



The Social Context of
Community Resource Delivery



On the Threshold of a New Era

What will society in the United States be like in the year 2030? It is hard to know exactly how different our daily lives will be, but we do know that by the year 2030, our society will be experiencing something that none other has experienced. As we rapidly approach the 21st century, more Americans than ever before will be living in their sixth, seventh, and eighth decades of life. By the year 2030, the first members of the baby boom generation, born in 1946, will be 84 years of age, and the youngest members, born in 1964, will be 65. By the year 2030, there will be 65 million people aged 65 and older—35 million more than in 1990 (Bouvier & De Vita, 1991). Demographically, the baby boom cohort is sandwiched between two smaller cohorts, and as a result of its enormous size, it has commanded attention at every stage of its life course. Just like school systems in the 1960s that were forced to react to the soaring enrollments of the baby boom cohort, social institutions that serve older baby boomers will be challenged once again.

Will this graying of our population dramatically change our society? As demographers, economists, gerontologists, and sociologists debate this question, we can be relatively safe in predicting that because of their unique characteristics, the aging baby boomers will cause a reexamination of current aging policies and services. Unlike generations before them, collectively they will be better educated, will be better off financially, will be living in the suburbs, and will be beneficiaries of the programs that were put in place for their grandparents. On the other hand, this giant cohort is tremendously diverse. Although as a group, boomers will have higher levels of education compared with generations before them, more than 3 million will not have advanced beyond the eighth grade (Siegel, 1989). Although boomers' earnings are comparable with their parents' at a similar stage in life, the distribution of wealth in the United States has become more unequal in the last two decades; it is projected that 4 million boomers in the year 2030 will have incomes below 150% of the poverty line (Lewin-VHI, Inc., cited in Kingston, 1996). In addition, the poverty gap between whites and people of color was

just as wide in 1994 as it was in 1959—a rate of 3 to 1 (O’Hare, 1996)—a statistic that will no doubt have implications for the financial well-being and quality of life for ethnic minorities in later life.

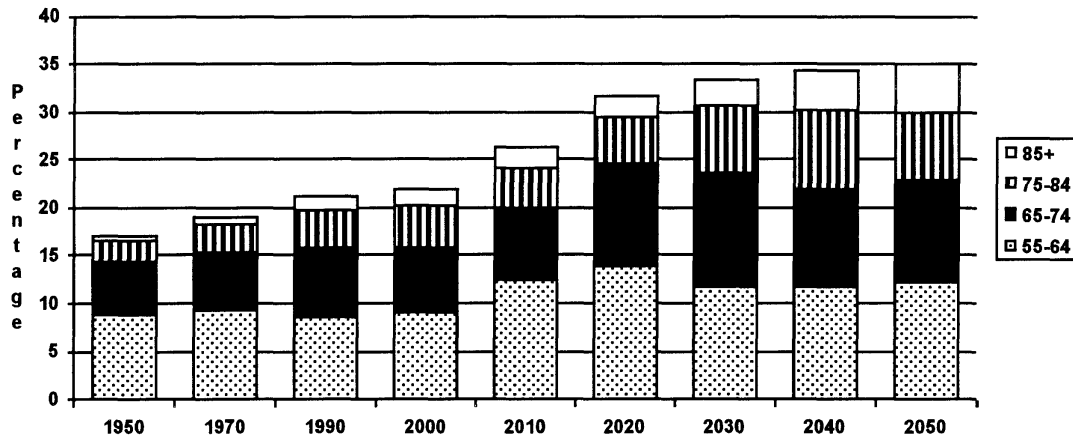
Another unique characteristic of the boomer cohort is the marriage and family patterns compared with those of their parents and grandparents. Boomers tended to marry later, have higher rates of divorce, and have smaller families than their parents (Bouvier & De Vita, 1991). Many will live in blended families, increasing the complexity of kin networks. Boomers also are living within more nontraditional forms of “family,” including single-parent families, cohabitating heterosexual and same-gender couples, and intergenerational families. These unique family characteristics might reduce the number of potential family caregivers and increase role ambiguity of adult children within divorced and blended families. Will these adult children feel an obligation to care for both biological and stepparents? Because families play a key role in providing instrumental and emotional support, as well as long-term care, to their older family members, it is uncertain whether these differences will negatively influence family support patterns and thus create a greater demand for formal services. The families who choose not to have children will also be at risk of having fewer informal resources.

Collectively, these demographic characteristics will shape the type, amount, and nature of community resources in the future. They will increase the demand for home health care and retirement housing options. Many baby boomers will move into third, fourth, and even fifth careers and seek educational opportunities and greater flexibility in work and retirement options. The social safety net may need to be expanded for the underclass and lower class. The sheer numbers of aged boomers will challenge policymakers to rethink health care, retirement programs, and pension plans. Even now, projections, both dire and not so dire, are being made about Social Security and Medicare. Thus, demographic characteristics of the next generation of older adults will have direct implications on social policies that, in turn, support programs and services for older adults. In this next section, we discuss a few more of the salient demographic characteristics of the boomer cohort.

Growth of the Older Population

The projected growth in the older population is depicted in Exhibit 1.1. According to the U.S. Bureau of the Census (1993), persons aged 65 and older constituted 8.1% of the population in 1950. By the year 2050, that percentage will increase to 22.9%. The percentage of older adults in each age group will increase as well. For example, in 1990, the percentage of older adults aged

Exhibit 1.1 Actual and Projected Growth of the Older Population

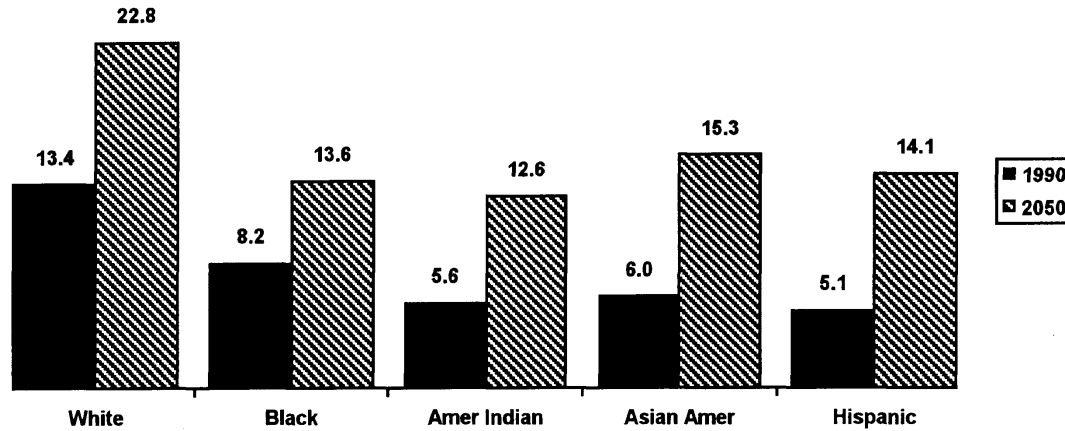


SOURCE: Compiled from data from U.S. Senate Special Committee on Aging (1991a).

55 to 64 was 8.5% and is expected to increase to 12.3% by the year 2050. Similarly, older adults aged 75 to 84 years constituted 4% of the population in 1990; by the year 2050, that percentage will jump to 7.2%. Because of the increase in life expectancy, demographic projections call for a substantial increase in the percentage of older adults aged 85 or more. Moreover, persons 85 years of age and older represent the fastest-growing part of the older adult population. The population aged 85 and older will more than double from 3 million in 1990 to 7 million in 2020 and increase to 14 million by 2040.

What are the social implications of such an increase in the older adult population? Many writers in the popular press suggest that the increase in the number of older adults signals an impending social and fiscal crisis and that aged persons will become a financial burden to society (e.g., Smith, 1992). Others (Gerber, Wolff, Klores, & Brown, 1989; McDaniel, 1986) argue that a “crisis mentality” overlooks other important demographic factors. Although it is true that the United States, along with other developed nations, will experience an increase in the older adult population, the number of older adults has steadily increased during the last 130 years. This steady increase has allowed society to adapt to the changes of an aging population. Many scholars believe society will be able to adapt to this new cohort of older adults as well.

The assumption that older adults will place a burden on society is often based on the old age dependency ratio. The old age dependency ratio, the ratio of persons aged 65 and older to persons aged 20 to 64, will increase from 20:100 in 1990 to 38:100 in 2030. On the other hand, the *overall dependency ratio*, which includes “dependent” persons aged 0 to 19 along with

Exhibit 1.2 **Percentage of Older Adults by Race: 1990 and 2050**

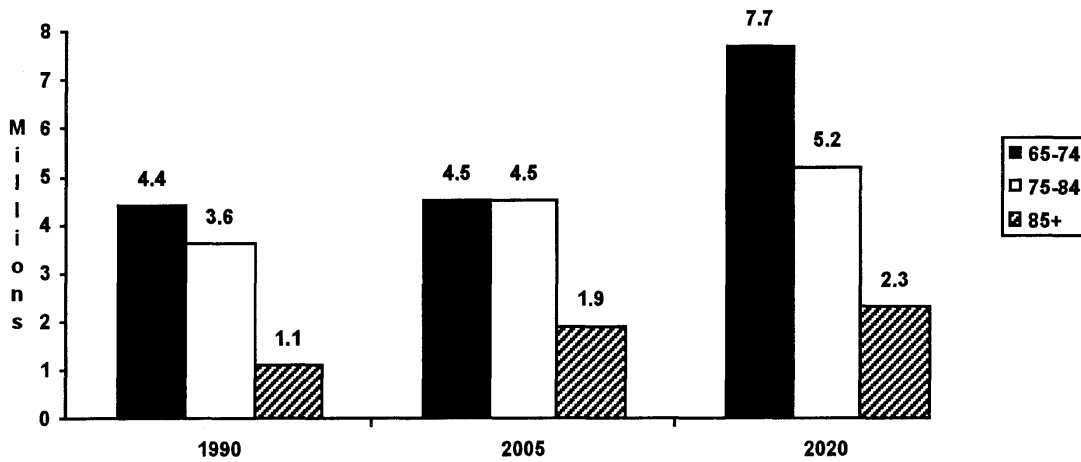
SOURCE: U.S. Bureau of the Census (1996a).

persons aged 65 and older, will be approximately the same in the year 2030 as it was in 1920 (74:100 and 76:100, respectively) and lower than it was in 1965 because of a decline in the youth dependency ratio (U.S. Senate Special Committee on Aging, 1991a). Thus, the increase in the number of older adults does not automatically result in greater social burden because the increasing demand on public programs by older adults might be offset by declining demands on public funds for supporting children. As Kingston (1996) points out, the increase in the number of older adults in the next century does not mean that society will be overwhelmed with caring for the older adult population, but it does suggest that we must begin to plan for the needs of the aging boomers.

Growth of the Minority Older Adult Population

In addition to the increase in the number of older adults, the percentage of older adults of color is expected to increase. In 1990, the nonwhite older adult population composed 14% of the total 65+ population; that percentage is expected to increase to 32% by the year 2050 (U.S. Senate Special Committee on Aging, 1991a). Exhibit 1.2 illustrates the percentage of older adults by race for the years 1990 and 2050. Although white older adults will still represent a greater percentage of those over age 65 in the year 2050, the

Exhibit 1.3 **Projected Increase in the Number of Older Adults Living Alone by Age**



SOURCE: U.S. Senate Special Committee on Aging (1991a).

percentages of blacks, American Indian, Asian Americans, and Hispanics will increase dramatically.

Growth in the Number of Older Adults Living Alone

A final demographic characteristic having social service implications is the increase in the number of older adults who will be living alone. The percentage of older adults who live alone is expected to increase from 9.2% in 1990 to 10.9% in 2005 and to 15.2%, or 15.2 million, in 2020. Moreover, the percentage of older adults living alone increases with age (see Exhibit 1.3). By the year 2020, the number of older adults aged 85 and older who live alone is projected to double to 2.3 million persons. Older adults who live alone are more likely to live in poverty and are less likely to receive help with activity limitations than are older adult couples who co-reside (U.S. Senate Special Committee on Aging, 1991a).

Implications of Demographic Characteristics for Community Resources

These selected demographic projections and unique characteristics have a number of implications for the delivery of community resources to older

adults. The growth in the older adult population will increase the demand for all types of services. Professionals working to deliver the programs and services designed to improve the quality of life of older adults will thus be challenged to do even more with less. Because of the diverse nature of the boomer population with regard to ethnicity, income, family history, and life experience, professionals will be expected to be knowledgeable about a wide range of services and programs that serve both mainstream and disenfranchised individuals. Community programmers also must recognize and accommodate cultural diversity and remove the social and cultural barriers to service accessibility. In the near future, professionals will be called on to be visionaries in planning and developing services and programs to meet the needs of this new cohort with its diverse characteristics.

Now that we have had a chance to consider the challenges that lie ahead for services and programs that assist older adults, let's return to the present and consider more immediate issues. In every community, community resources are designed to assist older adults in a variety of ways. Therefore, individuals working with older adults need to have a good understanding of these resources as well as the patterns of service use by older adults and their families. Anyone who has ever worked with older adults knows that more often than not, the problems that they confront are complex and multifaceted.

Consider the case of Mrs. Duran, who confides that she is about to be evicted from her apartment. Further questioning reveals that she has not received her Social Security check for 2 months. She has limited resources for food, has received a utility shutoff notice, and has been unable to renew her insulin prescription for her diabetes. Or consider Mr. Jackson, who does not know what to do with himself since he retired. He has played golf or fished almost every day but is getting bored and disillusioned with retirement life. What community resources can be accessed to help Mrs. Duran and Mr. Jackson? Advocates who have an understanding of various programs and services assisting older adults can recommend appropriate options for both Mrs. Duran and Mr. Jackson.

A Text About Programs and Services in an Era of Change

Because of the multiple challenges that older adults can experience and the changing demographics of the older adult population, we have created a text that provides a broad-based discussion of community resources. We believe that to effectively meet the needs of older adults who can benefit from using services and programs, professionals must understand the social and psycho-

logical dynamics of help-seeking behavior. It is not enough to know what services are available and appropriate; practitioners must also be armed with theoretical knowledge to understand *why* a daughter, despite her exhaustion, refuses to bring her father to the local adult day program and *why* an older adult, who barely survives on a small pension, refuses to apply for additional income support that would make life a bit more bearable. In addition, we believe that practitioners also must understand the service use patterns and how families interact with the formal network when they need assistance in caring for their older family members. Greater understanding of these patterns can better prepare students and practitioners for understanding the dynamics of when and how families choose to use the formal network.

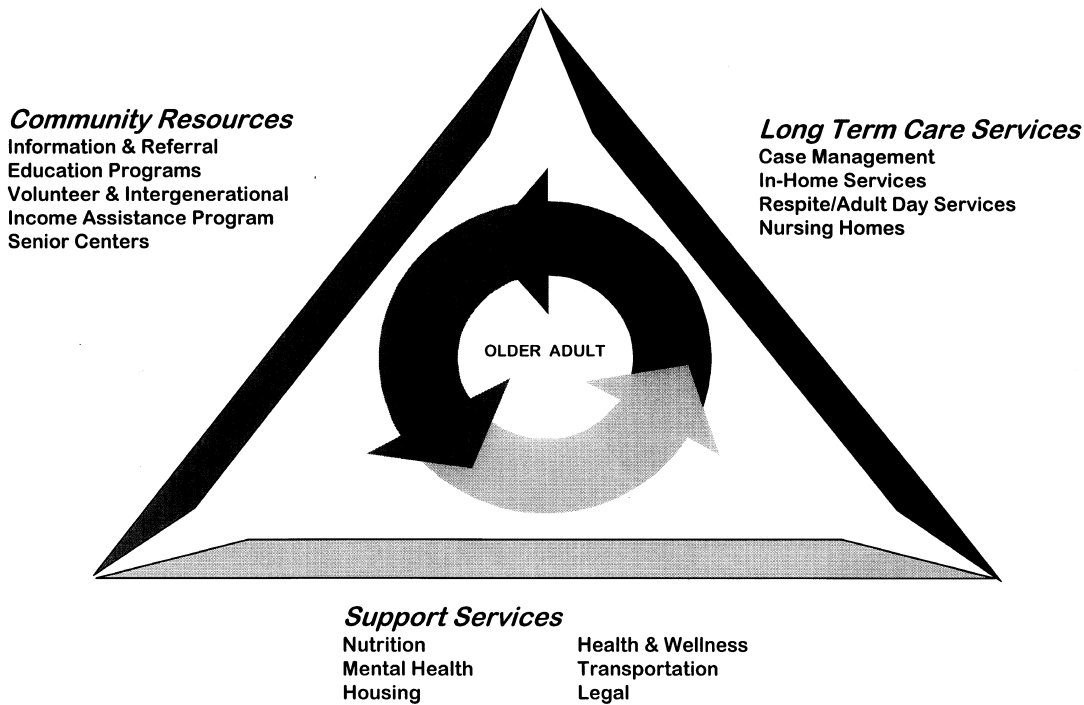
We also believe that simply describing the existing programs and services that assist older adults provides an incomplete picture. Practitioners and students should also benefit from the interplay that exists between research and practice because research results have practical applications for the delivery of services and programs. In each chapter, we draw from empirical research to describe who uses and provides such programs. We also include information about program outcomes when available.

Next, professionals need to be alerted to the infinite number of programs and services in communities that exist outside those funded through the Older Americans Act (OAA) of 1965 and subsequent amendments. Thus, we attempt to introduce readers to many programs that are both publicly and privately funded. Moreover, we discuss the different ways in which aging programs have successfully networked with one another to develop public and private partnerships in an attempt to reach more older adults.

Organization of the Book

This book consists of three parts. In addition to this chapter, Part I has two other chapters. Chapter 2 presents a brief review of major aging policies, including Social Security, Medicare, and the Older Americans Act, the basis for the existence of many older adult programs. Chapter 3 explains the patterns of service use by older adults and the theories that can predict help-seeking behavior.

Part II of the book is based on the concept of the *continuum of care*. Conceptually, the continuum of care is a system of social, personal, financial, and medical services that supports the well-being of any older adult, regardless of the person's level of functioning. The goal, of course, is to have the appropriate services available to match the presenting needs.

Exhibit 1.4 **Continuum of Services**

The continuum is often thought of in a linear way—older adults move from one end of the continuum (independence) to the other (dependence), and services exist at every point along the continuum to meet their social, medical, and personal needs. In addition, services impinge differently on the personal autonomy of its participants. For example, those who attend senior centers come and go as they please and make choices about their level of participation. In contrast, a nursing home is the most restrictive environment and impinges a great deal on personal autonomy and choice.

We have opted to depict the continuum of care as a more dynamic and interactive system (see Exhibit 1.4). Rather than moving in a linear fashion from independence to dependence, older adults move in and out of areas of service need as they experience changing levels of independence and dependence, health and illness, and financial stability and instability. For example, older adults just discharged from the hospital may need in-home services as well as home-delivered meals. Yet as they become less dependent, they might access services offered at the senior center. Those who are striving to maintain their independence can access services that exist within the continuum.

Therefore, Part II presents the variety of community resources available for older adults and is divided into three sections, based on our depiction of the continuum of care. The first section presents information about *community services*. These are services that benefit older adults with low levels of dependency and impinge little on their personal autonomy. These services offer participants opportunities to enhance personal and social well-being. Specifically, we address information and referral services (Chapter 4), volunteer and intergenerational programs (Chapter 5), education (Chapter 6), senior centers (Chapter 7), employment programs (Chapter 8), and income assistance programs (Chapter 9).

Support services are discussed in the second section of Part II. These services help older adults who need assistance in maintaining their level of functioning. Support services include nutrition programs (Chapter 10), health and wellness programs (Chapter 11), mental health services (Chapter 12), legal services (Chapter 13), transportation (Chapter 14), and housing (Chapter 15).

The final chapters in Part II provide information about community-based and institutional long-term care services. These services represent those that exist to assist individuals who have greater dependency needs. Chapters included in this section are case management (Chapter 16), home care (Chapter 17), respite care (Chapter 18), and nursing homes (Chapter 19).

We have organized each chapter in Part II to include policy background, a description of users and programs, and future concerns. Each chapter includes case studies to help readers think critically about the service delivery issues. These cases were developed on the basis of actual experiences we have encountered (names and situations were altered to protect individuals' identity). In addition, best practice models that highlight creative and unique programs and sources for additional information are presented. The best practice models are representative of the programs and services that exist in various communities. Learning activities designed to expand understanding of the issues are also included. Additional resources, including the names and addresses of professional organizations and Internet resources, are located at the end of each chapter.

Part III contains the final chapter on programs and services for the future (Chapter 20). This chapter presents an in-depth look at the challenges that lie ahead for the aging network.

Accessing Updated Information

Because Congress frequently enacts legislation that affects the existence of community resources and programs, information presented in texts such as this can become quickly outdated. Professionals often do not have access to

information about the new and creative ways communities are delivering services to older adults. To address these two concerns, we have created a Web site that provides legislative and programmatic updates. The *Community Resources for Older Adults* Web site will have updated information on aging policy, best practice models, and information about additional resources. Readers can access our Web site at

<http://www.hhs.unco.edu/geron.htm>

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