2013 - 64
- Community and Belonging Index: 2017 - 49, 2013 - 50
- Community Information Index: 2017 - 42, 2013 - 43
- Opportunities for Productive Activities Index: 2017 - 54, 2013 - 53
- Health and Wellness Opportunities Index: 2017 - 47, 2013 - 47
- Community Design and Land Use Index: 2017 - 49, 2013 - 50

Scale: 0 = Lowest/most negative, 100 = Highest/most positive
Older Resident Needs in Indiana

Over 40 individual survey questions about specific problems faced by older community members, as well as participation levels and community engagement were summarized into 12 larger areas to provide a broad picture of older resident needs in Indiana. These 12 areas have been organized into the five community dimensions of Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use (no needs areas have been defined for the community dimension of Overall Community Quality).

Typically, it is understood that the self-reported needs of older adults represent a minimum level, a conservative estimate attenuated by respondents’ strong desire to feel and appear self-reliant and further reduced by the silent voice of some older adults who, no matter how sensitive the attempt, are too frail to participate in any survey enterprise. Nonetheless, clear patterns of needs and strengths emerged from this assessment:

- Older residents had the largest needs in the areas of Civic Engagement and Physical Health
- Fewer reported needs in the areas of Safety and Caregiver Burden
- Compared to 2013, Safety, Civic Engagement, Social Engagement, Recreation, Physical Health, Mental Health, Institutionalization Risk and Basic Necessities increased in need in 2017 while the remaining areas showed stability (see Figure 5)
Figure 5: Older Adult Needs in Indiana by Community Dimension by Year

COMMUNITY AND BELONGING
- Safety: 18% (2017), 10% (2013)

PRODUCTIVE ACTIVITIES
- Civic engagement: 82% (2017), 71% (2013)
- Social engagement: 40% (2017), 37% (2013)
- Recreation: 36% (2017), 30% (2013)
- Caregiver burden: 13% (2017), 14% (2013)
- Financial and legal: 41% (2017), 42% (2013)

COMMUNITY INFORMATION
- Meaningful activities: 46% (2017), 45% (2013)

HEALTH AND WELLNESS
- Physical health: 69% (2017), 55% (2013)
- Mental health: 45% (2017), 42% (2013)
- Health care: 38% (2017), 37% (2013)
- Institutionalization risk: 34% (2017), 31% (2013)

COMMUNITY DESIGN AND LAND USE
- Basic necessities: 32% (2017), 30% (2013)

Percent with need