

HD
7287.92
.U52
I58
1987

The Housing Needs and Preferences of Elderly Iowans



Principal investigators:
Joyce M. Mercier, Ph.D.
Earl W. Morris, Ph.D.

May 1987
Department of Family Environment
Iowa State University
Ames, Iowa 50011

THE HOUSING NEEDS AND PREFERENCES OF ELDERLY IOWANS

Joyce M. Mercier

Earl W. Morris

Lori Paulson

Marianna Jakubczak

Charlene Peterson

Maria de Lourdes Rubio

Patricia C. Whiteford

May, 1987

Family Environment Department

Iowa State University

Ames, Iowa 50011

It would like to express our appreciation to the individuals who have assisted us in the preparation of this report.

Dr. Edward A. Towner, who has supported the project and given us such encouragement.

Dr. Robert L. Jones, and the other members of the project who have worked with us throughout the project helping us in the preparation of this report.

The members of the staff have worked with us throughout the project helping us in the way we wish to report on the results of the study.

This project was supported in part by a grant from the Iowa Department of Elder Affairs.

The conclusions reported are those of the authors and should not be considered as necessarily representing the policies or views of the Department of Elder Affairs.

The respondents who gave generously of their time and provided insights into their lives and feelings concerning their views have been accurately reflected in this study.

The Department of Elder Affairs of the State of Iowa, the Iowa State University and the Iowa State Department of Elder Affairs, the College of Human Sciences, Iowa State University, Department of Family Relationships, Iowa State University for their financial support.

Special thanks are given to the individuals who have given their time and help in the preparation of this report.

TABLE OF CONTENTS	113
Page	113
General Introduction	113
Methodology	119
Results	125
Conclusions	139

1-21-12, GYX

ACKNOWLEDGMENTS

We would like to express our gratitude to the following groups and individuals:

Dr. Edward A. Powers who has supported the project and given us much encouragement.

Dr. Pat Apt, Ron Beane, and Mary Ann Olson, Department of Elder Affairs who have worked with us throughout the project helping with the details associated with such a project.

The members of the task force committee who have worked with us throughout the project helping us at each step of the way to enrich our understanding of the project.

Toni Genalo who has labored long and hard in our behalf and worked with us tirelessly to develop our instruments and assure clean and complete data and Harold Baker who did the sampling. Both of them are with the Survey Section of the Statistical Laboratory at Iowa State.

The interviewers who worked tirelessly and with great awareness of and sensitivity to the older people whom they were interviewing.

The respondents who gave generously of their time and provided insights into their lives and housing situations. We trust that their views have been accurately reflected by this study.

The Department of Elder Affairs of the State of Iowa; the Iowa Agriculture and Home Economics Experiment Station Iowa State University; the College of Home Economics, Iowa State University; Department of Family Environment and the Midwest Council for Social Research in Aging for their financial support.

Dorothy Engelstad who has graciously typed the manuscript in its various forms. Without her help, the task would have been much longer.

TABLE OF CONTENTS

I.	HOUSING NEEDS AND PREFERENCES: FAMILIAL, SOCIAL ECONOMIC, PSYCHOLOGICAL, AND HEALTH CONSIDERATIONS	1
	Introduction	1
	Iowa's Elderly Population	1
II.	METHODS AND PROCEDURES	2
	Sampling and Data Gathering for the Samples of the Elderly	2
	Sampling and Data Gathering for the Sample of Children	8
	Plan of Analysis and Presentation of Results	8
III.	THE NATURE OF IOWA'S ELDERLY POPULATION BY AGE AND LOCATION	10
	Family and Social Situation	10
	Economic Situation	25
	Psychological Adjustment	29
	Satisfaction	29
	Control over Life	37
	Worries	39
	Health Status	42
IV.	EXTERNAL AND INTERNAL SUPPORT	49
	Family Support	49
	Use of Health-Related Services	80
	Psychological Support	98
V.	CURRENT HOUSING CONDITIONS BY AGE AND LOCATION	101
	Introduction	101
	Ownership and Rental	102
	Type of Structure	103
	Space in the Dwelling	104
	Conclusions	111
VI.	CURRENT AND PREFERRED HOUSING: A SUBJECTIVE DEFICIT ANALYSIS	113
	Purpose	113
	General Orientation	113
	Subjective Deficits	113
	Simplified Subjective Deficits	135
	Conclusion	139

VII.	FUTURE INTENTIONS	141
	Reason for moving	141
	Summary	162
VIII.	HOUSING NEEDS AND PREFERENCES OF ELDERLY IOWANS: SUMMARY, POLICY APPROACHES, AND CONCLUSIONS	163
	Summary	163
	Policy Approaches	167
	A Dynamic Focus	167
	The Compactness Hypothesis	168
	The Four Approaches	168
	Conclusion	172
	REFERENCES	173
	APPENDIX A	174
	APPENDIX B	210
	APPENDIX C	223

LIST OF TABLES

Table

1	Percentage of Population over the Age of 60 in Sampled Counties	6
2	Household Size by Rural and Urban Age Groups	11
3	Relationship of Household Member to Respondent, Total Sample	11
4	Sex and Marital Status of Respondents by Group	12
5	Educational Levels by Group	13
6	Employment Status by Age and Location	14
7	Kinship Patterns of the Elderly Respondents by Age and Location	15
8	Frequency and Percentage of Children by Age and Residence of Respondents with Children	16
9	Household Size of Adult Children by Parents' Age and Location	17
10	Persons in Adult Children's Households Who Are Over 60 and Under 18 by Parents' Age and Location	18
11	Ages of Adult Children and Spouses	18
12	Health of Adult Children and Spouse	19
13	Education of Adult Children and Spouses	20
14	Employment Status of Adult Children and Spouses	21
15	Living Children and Grandchildren of Adult Children	22
16	Total Household Income of Adult Children	23
17	Income Adequacy of Adult Children by Parents' Age and Location	24
18	Source of Income by Age and Residence	26

19	Mean and Median Amounts of Income for the Respondents Who Receive the Income	27
20	Amount of Income by Age and Location	28
21	Satisfaction with the Quality of Life by Age and Location	30
22	Satisfaction with Housing by Age and Location	31
23	Satisfaction with the Neighborhood by Age and Location	32
24	Satisfaction with the Level of Physical Activity by Age and Location	33
25	Satisfaction with the Level of Interaction by Age and Location	34
26	Satisfaction with Physical Health by Age and Location	35
27	Satisfaction with Psychological Health by Age and Location	36
28	Control over Life	37
29	Means on Items in Locus of Control Scale	38
30	Perceptions of Worries Older People Have by Age and Location	40
31	Perceptions of Events Older People Worry About	41
32	Health Status by Group Age and Location	42
33	Bad Health Limits Activities by Age and Location	43
34	Being Handicapped Limits Activities by Age and Location	43
35	Aids to Walking by Age and Location	44
36	Assistance Needed to Perform Activities of Daily Living by Age and Location	45
37	Incidence of General Illnesses by Age and Location	46
38	Feeling Sad, Blue by Age and Location	47

39	Incidence That Feeling Sad, Blue Limit Activities by Age and Location for Respondents Who Report Feeling Sad, Blue	48
40	Parents Visit Their Childrens' Home by Age and Location	50
41	Children's Visit to Their Parents' Home by Age and Location	50
42	Birth Order of Selected Child by Age and Location	51
43	Telephone Interaction with Selected Child by Age and Location	52
44	Mail Exchange with Selected Child	53
45	Face to Face Contact with Selected Child by Age and Location	54
46	Assistance with Tasks by Selected Child	55
47	Assistance with Additional Tasks by Selected Child	56
48	Quality of Relationship with Selected Child	57
49	Relationship with Selected Child as Hoped by Age and Location	58
50	Views Similar to Selected Child by Age and Location	59
51	Birth Order of the Child Respondent Turns to in an Emergency by Age and Location	60
52	Children Take Care of Parents by Age and Location	61
53	Children Give Financial Help by Age and Location	62
54	Parents Entitled to Return for Sacrifices by Age and Location	63
55	Adult Children Bring Parents into Home by Age and Location	64

56	Children's Report of Their Visits to Parents' Home by Parents' Age and Location	65
57	Children's Report of Parents' Visits to Them by Parents' Age and Location	66
58	Children's Report of Telephone Interaction with Parents by Parent's Age and Location	67
59	Children's Report of Sending Mail to Parents by Parents' Age and Location	68
60	Children's Report of Receiving Mail from Parents by Parents' Age and Location	68
61	Children's Report of Face to Face Contact with Parents by Parents' Age and Location	69
62	Children's Report of Assisting with Tasks	70
63	Children's Report of Taking Parents on Errands by Parents' Age and Location	71
64	Children's Report of Giving Parents Advice by Parents' Age and Location	72
65	Children's Report of Parents Giving Advice by Parents' Age and Location	73
66	Children's Report of Exchange of Help in an Emergency	74
67	Children's Report of Exchange of Money	75
68	Children's Report Quality of Relationship with Parents	76
69	Children's Report of Parents' Reliance on Children in Decision Making by Parents' Age and Location	77
70	Relationship with Parents as Hoped by Parents' Age and Location	78
71	Views Similar to Parents by Parents' Age and Location	78
72	Children's Report of Agreement with Statements About Parent-Child Relationship	79
73	Use of Doctors by Age and Location	80

74	Satisfaction with Doctors' Services by Age and Location	81
75	Transportation to Doctors by Age and Location	81
76	Use of Hospital Services by Age and Location	82
77	Satisfaction with Use of Hospital Services by Age and Location	83
78	Transportation to Hospital Services by Age and Location	84
79	Use of Pharmacist Services by Age and Location	85
80	Satisfaction with Pharmacist Services by Age and Location	86
81	Transportation to Pharmacist Services by Age and Location	87
82	Use of Dental Services by Age and Location	88
83	Satisfaction with Use of Dental Services by Age and Location	89
84	Transportation to Dental Services by Age and Location	89
85	Use of Congregate Meals or Nutrition Sites by Age and Location	90
86	Satisfaction with Congregate Meals or Nutrition Sites by Age and Location	90
87	Transportation to Congregate Meals or Nutrition Sites by Age and Location	91
88	Use of In-Home Nursing Services by Age and Location	92
89	Satisfaction with In-Home Nursing Services by Age and Location	93
90	Use of Homemaker Health Services by Age and Location	94
91	Satisfaction with Homemaker-Health Services by Age and Location	94
92	Use of Home Delivered Meals by Age and Location	95
93	Satisfaction with Home Delivered Meals by Age and Location	95

Table

x

94	Health Coverage by Age and Location	97
95	Monitoring by Age and Location	99
96	Children's Report of Monitoring by Parents' Age and Location	100
97	Aspects of Tenure by Age and Location	102
98	Type of Structure by Age and Location	103
99	Number of Rooms in the Dwelling by Age and Location	105
100	Number of Bedrooms in the Dwelling by Age and Location	106
101	Number of Bathrooms in the Dwelling by Age and Location	106
102	Living-Dining Space by Age and Location	107
103	Kitchen-Dining Space by Age and Location	108
104	Family-Recreation Room by Age and Location	108
105	Laundry Facilities by Age and Location	109
106	Number of Floors in Dwelling by Age and Location	110
107	Outdoor Space by Age and Location	110
108	Elderly-Oriented Housing by Age and Location	111
109	Current and Preferred Tenure	115
110	Combination of Current and Preferred Tenure	116
111	Current and Preferred Type of Structure	117
112	The Combinations of Current and Preferred Type of Structure	118
113	Current and Preferred Number of Rooms	119
114	Combinations of Current and Preferred Number of Rooms	120

115	Current and Preferred Number of Bedrooms	120
116	Combination of Current and Preferred Number of Bedrooms	121
117	Current and Preferred Number of Bathrooms	121
118	Combination of Current and Preferred Number of Bathrooms	122
119	Current and Preferred Living-Dining Arrangement	122
120	Combinations of Current and Preferred Living-Dining Arrangements	123
121	Current and Preferred Kitchen-Dining Arrangement	124
122	Combinations of Current and Preferred Kitchen-Dining Arrangements	125
123	Current and Preferred Number of Floors in the Dwelling	126
124	Combinations of Current and Preferred Number of Floors in the Dwelling	127
125	Current and Preferred Outdoor Space	128
126	Combinations of Current and Preferred Outdoor Space	129
127	Current and Preferred Mixed-Segregated Neighborhood	130
128	Combined Current and Preferred Mixed-Segregated Neighborhoods	131
129	Current and Preferred Type of Community	132
130	Combinations of Current and Preferred Type of Community	134
131	Current and Preferred Washing Machine in the Dwelling	135
132	Current and Preferred Clothes Dryer in the Dwelling	136
133	Wheelchair Access to Dwelling	136
134	Wheelchair Access to Kitchen	137
135	Wheelchair Access to Bathroom	137

136	Current and Preferred Design for the Elderly	138
137	Ranking of Various Housing Characteristics	138
138	Perceptions of Events that Cause Older People to Move by Age and Location	142
139	Years in Residence by Age and Location	143
140	Comparison of Older Respondents and Children's Perceptions of Events that Cause Older People to Move by Parents' Age and Location	144
141	Time When Have to Move by Age and Location	144
142	First Plan for a Time When Have to Move	145
143	Plans for When Unable to Care for Self by Age and Location	146
144	First Plan for When Unable to Care for Self	146
145	Looking for Housing Information by Age and Location	147
146	Consider Moving to a Different Dwelling by Age and Location	148
147	Interest in Attending Classes on Housing for the Elderly by Age and Location	149
148	Advice Sought by Age and Location	150
149	Family Visits Facilities Before Moving by Age and Location	151
150	Use of the Services of a Professional Housing Consultant by Age and Location	151
151	Definite Plans to Move in 12 Months by Age and Location	152
152	Plans to Remodel by Age and Location	152
153	Live in a Warmer Climate by Age and Location	153
154	Children's Concern about Present Housing of Parent by Parents' Age and Location	154

155	Children Help Parents Look for Housing Information by Parents' Age and Location	154
156	Children Expect Parents to Move by Parents' Age and Location	155
157	Children's Belief About Parents Moving Closer by Parents' Age and Location	155
158	Children's Report of Family Member Parent Would Choose to Move Nearer	156
159	Move Into a Different Dwelling	156
160	Children's Perception of Whom Parent Would Ask for Advice on Moving	157
161	Visit New Housing Before Making a Decision	158
162	Children's Report of Use of Services of Professional Housing Consultant	158
163	Children's Report on Attending Classes on Housing for the Elderly	159
164	Children's Plans for Time when Parents Would Have to Move	159
165	Children's First Plan for Time When Parent Would Have Move	160
166	Children's Plans for When Parent Unable to Care for Self	160
167	Children's First Plans for When Parent Unable to Care for Self	161
168	Children's Plans for Parents Having Serious Health Problem	162

CHAPTER I. HOUSING NEEDS AND PREFERENCES: FAMILIAL, SOCIAL, ECONOMIC PSYCHOLOGICAL AND HEALTH CONSIDERATIONS

Introduction

The purpose of the project was twofold: 1) to gather and analyze data on the housing options available to and preferred by elderly Iowans through a survey and 2) to disseminate the results of the study so that efforts to improve housing conditions and broaden the options available to elderly Iowans can be developed. The statewide survey of the housing needs of elderly individuals is comprised of two populations. The primary population is older adults (aged 60-74 and 75 and over) who live in urban and rural areas of Iowa. A secondary population, consisting of the children of the primary respondents, is included because of the potential role of children in assisting their elderly parents in making housing decisions.

Iowa's Elderly Population

Iowa's elderly population has been steadily growing in this century. There has been a growth rate between 1950 and 1980 of 32 percent for those 60 and older and 188 percent for those 85 and older compared to a growth rate of 11 percent for Iowa's total population (Gosselink & Goudy, 1986). In the last decade, Iowa's population increased by 3 percent. During the same time period the population aged 60 and older increased by 9 percent and the population aged 85 and older by 42 percent (Gosselink & Goudy, 1986). Iowa currently ranks fifth in the United States in proportion of residents who are 60 years of age and older. Only Florida (23.1%), Rhode Island (18.6%), Arkansas (18.5%) and Pennsylvania (18.2%) exceed Iowa's proportion of older people at 17.9 percent (Gosselink & Goudy, 1986). In terms of the population over the age of 85, Iowa ranks first in the nation with 1.54 percent.

CHAPTER II. METHODS AND PROCEDURES

Sampling and Data Gathering for the Samples of the Elderly

The population for this study consists of all persons 60 years of age or older living in households in Iowa at the time of the study. The sample was stratified by age (60-74 and 75+ and residence (rural and urban). The urban zone was defined to include all cities with populations of 20,000 or more and their associated urbanized areas as defined by the U. S. Bureau of Census. Urbanized areas are incorporated towns and cities and certain specified unincorporated areas in the environs of cities with populations of 50,000 or more. The remainder of the state constituted the rural zone. Crossing age with residence creates four subpopulations or strata. A total sample of about 300 interviews was desired, divided roughly equally between the zones, with at least 50 being from the smallest subgroup - persons 75 and older in the urban zone.

Because there is no feasible method available for sampling individuals directly in the general population, the plan was to select a sample of households and then select eligible persons from the sample households. The information was to be collected by personal interview. To reduce costs, the screening procedure used was to identify eligible households (i.e. those containing one or more persons 60 years old or older) by telephone using the so called Random Digit Dialing method. The basis of this method is the selection of a random sample from all potential telephone numbers in an area recognizing that many of the numbers will not have been assigned and others will have been assigned to telephones not associated with households. An advantage of this method is that all households having a telephone, no matter how recently assigned, have a chance of being included in the sample. Once a household was reached, a short screening questionnaire was administered to discover who, if anyone, in the household was eligible for inclusion in the study and whether they would be willing to participate if selected for a personal interview.

To arrive at a sampling rate that would yield the desired number of interviews, it was necessary to know or to estimate:

- a) The number of eligible households in the population,
- b) The proportion of all potential telephone numbers that are held by households,
- c) The rate of cooperation that would be realized.

Census data are not available that give the number of households that contain one or more persons 60 years old and older. Data are available giving the number of persons by age and place of residence, the number of households in which the householder or spouse is 65 or older, and the number of persons 75 or older living alone. Using these data and making some assumptions about the distribution of eligible persons among

households to fill the informational gaps, estimates of the number of eligible households in each of the subgroups were made. Past experience was used to assign values to items (b) and (c). On the basis of these estimates, urban and rural sampling rates were established that were expected to produce the desired minimum number of interviews in the smaller subgroup in each zone.

In both zones, sampling was in three stages. In the urban zone, cities were selected in the first stage. Cedar Rapids, Davenport, and Des Moines (the three largest) were included with certainty; six of the remaining thirteen cities were selected with probabilities proportional to their sizes in terms of estimated number of eligible households. Within each sample city, telephone exchanges, as defined by the 3-digit prefix, were selected with probabilities proportional to their sizes in terms of the number of working 100-number banks they contained. A 100-number bank is the term used to designate a group of 100 potential telephone numbers associated with a specified 3-digit prefix coupled with the first two digits of the 4-digit suffix. A working 100-number bank is one which, according to the telephone company, contains at least one number that has been assigned to a household. Within each sample exchange, telephone numbers were selected at a rate such that the previously specified overall sampling rate (which is a product of the sampling probabilities at each successive sampling stage) was maintained.

Because a personal interview study is costly, it is economically desirable to concentrate the interviews to some extent rather than to spread them entirely at random over the state. To this end, 16 counties were selected at the first stage in the rural zone. Selection was done in a systematic manner with probabilities proportional to the estimated numbers of eligible households. The counties were first ordered geographically within the 16 areas established by the Agency on Aging. The effect of this ordering coupled with the systematic selection was to assure that the sample counties were well-scattered geographically. Within each sample county, two communities were selected with probability proportional to the numbers of 100-number working banks assigned to them. Within sample communities, telephone numbers were selected at rates such that the previously specified overall sampling rate was maintained. Because of the uncertainties about the estimates and assumptions upon which the sampling rates were based, a reserve sample of telephone numbers was selected in each zone to be used if needed. The entire sample was used in the urban zone, and about one-third was used in the rural zone. At the end of the telephone screening, the numbers of eligible persons who were identified and agreed to be interviewed were as follows:

Age	Rural	Urban	Total
60-74	147	157	304
>75	82	57	139
Total	229	214	443

From these age by zone pools of eligible persons, the final samples were selected at random with the restriction that no more than one person could be selected from a given household. If a household contained one or more persons 75 or older as well as one or more persons between 60 and 74, the selection was made from the older age group. The slight bias introduced by this procedure was thought to be an acceptable accommodation to the difficulties in finding the desired number of subjects 75 or older. The final sample numbers were:

Age	Rural	Urban	Total
60-74	107	115	222
> 75	60	57	117
	167	172	339

These numbers allowed for an overall additional attrition rate of about 12 percent. The selected persons were sent letters notifying them of their selection after which they were again telephoned to confirm their willingness to cooperate. At that time, an additional 31 refused to be interviewed and 13 were unavailable because of other reasons (e.g. too ill, deceased, moved). This left a total of 295 actually assigned to field interviewers. Of these, 277 were eventually interviewed, 12 refused, 3 became too ill, and 3 more had died. The breakdown of the 277 interviews is as follows (the corresponding targeted number is shown in parentheses):

Age	Rural	Urban	Total
60-74	91(95)	100(102)	191(197)
> 75	45(53)	41(50)	86(103)
	136(148)	141(152)	277(300)

There are 156 females and 121 males. Urban and rural sample sizes are very similar, 141 urban and 136 rural. The groups, 75 or older, and the younger groups, 60-74, are comparable to each other in size.

Understandably, there are larger younger groups than older groups, and more females than males in the older groups.

The percentage of population over the age of 60 in each of the selected counties is shown in Table 1. Of the counties in the sample, Ringgold in southwestern Iowa has the highest proportion of people over the age of 60 (27.2%) followed by Montgomery (25.1%) and Pocahontas (24.5%). Eight of the counties in the sample have between one fifth and one quarter of their populations over the age of 60: Allamakee, Hardin, Mahaska, Montgomery, Pocahontas, Ringgold, Winnebago, and Tama. Scott County has the lowest proportion of those over 60, 12.5 percent. Polk County has the most residents over 60 followed by Black Hawk, Dubuque, Linn, Scott, and Woodbury (Figure 1).

Of the residents over 85, Black Hawk, Dubuque, Linn, Polk, Scott, and Woodbury each have 1000 or more of the 85+ group in Iowa while Ringgold has nearly 3 percent of its population 85 and older (Gosselink & Goudy, 1986). Scott has the smallest percentage of Iowans 85 and older.

Using 1980 census data and classifying urban as persons living in central cities, closely settled territories surrounding a central city or incorporated places of 2500 or more, 55 percent of those Iowans 60 to 64 live in urban areas. The proportion who live in urban areas increases with each decade until after age 85; 62 percent of Iowans are living in urban areas.

The sex ratio differs for urban and rural regions. More women live in urban areas than in rural areas; more males live in rural areas than in urban areas, suggesting that rural women move to urban areas when they become widowed. Of the total population over age 70, females represent 59 percent, and women make up 67 percent of the total population in their 80's (Gosselink & Goudy, 1986).

Seventy-one percent of women and 87 percent of men who are 60 to 64 are married. By ages 75-79, 32 percent of the women are married but only 13 percent of the men are widowed. For the women between 60 and 79 years, three times as many (15,609 females compared to 5,521 males) live alone as do the men.

Table 1. Percentage of Population over the Age of 60 in Sampled Counties

County	Population Over 60	County	Population Over 60
Alamakee	22.2%	Marion	19.0%
Blackhawk (Waterloo)	14.3	Marshall (Marshalltown)	18.6
Chickasaw	19.0	Montgomery	25.1
Clay	18.2	Muscatine	16.3
Crawford	19.0	Plymouth	19.2
Dallas	17.6	Pocahontas	24.5
Dubuque (Dubuque)	15.0	Polk (Des Moines)	14.5
Hardin	22.5	Ringgold	27.2
Jackson	18.2	Scott (Davenport area)	12.5
Jones	18.3	Tama	22.4
Lee	18.6	Webster (Ft. Dodge)	19.5
Linn (Cedar Rapids)	14.0	Winnebago	23.1
Mahaska	21.2	Woodbury (Sioux City)	17.9

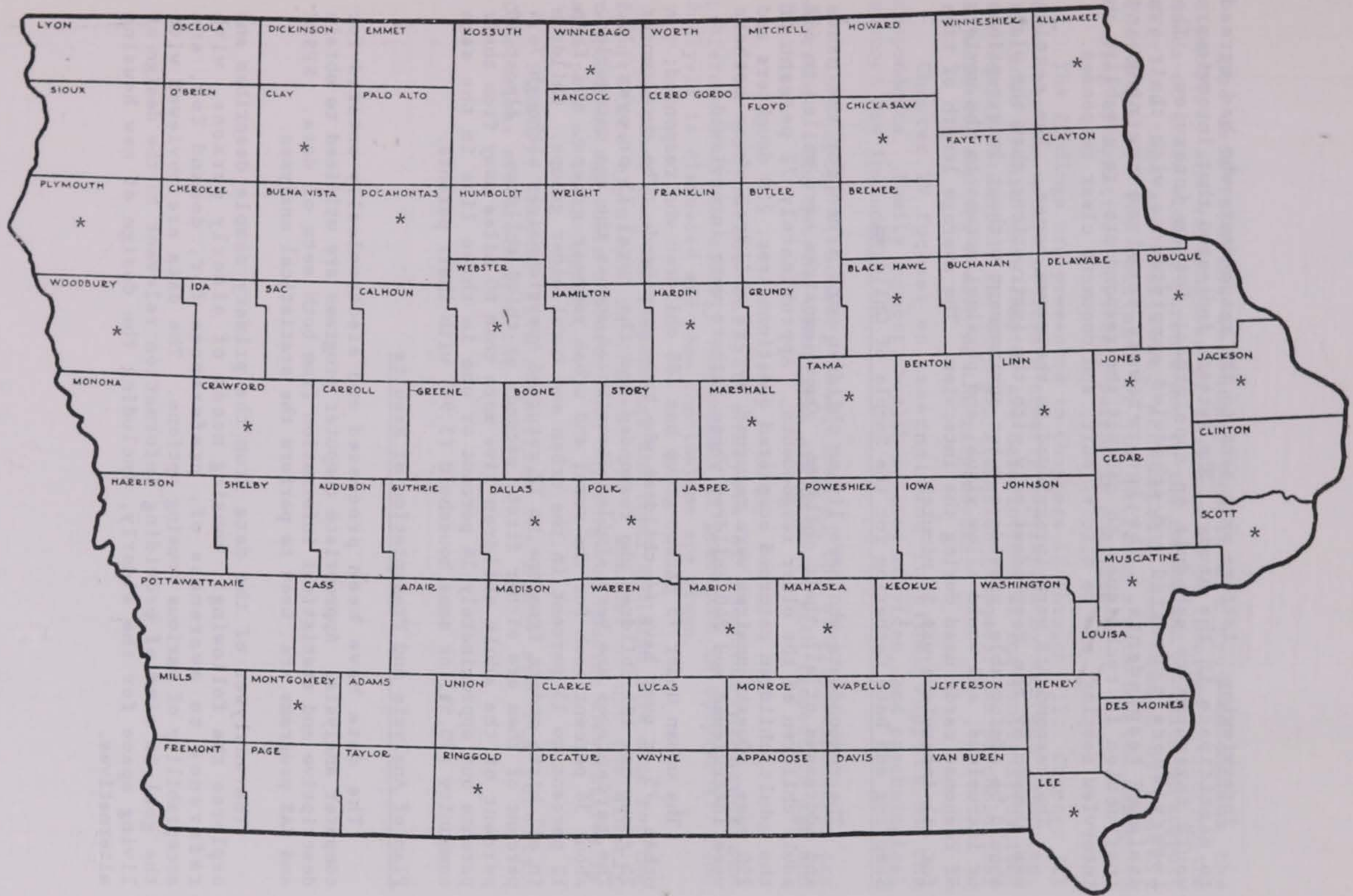


Figure 1. Sampled Counties

Interviewing. Letters were sent to the respondents who had agreed to participate in the study. The letters indicated that interviewers would telephone to schedule an appointment for an interview. The interviewers contacted and scheduled appointments with their own assigned respondents. The interviewers received training and instruction in techniques to contact the respondents, to establish an interview setting, and to elicit, edit, and document clear responses.

The respondents were interviewed in their own homes. The setting was chosen by the respondent only with the instructions that the place should be comfortable, provide a quiet environment without interruptions or intrusions, and would allow visual and physical access to the variety of response cards used during the interview. The average length of time for all interviews was 55 minutes.

Sampling and Data Gathering for the Sample of Children

The respondents who have living children were asked for the names and addresses of all their children. Questionnaires were mailed to 698 adult children of the older respondents. Approximately 72 percent of the adult children returned completed questionnaires, 258 daughters and 250 sons. Questionnaires were returned by 268 children whose mothers were interviewed and 240 children whose fathers were interviewed.

The urban under 75 parent group has 186 children who responded; the urban, 75 or over have 64 children who have responded. The rural under 75 group has 181 children who responded and the rural 75 or over, 77. The percentages are very similar distributed across the age categories, about 36 percent each for the rural and urban younger groups, and from 12 percent to 15 percent in the urban and rural older groups. Children in all birth orders from one to 12 returned questionnaires although 76.4 percent of them are either first, second, or third children. Almost 50 percent of the adult children live more than 60 miles away from their parents but approximately 34 percent or one in three live in the same community (30.5%) or same household (3.9%) with their parents.

Plan of Analysis and Presentation of Results

The data have been processed and electronically entered for computer analysis. Appropriate computer programs are utilized to obtain descriptive and statistical information from both sets of data. SPSSX and SAS programs are used to perform the statistical analyses.

The analyses of the data from the primary sample describes and explores the following: housing needs of elderly persons, with reference to awareness of, preferences for, demand for, and acceptability of various housing options. The data are reviewed with the goal in mind of providing information relevant to the design of living space for the elderly, including the design of new housing alternatives.

The data from the secondary sample are used to assess the capability and willingness of children to be involved in meeting the needs of their elderly parents and in the choice and adoption of support services that are available, accessible, and needed by elderly individuals. The relevance of the children's data for the design of housing alternatives for their parent is analyzed.

The findings are presented in Chapters II through VII. Chapter III discusses the nature of Iowa's elderly population by age and location. Included within that chapter are descriptions of the family situation, the social situation, the economic situation (income), the psychological adjustment, and the health of the respondents.

Chapter IV focuses on external and internal support of the respondents. Family support, health-related services, and psychological support are included.

In Chapter V, housing conditions of the elderly respondents are described. The housing conditions are examined with respect to age and location.

The subjective deficit analysis of the housing needs and preferences of the elderly respondents is presented in Chapter VI. The analysis is discussed and some conclusions are drawn.

The plans that the respondents and their children have made for the future are examined in Chapter VII. Whether or not the elderly respondents and their children have investigated housing alternatives is also part of that chapter.

Finally, Chapter VIII summarizes the study and its results. Conclusions are drawn from the data.

CHAPTER III. THE NATURE OF IOWA'S ELDERLY POPULATION BY AGE AND LOCATION

The purpose of Chapter III is to describe the nature of Iowa's elderly population by age and location. The sample for the study is characterized in terms of the family and social situation, the economic situation, and the psychological adjustment of the respondent.

Family and Social Situation

According to 1980 Census data, as Iowans age, greater proportions of them live alone than when they were younger (Gosselink & Goudy, 1986). Among those 60 to 64, only 14 percent live alone but more than a third live alone when they are 85 or older. For women in the older age category, more than half live alone. The aged tend to live apart from their children. The living arrangement is due to many factors such as greater economic independence of both generations than in earlier decades, high rates of residential mobility with adult children moving away from childhood home, and high rates of marriage among the children.

More than a third (36.1%) of the sample lives alone and slightly more than half (50.5%) live in a two person household. Less than 15 percent of the respondents live in households that include more than two people.

The picture varies somewhat in terms of household size. Greater percentages of both rural and urban, 75 and over live alone compared to those under 75; the proportions are very similar for rural and urban. The rural 75 and over elderly have no households larger than two persons. The urban households tend to be larger, especially among those under 75. There are, however, more two person households in the rural areas than in urban areas. The under 75 rural group has nearly 64 percent two-person households, the 75 and over almost 45 percent. Out of both rural groups, only 11 percent of the under 75 group have any additional members in the household. The rural older person has fewer persons in the household to provide support than do the urban elderly (Table 2).

Table 2. Household Size by Rural and Urban Age Groups

Household size	Urban		Rural	
	<75	75+	<75	75+
1	29.0%	56.1%	25.3%	55.6%
2	48.0	34.1	63.7	44.4
3	16.0	2.4	8.8	0.0
4	4.0	4.9	1.1	0.0
5	2.0	0.0	1.1	0.0
6	1.0	0.0	0.0	0.0
7	0.0	2.4	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(81)	(45)

The second person in the household is most frequently a spouse (89.8%), followed by a child (6.2%), a grandchild (0.6%), and others (3.4%). For the 37 households that have three members, 78.4 percent of the third members are children. The other relationships are grandchild, in-laws, and other. There are 12 four person households: seven of the 4th members are children, four grandchildren, and one grandson-in-law. For the larger households, from five to seven, additional members are grandchildren, in-laws, and children (Table 3).

Table 3. Relationship of Household Member to Respondent, Total Sample

Relationship	Household Members					
	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>
Spouse	89.8%	0.0%	0.0%	0.0%	0.0%	0.0%
Child	6.2	78.4	58.4	60.0	0.0	0.0
Grandchild	.6	5.4	33.3	40.0	50.0	100.0
In-laws	0.0	10.8	8.3	0.0	50.0	0.0
Other	3.4	5.4	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
N	(177)	(37)	(12)	(5)	(2)	(1)

By group, the urban elderly have more children living in two-person households than the rural, although the older respondents have more children living with them than younger. In the urban 75 and over age groups, a grandchild is the second most frequent person in the household. In all households over two persons, children appear most frequently except for rural 75 and over where there are no households greater than two persons.

In summary, more than half the respondents live with a spouse. A third live alone. The next most frequent members of the household are children (n=50), grandchildren (n=11), in-laws (n=6), and others (n=8). Others include siblings (n=5), fiance (n=1), friend (n=1), and housesitter (n=1).

The Characteristics of the elderly respondent. The marital status of the sample includes 57.4 percent married, 2.5 percent divorced, 35 percent widowed and 5.1 percent never married. More under 75 are married than 75 and over. For the urban and rural under 75 age groups respectively 65 percent urban and 71.4 percent rural are married. A very small proportion is divorced, none in the urban 75 and over group. The proportion of widowed persons increases with age. There are no never-married in the 75 and over rural group (Table 4).

Table 4. Sex and Marital Status of Respondents by Group.

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
<u>Sex</u>				
Female	57.0%	68.3%	45.1%	66.7%
Male	43.0	31.7	54.9	33.3
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
<u>Marital Status</u>				
Married	65.0%	34.1%	71.4%	33.3%
Divorced	2.0	0.0	4.4	2.2
Widowed	29.0	56.1	17.6	64.5
Never married	4.0	9.8	6.6	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Slightly more than 1 percent of the sample has less than an elementary education, about 14 percent have some high school and almost 36 percent have completed high school. Another 18 percent of the total sample have gone to college or vocational school and 8 percent have received a college degree. Four percent have some graduate work or have completed an advanced degree. The mean grade level is 11.7 with a median of 12.00. Only one in the total sample has no formal education (Table 5).

The younger groups have the highest educational achievements. The mean for urban under 75 is 12.5 years of education completed, median is 12.00; for rural under 75 the mean and median are both 12.00 years of education completed. The urban under 75 age group has the lowest mean and median.

Table 5. Educational Levels by Group

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Mean	12.5	10.5	12.0	10.8
Median	12.0	10.0	12.0	12.0

Sixty percent of the sample are retired. Another 13 percent are homemakers. Slightly more than 13 percent are employed full-time, and another 8.3 percent are part time workers. Of the remainder, 2.2 percent are unemployed and 3.2 percent are disabled. Table 6 shows the percentages by age and location. The rural under 75 group has the highest percentage employed (25.3%) and the lowest percentage retired (42.9%).

Table 6. Employment Status by Age and Location

<u>Employment Status</u>	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Full-time	13.0%	2.4%	25.3%	0.0%
Part-time	9.0	0.0	13.2	4.4
Unemployed (looking)	2.0	0.0	1.1	0.0
Unemployed (not looking)	1.0	0.0	2.2	0.0
Homemaker	12.0	2.4	14.3	22.2
Retired	58.0	90.2	42.9	71.1
Disabled	5.0	4.9	1.1	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Most of the respondents, 86 percent, have living children; 38 of them do not have children. Only 12 percent of the respondents, all of whom are 74 years of age or younger, have living parents. Of those 33 respondents, 25 have a mother who is living and 5 have a father who is living; 3 respondents have both parents living. The percentages of living children and living parents by age and location are shown in percent in Table 7.

Table 7. Kinship Patterns of the Elderly Respondents by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Living Children	89.0%	75.6%	89.0%	84.4%
Living Parents	14.0	0.0	20.9	0.0
Mother	78.6	0.0	73.7	0.0
Father	14.3	0.0	15.7	0.0
Both	7.1	0.0	10.5	0.0
Subtotal	100.0%	100.0%	100.0%	100.0%
N	(14)	(0)	(19)	(0)

Of the respondents 74 years of age or younger, 89 percent have living children. Of the older, rural sample, 84 percent have living children as compared to 76 percent of the older urban sample. The average number of children for each respondent who has children is 3.1. The most common number of children per respondent is two.

Table 8. Frequency and Percentage of Children by Age and Residence of Respondents with Children.

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
1	12.5%	22.6%	13.6%	28.9%
2	28.4	27.6	28.4	21.1
3	27.3	29.0	24.7	15.8
4	15.9	9.7	19.8	10.5
5	5.7	0.0	8.6	15.8
6	3.4	12.9	2.5	0.0
7+	6.7	0.0	2.4	7.9
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)
Mean	3.2	3.1	3.0	3.0

Table 8 indicates that respondents living in the urban areas have slightly more living children than do the respective age group of respondents living in rural areas.

Characteristics of the adult children of the elderly respondent.
 In the adult children's households, the mean household size is 3.2, the median is three. Households size ranges from 1 to 9 with one child residing in a convent. Around 10 percent of each of the age-residence groups' children lives alone. The children of older respondents are more likely to live in 2-person households (Table 9).

Table 9. Household Size of Adult Children by Parents' Age and Location

Household Size	Urban		Rural	
	<75	75+	<75	75+
1	11.8%	9.4%	10.5%	7.8%
2	24.7	45.2	16.6	40.3
3	26.9	18.8	16.6	20.8
4	24.2	20.3	33.0	18.2
5	9.7	4.7	17.7	3.9
6	2.2	1.6	3.9	2.6
7	0.5	0.0	1.7	5.1
8	0.0	0.0	0.0	0.0
9	0.0	0.0	0.0	1.3
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(81)	(77)

The adult children were asked how many in their households were over the age of 60: 452 respond none, 36 have one person over the age of 60, and 17 households include two persons over the age of 60. In all, 11 percent of the households include persons over 60. The respondents were also queried about the number in the household who were 18 years or younger; 193 households have no one 18 or under, but 62 percent of the households include persons 18 and younger. It is more likely that children whose parents are 75 or over have someone over the age of 60 in the household, and that those whose parents are under age 75 have someone 18 or under in the household (Table 10).

Table 10. Persons in Adult Children's Households who are over 60 and Under 18 by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Over 60				
1	6.5%	18.8%	1.7%	11.7%
2	3.2	9.4	1.1	3.9
Under 18	61.3%	43.7%	74.6%	49.4%
N	(186)	(64)	(181)	(77)

The mean age of the adult children who responded to the questionnaire is 39.9. The median age is 39. The ages range from 17 to 69 with 3.8 percent of the adult children sample aged 60 or over, and 62.2 percent between the ages of 35 and 60. The ages of the spouses are higher than the adult children respondents' ages. The mean is 40.9 and the median is 38. The ages range from 19 to 80 with 50.4 percent who are 39 years or less. Four percent of the spouses are 60 years or older. No spouse is present for 109 (21.6%) of the adult children who responded (Table 11).

Table 11. Ages of Adult Children and Spouses

	<u>Adult Children</u>	<u>Spouse</u>
Mean	39.9	40.9
Median	39.0	38.0
Range	17 to 69	19 to 80

Over 90 percent of the adult children rate their health as good to excellent (Table 12). Only 0.8 percent rate their own health as poor. Less than 2 percent of the respondents need some type of help with personal care. The majority of spouses have good or excellent health with 6.3 percent of the respondents rating the spouses' health as fair or poor. Only four spouses (1.0%) need help with personal care.

Table 12. Health of Adult Children and Spouse

	<u>Adult Children</u>	<u>Spouse</u>
Poor	0.8%	1.3%
Fair	7.7	5.0
Good	42.9	46.2
Excellent	48.6	47.5
Total	100.0%	100.0%
N	(504)	(398)

Less than 5% of the adult children respondents have less than a high school education. Over one-third have completed high school. The mean grade level completed is 13.9, the median 13.0. A quarter of the children have some college education, 22.2 percent have completed four years and received a degree, and over 13 percent have some graduate work including 6.7 percent with an MS and 1.8 percent with a Ph.D. or M.D. The children whose parents are 75 or over include somewhat fewer who have achieved a college degree and beyond than those whose parents are younger. The children whose parents are rural and under 75 have achieved the highest grade levels. About 43 percent of the spouses have a high school education; 4.5 percent have less. Approximately 19 percent have some college and 21.3 percent have received a B. S. or B. A. About twelve percent have gone to graduate school with 8.0 percent receiving an M. S. and 2.3 percent, a Ph. D. or M. D. (Table 13).

Table 13. Education of Adult Children and Spouses

<u>Highest Level Achieved</u>	<u>Adult Children</u>	<u>Spouse</u>
< High School	4.1%	4.5%
High School	38.2	42.8
< B.S., B.A., etc.	24.8	19.3
B.S., B.A., etc.	22.2	21.3
< M.S., M.A.	1.8	1.3
M.S., M.A.	6.7	8.0
< Ph.D., M.D., etc.	.4	0.5
Ph.D., M.D., etc.	1.8	2.3
	-----	-----
Total	100.0%	100.0%
N	(508)	(398)

Employment status of the adult children respondents includes student = 11 (2.2%), full-time employment = 333 (65.4%), part-time = 68 (13.4%), unemployed = 79 (15.6%), retired = 12 (2.4%), disabled = 5 (1.0%). Almost two-thirds are employed full-time. The children of younger parents are employed in greater numbers. Only older parents have children who are retired, and only the younger parents have children who are students. Spouses' employment status is very similar. Both are shown in Table 14.

Table 14. Employment Status of Adult Children and Spouses

	<u>Adult Children</u>	<u>Spouse</u>
Student	2.2%	1.5%
Full-time	65.4	68.5
Part-time	13.4	14.3
Unemployed	15.6	11.1
Retired	2.4	4.3
Disabled	1.0	0.3
	-----	-----
Total	100.0%	100.0%
N	(508)	(398)

The majority of the adult children respondents are married (n = 397, 78.1%). Thirty-eight (7.5%) are divorced, 3 separated, 12 (2.4%) widowed, and 57 (11.2%) never-married. The children of the urban under 75 parent group have the lowest percent married (68.4%) and the highest divorced (12.4%) and never married (17.2%); the rural under 75 is next in terms of never-married (11.0%). These percentages are very high for never-marrieds which generally run around 5 percent nationally.

The adult children have a total of 1159 living children. The number of children is from 1 to 13 with most (40.9%) having two children. Seventy-seven percent have three or fewer children (Table 15). There are 104 living grandchildren.

Table 15. Living Children and Grandchildren of Adult Children

	<u>Children</u>	<u>Grandchildren</u>
1	12.2%	16.3%
2	40.9	17.3
3	24.6	13.5
4	10.7	13.5
5	6.3	7.7
6	1.2	5.8
7+	4.1	25.9
	<hr/>	<hr/>
Total	100.0%	100.0%
N	(410)	(104)
Mean	2.8	4.9

The total household income as estimated by the respondents is categorized (Table 16). The most common income for each group of children is \$25,000 - 29,999. In general, children of urban parents have a greater income than do children of rural parents.

Table 16. Total Household Income of Adult Children

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Under 5,000	5.9%	4.7%	3.3%	2.6%
5,000 - 9,999	5.9	9.4	6.6	6.5
10,000 - 14,999	7.0	9.4	7.7	13.0
15,000 - 19,999	8.1	3.1	12.2	9.1
20,000 - 24,999	21.5	29.7	20.4	27.3
25,000 - 29,999	10.8	4.7	11.6	7.8
30,000 - 34,999	9.7	1.6	9.9	6.5
35,000 - 39,999	8.1	4.7	10.5	2.6
40,000 - 44,999	4.3	12.5	4.4	5.2
45,000 - 49,999	3.8	3.1	3.3	6.5
50,000 or more	15.1	17.2	9.9	13.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

The respondents were also asked about the adequacy of their income. About 7 percent say that their income is not adequate, 15.0 percent believe that their income only meets necessities, 54 percent feel they can afford some of the things they wanted but not all, 10 percent can afford everything they want, and 15 percent can afford everything they want and save something as well. The group whose parents are urban and 75 or over has the highest percentage who believe they can afford everything they want and still save (Table 17).

Table 17. Income Adequacy of Adult Children by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Not adequate	4.8%	7.8%	7.2%	9.1%
Meet necessities	16.1	17.2	11.0	19.5
Afford some, not all	58.7	35.9	56.4	51.9
Afford everything	8.1	12.5	11.0	9.1
Afford everything, save some	12.4	26.6	14.4	10.4
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Economic Situation

Information about income was gathered from the respondents by asking them if they received any of 16 different types of income, how much income they received from that particular source of income and the frequency with which that amount of income is received. The 16 income sources asked are: wages and salaries; farming; farm rental; other rental properties; own private business; roomers and boarders; dividends, interest and stock; social security retirement; other retirement pensions; other social security payments (such as SSI); unemployment or workmen's compensation; alimony; gifts; other sources; and one-time lump sum. If the respondent was unable or unwilling to provide this information, the respondent was asked for an overall yearly income.

Total income for 1985 was obtained by first calculating the amount of yearly income received from each source of income; this was done by multiplying the amount of the income by the frequency that income was received in 1985. For example, if a respondent received \$500.00 from Social Security every month, the yearly income for Social Security was $500 \times 12 = \$6000.00$. The yearly amount for each of the 16 sources of income were added together, resulting in the sum of their total income for 1985. If the respondent provided only an overall yearly income, this amount was used for the total income for 1985. If, however, the respondent failed to provide information on any of the 16 sources, or refused to answer any of the questions, their total income for 1985 was estimated with the help of linear multiple regression analysis.

The first step in analyzing the income for respondents with missing data was to discover the significant predictors of income for the respondents who did provide all of the income information. This procedure was done by using all potential predictors of income as independent variables in a regression equation; these include all 16 sources of income, value of house, education, marital status, sex and age of the respondent, and income adequacy. The resulting significant predictors of income were whether the respondent received any farm rental income, any other rental income, any other social security income, any farm income, a one-time lump sum, the value of their home (people who rented had zero value of home), and how adequate they feel their income is for them. The regression coefficients were then used in the following equation to estimate the total income for 1985 for those 46 (17%) respondents who did not supply all needed information:

$$\begin{aligned} \text{Total income} = & -11,009.95 + 27,545.86 \text{ (received other rental inc.)} \\ & + 25,601.20 \text{ (received farm rental inc.)} + .24 \text{ (value} \\ & \text{of house)} + 5,194.54 \text{ (income adequacy)} + 24,882.12 \\ & \text{(received other Soc. Sec. Inc.)} + 38,303.68 \\ & \text{(received lump sum)} + 17,243.16 \text{ (received farm} \\ & \text{income)}. \end{aligned}$$

Table 18 represents the percentage and number of people who receive any of the various sources of income. Social Security is the most common source of income received, particularly for the 75 and over age groups; dividends, interest, and stock is the next common source of income followed by other retirement sources. For respondents under 75 years of age, wages are another important source of income.

Table 18. Source of Income by Age and Residence.

	Urban		Rural	
	<75	75+	<75	75+
Wages	34.0%	4.9%	45.1%	6.7%
Farming	5.0	4.9	19.8	8.9
Farm rental	5.0	2.4	13.2	13.3
Other rental income	15.0	7.3	12.1	4.4
Business	11.0	4.9	14.3	2.2
Roomer, boarders	1.0	2.4	0.0	2.2
Dividends, interest, stock	69.0	70.7	79.1	80.0
Social Security	76.0	97.6	74.7	100.0
Other retirement	46.0	39.0	26.4	20.0
Other Social Security	7.0	4.9	4.4	2.2
Other Disability	1.0	2.4	7.7	0.0
Unemployment, WC	1.0	0.0	1.1	0.0
Alimony	0.0	0.0	0.0	0.0
Gifts	6.0	9.8	4.4	4.4
Other sources	8.0	2.4	7.7	4.4
Lump Sum	2.0	0.0	3.3	0.0
N	(100)	(41)	(91)	(45)

Percentages do not add up to 100% because each income source was asked separately.

Table 19 summarizes the average and median amounts of income received by the respondents who receive income from each source. The urban under 75 receive the highest amount of income from wages of the four groups; income from their own business, social security, other retirement and

other social security also contribute a substantial amount of money to urban under 75 years. Interest, dividends & stock provides the largest average amount of money for the urban, 75 or over; social security and rental income are other important sources of income. In general, the two urban groups receive more social security than the two rural groups.

As expected, the rural groups receive more income in farming and farm rental income than do the urban groups. For the rural, under 75 age group, however, wages provide more income than does farming. Social security also supplies a large portion of income for the two rural groups. Other retirement sources is another important source of income for all four group.

Table 19. Mean and Median Amounts of Income for The Respondents Who Receive the Income

Source of Income	Urban				Rural			
	<75		75+		<75		75+	
	Mean	Median	Mean	Median	Mean	Median	Mean	Median
Wages	\$20670	\$14740	\$13500	\$13500	\$17119	\$8000	\$3000	\$3000
Farming	4675	4750		NA	11321	8315	4750	4750
Farm Rental	2853	1650	3600	3600	7496	6000	4898	6000
Other rental Income	8417	3175	4747	4200	5447	1050	700	700
Business	16262	4500	3150	3150	8787	2000	6000	6000
Roomers, Boarders	1920	1920	1190	1190	--		600	600
Dividends, Interest, Stock	6635	3000	15824	2500	9611	2760	3612	2000
Social Security	7575	6972	7763	6840	6843	6000	5739	5400
Other Retirement	5771	3496	2643	2052	4220	2872	5780	2256
Other Social Security	6103	6384	2496	2496	4377	3840	2412	2412
Other Disability	2364	2364	1596	1596	1890	1400	--	--
Unemployment, WC	3559	3559	--	--	4000	4000	--	--
Alimony	--	--	--	--	--	--	--	--
Gifts	642	275	75	75	838	650	1300	1300
Other sources	3087	2400	7200	7200	6783	6500	2308	2308
Lump sum	35217	35217	--	--	65667	35000	--	--

The overall average of income for the total sample is \$24,285 with a range from -\$5,815 to \$323,812; the median, however, is \$16,574, suggesting that very high incomes force an artificially high average (Table 20). Less than 30 percent of the sample has an annual income of less than \$10,000. The older rural group has the lowest amount of income; almost 50 percent have an income of under \$10,000 as compared to 21 percent in the younger urban group. The younger, urban group receives the most income, followed by the younger rural group.

Table 20. Amount of Income by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Under \$5000	6.0%	12.2%	5.5%	11.1%
\$ 5,000 - \$ 9,999	15.0	19.6	17.6	37.9
\$10,000 - \$14,999	17.0	26.9	12.1	31.2
\$15,000 - \$19,999	12.0	12.2	18.6	4.4
\$20,000 - \$24,999	15.0	7.3	7.7	4.4
\$25,000 - \$29,999	9.0	7.4	12.1	2.2
\$30,000 - \$34,999	3.0	0.0	7.7	4.4
\$35,000 - \$44,999	9.0	2.4	5.5	0.0
\$45,000 - \$59,999	6.0	4.8	5.5	4.4
\$60,000 and over	8.0	7.2	7.7	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	25,529	22,700	23,096	13,237
	Median:19,946	Median:13,716	Median:19,000	Median:11,008
	Range:-620.87 to 121,000	Range:-5815 to 203,132	Range:-620.87 to 323,812	Range:3200 to to 57,807

The income amounts calculated in this study may seem high. The income distribution of those 60 years and older in a NCR study (NCR 178 Housing Committee, 1987) is similar to the income distribution in this study. About 30 percent of the sample in the NCR project had incomes of \$10,000 or less; another 40 percent had incomes between \$10,000 and \$20,000. For this study, 30 percent had incomes of \$10,000 or less, with the next 40 percent having incomes that range between \$10,000 and \$25,000.

Psychological Adjustment

Many changes in life occur for older people. Some of the changes such as reduced income, declining health, reduction in physical activity may affect psychological adjustment to aging.

Data collected in this study do not examine changes that occur to the individual but may be used to look at differences between age groups. Questions were asked on a variety of psychological measures of adjustment such as satisfaction and locus of control. Where the adult children were asked questions similar to those asked of parents, the children's responses are also included.

Satisfaction

Life satisfaction has been used frequently as an indicator of adjustment to aging. The respondents were asked how satisfied they are with the quality of their life, their housing situation, their neighborhood, their level of physical activity, their interaction with people, their physical health and their psychological health. The results indicate that the respondents are quite satisfied with these aspects of their lives.

Quality of life. About one-fourth (24%), of the persons are extremely satisfied with the overall quality of their lives; 59 percent are satisfied, 6 percent are somewhat satisfied and a similar percentage are mixed. Four percent are somewhat dissatisfied and one percent are dissatisfied. None of the groups report that they are extremely dissatisfied with their quality of life, and neither rural age group is dissatisfied. Some in all categories admit that they are somewhat dissatisfied, but that was still less than 4 percent of the total sample. There are more who report a mixed response in respect to satisfaction with quality of life than who report dissatisfaction, and the younger respondents are more represented than the older in this category. Still almost 90 percent of the respondents report they are satisfied -- from somewhat to extremely with their quality of life. When comparing means the 75 or over groups are more satisfied and under 75 groups the least satisfied (Table 21).

Table 21. Satisfaction with the Quality of Life by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%	0.0%	0.0%
Dissatisfied	1.0	2.4	0.0	0.0
Somewhat dissatisfied	4.0	2.4	3.3	4.4
Mixed	8.0	4.9	7.7	2.2
Somewhat satisfied	5.0	0.0	11.0	4.4
Satisfied	58.0	68.3	54.9	60.1
Extremely satisfied	24.0	22.0	23.1	28.9
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(141)	(91)	(45)
Mean	5.9	6.0	5.9	6.0

On a scale of 1 to 7 for Tables 21 through 27.

Housing. When the respondents were asked how satisfied or dissatisfied they are with their overall housing situation, the extremely satisfied represent 20 percent of the group; the ones that are satisfied, 64 percent; those somewhat satisfied, 6 percent; mixed, 2 percent; the ones that are somewhat dissatisfied, 5 percent; dissatisfied and extremely dissatisfied, 3 percent. Those who are over the age of 75 are in neither category of dissatisfaction or extreme dissatisfaction but, the urban 75 or over are the most satisfied and urban under 75 the least satisfied (Table 22).

Table 22. Satisfaction with Housing by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	1.0%	0.0%	0.0%	0.0%
Dissatisfied	4.0	0.0	3.3	0.0
Somewhat dissatisfied	5.0	4.9	4.4	8.9
Mixed	4.0	2.4	1.1	0.0
Somewhat satisfied	7.0	0.0	6.6	6.7
Satisfied	58.0	68.3	67.0	64.4
Extremely satisfied	21.0	24.4	17.6	20.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	5.7	6.0	5.8	5.9

Neighborhood. Neighborhood satisfaction is very high for all groups. Only the urban under 75 group express extreme dissatisfaction. Neither the urban 75 or over nor the rural under 75 express any dissatisfaction. In fact, the urban 75 and over group express no dissatisfaction with their neighborhood. Nineteen percent are extremely satisfied, 67 percent satisfied, and 6 percent somewhat satisfied. No trends are evident in terms of age or residence, but rural under 75 are the most satisfied and urban under 75 express the least satisfaction with neighborhood (Table 23).

Table 23. Satisfaction with the Neighborhood by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	1.0%	0.0%	0.0%	0.0%
Dissatisfied	4.0	0.0	0.0	2.2
Somewhat dissatisfied	2.0	0.0	4.4	4.4
Mixed	3.0	7.3	1.1	0.0
Somewhat satisfied	13.0	2.4	2.2	4.4
Satisfied	54.0	78.1	74.7	71.2
Extremely satisfied	23.0	12.2	17.6	17.8
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	5.8	6.0	6.0	5.9

Physical activities. The level of physical activity presents a slightly different view. About 13 percent of the respondents express some level of dissatisfaction with their level of activity. Over 17 percent of the urban 75 and over express some type of dissatisfaction and almost 18 percent of the rural 75 and over group do also. The rural under 75 group demonstrate the least dissatisfaction of any group. The urban 75 and over age group also has the lowest percentage of extreme satisfaction with the level of physical activity they are experiencing. It appears that as a person ages, they are more dissatisfied with their level of physical activity (Table 24) which is not surprising given constraints of declining health for those persons.

Table 24. Satisfaction with the Level of Physical Activity by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely satisfied	2.0%	2.4%	0.0%	2.2%
Dissatisfied	7.0	9.8	3.3	2.2
Somewhat dissatisfied	6.0	4.9	4.4	13.3
Mixed	5.0	0.0	5.5	6.7
Somewhat satisfied	10.0	14.6	7.7	11.1
Satisfied	57.0	65.9	61.5	53.4
Extremely satisfied	13.0	2.4	17.6	11.1
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	5.4	5.2	5.7	5.3

Interaction. Satisfaction levels with the numbers of people who are seen or talked with are very high. The urban under 75 group has the highest percentage of extreme satisfaction, but the urban 75 or over group expresses only satisfaction, no dissatisfaction or even mixed reactions. The urban groups have higher satisfaction with interaction than do the rural (Table 25).

Table 25. Satisfaction with the Level of Interaction by Age and Location.

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely satisfied	1.0%	0.0%	0.0%	0.0%
Dissatisfied	0.0	0.0	2.2	2.2
Somewhat dissatisfied	2.0	0.0	0.0	2.2
Mixed	3.0	0.0	2.2	2.2
Somewhat satisfied	5.0	4.9	4.4	4.4
Satisfied	64.0	80.5	79.1	75.7
Extremely satisfied	25.0	14.6	12.1	13.3
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	6.0	6.1	5.9	5.9

Physical health. Diminished energy and deterioration in health with advancing age are seen as inevitable. Satisfaction with physical health is an indicator of how the respondents feel about advancing age. Neither of the rural groups is extremely dissatisfied with their physical health. The rural, 75 and over group, however, is the least satisfied. Both older age groups have the lowest levels of satisfaction, but not appreciably lower than for the younger groups. The difference is between the somewhat satisfied and the extremely satisfied. There are more respondents in older age groups who are only somewhat satisfied than in the younger age groups. In the extremely satisfied levels the older age groups have the lowest percentages levels. Although they are satisfied, more of the older age groups are less satisfied with physical health than the younger, and more are dissatisfied than the younger. The rural younger age group is the most satisfied (Table 26).

Table 26. Satisfaction with Physical Health by Age and Location.

	Urban		Rural	
	<75	75+	<75	75+
Extremely satisfied	2.0%	7.3%	0.0%	0.0%
Dissatisfied	5.0	7.3	4.4	9.1
Somewhat dissatisfied	9.0	4.9	6.6	11.4
Mixed	3.0	0.0	1.1	2.3
Somewhat satisfied	12.0	19.5	12.1	15.9
Satisfied	56.0	51.2	62.6	52.2
Extremely satisfied	13.0	9.8	13.2	9.1
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	5.4	5.1	5.6	5.2

Psychological health. Levels of satisfaction with psychological health follow a trend similar to physical health. The older age groups are most dissatisfied, and consequently the least satisfied of any of the groups. There is relatively little difference by residence (Table 27).

Table 27. Satisfaction with Psychological Health by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%	0.0%	0.0%
Dissatisfied	2.0	4.9	2.2	0.0
Somewhat dissatisfied	2.0	0.0	0.0	2.3
Mixed	1.0	4.9	3.3	6.8
Somewhat satisfied	5.0	4.9	7.7	6.8
Satisfied	71.0	78.0	70.3	68.2
Extremely satisfied	19.0	7.3	16.5	15.9
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
Mean	6.0	5.7	5.9	5.9

Control over Life

It is felt that people who believe they have control over life and expect to continue to have control have an internal locus of control and are more satisfied with life. The respondents were asked how much control they feel they have over their lives right now. Control is measured on a scale from 1 to 7. The majority, 79 percent, feel they have a lot of control; some, 20 percent, feel they have some control and 1 percent respond they have no control. Surprisingly, the older groups perceive themselves to be in more complete control (or ranked themselves as 7) than the younger groups. In fact, the rural younger group has the lowest percentage of those perceiving complete control. Most of the sample, however, feel that on a scale of 1 to 7 with 1 being no control and 4 being the midpoint that they have some control over their lives. Higher percentages feel that they would like to have more complete control than they perceive they have. Only one person in the total sample prefers to have no control.

When asked how much control they expect to have in two years, there is a slight shift to less or no control. The rural 75 or older group expresses the most change to less control, but the rural younger age group feel they will have more control as they age (Table 28).

Table 28. Control over Life

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
	Mean	Mean	Mean	Mean
Have	6.3	6.2	6.2	6.5
Prefer	6.7	6.5	6.9	6.8
Expect	6.3	6.1	6.2	6.0
Scale	19.3	18.8	19.1	19.3

Control of Life Scale. The three items shown in Table 28 above were combined in a scale measuring the amount of control over life. The range is from 3.00 to 21.00 with 3 being no control and 21 complete control or internal control. The mean is 19.2 suggesting that the respondents have a high amount of control over their lives. The urban 75 or over group has the lowest reported amount of control.

Locus of Control. Certain other questions on locus of control were made into a scale (Table 29). The locus of control scale includes six questions. The higher the value on the scale the more internal the person is, the lower the scale the more external. The values of the scale range from 12 to 30. A very small percentage (1%) of the participants have scores above 25; 18 percent have scores that ranged between 21 and 25; the majority of the respondents (67%) are between 16 and 20, and 12 percent have scores between 12 and 15.

Table 29. Means on Items in Locus of Control Scale¹

	Total Sample	Urban, <75	Urban, 75+	Rural, <75	Rural, 75+
Many times you feel that you have little influence over the things that happen to you.	2.9	3.1	2.8	2.8	2.8
When you make plans, you are almost certain that you can make them work	3.7	3.8	3.7	3.6	3.7
People are lonely because they don't try to be friendly	3.9	3.9	3.8	3.9	4.0
You have often found that what is going to happen will happen	2.5	2.6	2.5	2.4	2.3
It is not always wise to for ahead because many things turn out to be a matter of good and bad fortune anyhow	2.5	2.6	2.6	2.5	2.2
There's not much use in trying too hard to please people; if they like you, they like you	2.9	3.0	2.8	2.9	2.5

¹On a scale of 1 to 5.

Worries

Table 30 clearly demonstrates that the respondents consider elderly persons to be a worried group. A large number of the respondents believe the elderly worry about the cost of health care, from 100 percent of each rural group to 97 percent of the urban under 75 group (Table 30). A large majority believe the elderly worry about decline in health, from 97.5 percent of urban 75 or over to 84.1 percent of rural 75 or over. Surprisingly, the rural older group shows the least concern of any of the groups over declining health, but it is still a very high percentage.

The rural under 75 group believe most frequently that elderly worry about who takes care of them if they become disabled (95.6%); fewer but still a majority of the respondents in the other groups believe the same, from 84.6 percent in the urban 75 or over group to the low of 81 percent in the urban under 75 group. The respondents believe further the elderly worry about becoming a burden to their families. This range showed a little more variation, with 97.8 percent of rural under 75, 93.2 percent of rural 75 or over, 91 percent urban under 75, and 82.9 percent urban 75 and over responding positively. The urban older group, however, expresses the least concern with being a burden.

Over 90 percent in each category believe the elderly worry about not being able to live independently. The range of responses showed similarities for the groups under 75, with higher incidence (98.9% rural, 95% urban) than for the groups 75 or over (92.7% urban, 90.9% rural). Fewer of these respondents believe, however, the elderly worry about being alone as they age. Responses range from 94.5 percent of the rural under 75 to 68.3 percent of the urban 75 or over who believe the elderly worry about being alone. The rural groups seem to believe that elderly worry about that more than do the urban groups.

A high of 92.3 percent in the rural under 75 group believe this to be a worry, while a low of 65 percent in the urban 75 or over group agree. In the mid-range, 85 percent and 84.1 percent of the urban under 75 and rural 75 or over groups, respectively, believe this is a worry. The younger rural group believes elderly are quite concerned about this problem which may reveal concerns about the future, living in an area where they are dependent on their own ability to drive as a means of transportation. The older urban ones may believe that most elderly have other means of transportation available.

The pattern of response is similar to the question of whether elderly persons worry about where they will be living in ten years. Again, the rural under 75 group registers the highest incidence of yes response (92.3%), with those in the other groups showing far less belief that elderly worry about this (76% to 79.5%) (Table 30).

Table 30. Perceptions of Worries Older People Have by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Being alone as they age	80.0%	68.3%	94.5%	84.1%
Become a burden to their families	91.0	82.9	97.8	93.2
Not being able to drive	85.0	65.0	92.3	84.1
Having health decline	95.0	97.5	95.6	84.1
Costs for health care becoming too great to handle	97.0	97.6	100.0	100.0
Not being able to live independently	95.0	92.7	98.9	90.9
Where they will live in the next ten years	76.0	76.9	92.3	79.5
Who will care for them if they become too ill or disabled to care for themselves	81.0	84.6	95.6	84.1
N	(100)	(41)	(91)	(45)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

The children overwhelmingly believe that older people worry about being alone (95.3%), being a burden (95.3%), not being able to drive (84.4%), declining health (98.6%), cost of health care (96.3%), living independently (96.3%), who will care for them (89.8%), and where they will live in 10 years (79.7%). The children do not believe that the worry about where the elderly will live in 10 years is as great as some of the other worries. The percentages are very similar to the way the parents responded about what older people worry about except for being alone as they age. The children believe the elderly are more concerned about this than their parents do (Table 31).

Table 31. Perceptions of Events Older People Worry About

	<u>Older Respondents</u>	<u>Children</u>
Being alone as they age	83.8%	95.3%
Becoming a burden to their families	92.4	95.3
Not being able to drive	84.5	84.4
Having their health decline	93.9	98.6
The costs for health care becoming too great to handle	98.6	96.3
Not being able to live independently	95.3	96.3
Where they will live in the next ten years	82.3	79.7
Who will take care of them if they become too ill or disabled to care for themselves	87.0	89.8
N	(277)	(508)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

In summary, the respondents believe the elderly worry about a number of specific items. Concerns about health and independence are believed by both parents and children to be more worrisome to the elderly than place of residence, but there are variations apparent where the rural elderly persons are more concerned than are the urban elderly persons. Specifically the rural younger age groups believe the elderly are more concerned about who will care for them if they become ill or disabled, where they will live in the next ten years, not being able to live independently, cost of health care, becoming a burden to the family, being alone as they age, and not being able to drive. The rural older age groups do not express the same level of concerns generally. It would appear that the beliefs of the younger group in rural areas are demonstrating concern over the future when the loss of a driver's license and the lack of public transportation will impede their efforts to live where they are currently living. The sparsity of health related services and migration of their children certainly may fuel their fears.

Health Status.

The largest percentage of each of the four groups rate their health as "good;" rural respondents under 75 years are most likely to choose this category (65.9%) (Table 32), with about half of each of the other groups choosing this response. About the same numbers of respondents in both the urban and rural groups under 75 years rate their health as "fair" or "excellent." In the urban group 75 or over, two to four times as many respondents report their health as "poor," compared to the other three groups.

Table 32. Health Status by Group Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Poor	5.0%	12.2%	3.3%	4.4%
Fair	19.0	24.4	15.4	33.3
Good	56.0	46.3	65.9	51.2
Excellent	20.0	17.1	15.4	11.1
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

About one-half (46.7%) of the rural 75 and over group respond that chronic bad never limits their activities, and about one-third of each of the remaining groups choose this response (Table 33). About half of both urban and rural under 75 years respond "seldom" to this item. Only respondents in the 75 or over groups indicate that activities are limited "all" the time by chronic bad health.

Table 33. Bad Health Limits Activities by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	35.0%	34.1%	35.2%	46.7%
Seldom	44.0	24.4	48.3	17.8
Some of the time	18.0	31.8	16.5	24.4
Most of the time	3.0	7.3	0.0	8.9
All of the time	0.0	2.4	0.0	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

About half of each of the four groups responded that handicaps never limit their activities, with larger numbers in the rural groups choosing this response (Table 34). There are some members of each group indicating that handicaps limit their activities "all" the time; the largest group is the urban 75 or over (7.3%).

Table 34. Being Handicapped Limits Activities by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	45.0%	46.3%	54.9%	57.8%
Seldom	32.0	17.1	28.6	11.1
Some of the time	11.0	17.1	13.2	17.8
Most of the time	8.0	12.2	2.2	11.1
All of the time	4.0	7.3	1.1	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Large majorities of each of the groups report using no aids for walking either inside or outside their homes. Ranges for using no aids inside the house are 80.5 percent (urban, 75 or over) to 98.9 percent (rural, under 75); and ranges for outside the house 75.6 percent (urban, 75 or over) to 98.9 percent (rural, under 75) (Table 35). The respondents were also asked what assistance, if any, they needed to walk up or down stairs. The majority of each of the groups likewise report "none" to this item, with 96 percent of the urban under 75, 78 percent of the urban 75 or over, and 100 percent of the rural under 75 groups and 89 percent of the rural over 75 giving this response.

Table 35. Aids to Walking by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
<u>Aids to walk inside</u>				
No help	97.0%	80.5%	98.9%	86.7%
Cane	2.0	12.2	1.1	11.1
Four-pronged cane	0.0	2.4	0.0	2.2
Walker	1.0	4.9	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)
<u>Aids to walk outside</u>				
No help	96.0%	75.6%	98.9%	84.5%
Cane	3.0	14.6	1.1	11.1
Four-pronged cane	0.0	4.9	0.0	2.2
Walker	1.0	4.9	0.0	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Based on the percentages of persons needing no help with the activities of daily living, the rural group under 75 are the most able to manage the activities and the urban and rural groups 75 or over have about the same percentages who are not as able to manage without help (Table 36). In only one activity (housework) do any of the rural group under 75 require assistance. Assistance in dressing is needed by only 6.6 percent of the rural 75 or over group, but by none of the other groups. Getting out of a chair requires assistance by respondents in the urban (4.9%) and rural (6.6%) groups 75 or over; and getting out of bed requires assistance by respondents in the urban under 75 (1%) and

rural 75 or over (2.2%). The most assistance is required for shopping, with 3 percent urban under 75, 13.3 percent rural 75 or over, and 24.4% urban 75 and over reporting need for assistance. Data were also gathered for assistance in eating (none in any group), toileting, and bathing.

Table 36. Assistance Needed to Perform Activities of Daily Living by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Prepare meals	0.0%	7.3%	0.0%	6.6%
Eating	0.0	0.0	0.0	0.0
Dressing, grooming	0.0	0.0	0.0	6.7
Using toilet	0.0	2.4	0.0	2.2
Bathing	2.0	17.1	0.0	4.4
Get out of chair	0.0	4.9	0.0	6.6
Get out of bed	1.0	0.0	0.0	2.2
Housework	2.0	19.6	1.1	11.0
Shopping	3.0	24.4	0.0	13.3
N	(100)	(41)	(91)	(45)

Percentages do not add to 100% because each item was asked separately.

Health was further assessed by asking respondents whether they had an illness listed in number of general categories. This is summarized in Table 37. Arthritis, which limits mobility, is reported by the largest numbers of respondents: urban 75 or over (61%), rural 75 or over (55.6%), urban under 75 (53%), and rural under 75 (42.9%). Heart problems rank second, with 40 percent of the rural 75 older age group reporting problems. This percentage is quite different from the other three groups, with a range of 22 percent to 26.8 percent reporting heart problems.

Table 37. Incidence of General Illnesses by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Arthritis	53.0%	61.0%	42.9%	55.6%
Heart condition	25.0	26.8	22.0	40.0
Deafness	7.0	34.1	6.6	26.7
Blindness	6.0	22.0	7.7	17.8
Respiratory condition	11.0	17.1	7.7	15.6
Stroke	5.0	4.9	1.1	2.2
Neuro-muscular condition	2.0	2.4	1.1	6.7
Amputation	1.0	0.0	1.1	2.2
Other	38.0	26.8	22.0	37.8
N	(100)	(41)	(91)	(45)

Percentages do not add to 100% because each item was asked separately with a yes-no response.

The data show that both urban and rural groups 75 or older report higher incidence in all illness categories than for the under 75 age groups. None of the remaining illnesses are experienced by a majority of the respondents. Sensory problems rank third and fourth. Deafness is reported by 34.1 percent urban 75 older age groups and by 26.7 percent rural 75 older age groups, and by only 7.7 percent and 6.6 percent under 75 by the rural and urban younger groups respectively.

Lung and respiratory problems are reported by the 75 or over group for 17.1 percent of the urban sample and 15.6 percent of the rural sample; and in the under 75 group for 11 percent urban and 7.7 percent rural respondents. Stroke, neuromuscular difficulties, and amputation are reported for very few respondents. Highest incidence in these three areas is: stroke - 5 percent of both urban groups; neuromuscular - 6.7 percent of the rural 75 or over group; and amputation - 2.2 percent of the rural 75 or over group. Responses to an "other" category of health problems elicits similar rates for the urban under 75 (38%) and rural 75 or over (37.8%) groups and for the urban 75 or over (26.8%) and rural under 75 (22%) groups. Diabetes and high blood pressure are mentioned

More of the urban respondents 75 or over than the other three groups respond that they never feel sad or blue for no apparent reason; specifically, 53.6 percent urban and 40.9 percent rural (Table 38). In the under 75 groups, "never" is given by 37 percent urban and 33 percent rural. The responses of "seldom" follow a similar pattern. For those under 75, 50.5 percent rural and 48 percent urban give "seldom;" while for those 75 or over, 36.4 percent rural and 22 percent urban give the "seldom" response. The range for the response "some of the time" is a high of 22.7 percent in the rural 75 older group, to a low 14 percent in the urban under 75 group. "Most of the time" is reported by 4.9 percent of the urban 75 older group regarding feeling sad or blue.

Table 38. Feeling Sad, Blue by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	37.0%	53.6%	33.0%	40.9%
Seldom	48.0	22.0	50.5	36.4
Some of the time	14.0	19.5	16.5	22.7
Most of the time	1.0	4.9	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

The persons who responded anything but "never" to the previous item were asked how often those sad feelings limited their activities. "Never" is elicited in a majority of each group, with 73 percent in the urban under 75 and in the rural 75 or over groups giving this response, and 57.5 percent rural under 75 and 50 percent urban 75 and over giving a "never" response (Table 39). "Seldom" is reported by 31.1 percent of the rural under 75 group, which is twice as often as the urban group of this age, four times as often as the rural 75 or over group. Members of all four groups report that their activities are limited by sad feelings "most of the time:" 11.1 percent urban 75 or over, 3.8 percent rural 75 or over, and 1.6 percent rural and urban under 75.

Table 39. Incidence That Feeling Sad, Blue Limit Activities by Age and Location for Respondents Who Report Feeling Sad, Blue

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	73.0%	50.0%	57.5%	73.1%
Seldom	15.9	27.8	31.1	7.7
Some of the time	9.5	11.1	9.8	15.4
Most of the time	1.6	11.1	1.6	3.8
Total	100.0%	100.0%	100.0%	100.0%
N	(63)	(18)	(61)	(26)

The majority of each of the groups have not put off any treatment for physical or emotional problems, but those 75 or over tend to seek treatment more frequently. Those who do put off treatment in the 75 or over group include 9.1 percent rural and 4.9 percent urban respondents; and those in the under 75 group include 14 percent urban and 13.2 percent rural. The reasons given most frequently for putting off treatment include: "don't like to (seek treatment); too busy; no money; and feel there is no cure (for problem)."

In summary, most of the respondents report they are in good to excellent health. As a group they are not often limited in their activities by their health or handicaps, though sometimes they may be. Most require little assistance in moving about or with their daily activities. Arthritis followed by heart disease are the most serious chronic diseases with the older groups in both categories experiencing the highest incidences of illnesses. Most of the respondents experience little emotional distress although some do but it is usually not enough to interrupt activities. Most of the respondents seek treatment for their health related problems and do not tend to put it off.

CHAPTER 4. EXTERNAL AND INTERNAL SUPPORT

The purpose of Chapter IV is to discuss the external and internal supports of the older respondents. The supports are divided into three categories. The section on family supports describes both the elderly respondents' views of their family support and interaction and the views of the elderly respondents' adult children to the same items.

The second section examines the elderly respondents' pattern of use of various services found in the community or county in which they live. The use, level of satisfaction with the service, and ways of getting to the service are described.

Some ways of providing a certain measure of psychological support are discussed in the last section of the chapter. Both the elderly respondent and the adult children's replies were included on certain of these items.

Family Support

The next section describes the interaction and relationships on the family support system between the older parents and their adult children, from both the parents' and children's views.

Parents. When the respondents were asked how often they visit their children, the most common response (36-40.6%) is several times a year for the four subgroups (Table 40). For respondents who are under 75 years of age, little difference occurs in the distribution of their responses. For the older group, 32.3 percent of the urban group visit their children in their home at least once a month compared to only 21.1 percent of the rural group. Conversely, 16.1 percent of the older urban group visit their children at least once a week; 31.6 percent of the older rural group visit their children at least once a week, suggesting that the rural group visits their children more often than does the urban group.

Table 40. Parents Visit Their Childrens' Home by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	2.2%	3.2%	3.7%	2.6%
Less than once a year	6.7	0.0	3.7	0.0
About once a year	7.9	9.7	6.2	5.3
Several times a year	36.0	35.5	40.6	36.8
At least once a month	23.5	32.3	19.8	21.1
At least once a week	16.9	16.1	19.8	31.6
Daily	3.4	0.0	3.7	2.6
Child lives at home	3.4	3.2	2.5	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(89)	(31)	(81)	(38)

This contrast within the older sample by residence does not extend to the respondents' answers to how often their children visit them. The distribution of responses is similar for the two older subgroups (Table 41).

Table 41. Children's Visit to Their Parents' Home by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	0.0%	0.0%	2.5%	0.0%
Less once a year	5.6	0.0	2.5	0.0
About once a year	6.7	3.2	6.2	2.6
Several times a year	21.3	22.6	39.4	26.3
At least once a month	23.6	16.1	18.5	13.2
At least once a week	25.9	42.0	18.5	44.7
Daily	13.5	12.9	9.9	13.2
Children live at home	3.4	3.2	2.5	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(89)	(31)	(81)	(38)

The difference in responses between the age groups, however, is interesting. For the response, "at least once a week," the younger age groups in both the urban and rural samples have a lower frequency of response, 25.9 percent and 18.5 percent respectively, as compared to the older age groups, 42 percent and 44.7 percent respectively. Table 41 also indicates that children of the younger rural respondents visit their parents less often than do the children of other three groups. Only 28.4 percent of the respondents say that their children visit their home at least once a week or daily. In summary, the respondents indicate that their children visit them more often in their home than they (the respondents) visit their children in their children's home.

To obtain in-depth information concerning the relationship between an older parent and his/her adult child, the respondents were asked a number of questions about the amount and type of relationship that they have with one of their children. If the respondent has only one child, information was gathered about that child. If the respondent has two or more children, the interviewer selected a child through a random selection sheet. The sample size for this section is 238; 39 respondents are omitted from the analysis because they have no children or have refused to answer this part of the questionnaire.

Of the children selected, over 50 percent are the oldest or the only child. Twenty-seven percent of the selected children are the second oldest child, with a percentage range of 18.4 percent-29 percent across each of the four groups (Table 42). The birth order of the remaining 20 percent of the selected children ranges from being the 3rd born child to the 10th born child.

Table 42. Birth Order of Selected Child by Age and Location

Birth Order	Urban		Rural	
	<75	75+	<75	75+
1	50.1%	41.9%	55.6%	65.7%
2	28.4	29.0	27.2	18.4
3	10.2	12.9	8.6	5.3
4	5.7	6.5	4.9	5.3
5	3.4	0.0	2.5	5.3
6-10	2.2	9.7	1.2	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

Overall, the most frequent response to the question "how often do you talk on the telephone with the selected child" is "at least once week;" 35.0 percent answer in this way, but the percentage varies between age groups (Table 43). For the urban and rural respondents under 75 years of age, 35.2 percent and 39.6 percent respectively, talk to the selected child" at least once a month; 31.8 percent and 29.6 percent, respectively, talk to the selected child at least once a week. For the older age group, however, about 25 percent of both the urban and rural respondents talk to the selected child at least once a month," 48.3 percent and 42.1 percent, respectively, talk to the selected child "at least once a week" suggesting that people 75 or over talk more often to their children than do those under 75, particularly if they live in an urban area.

Table 43. Telephone Interaction with Selected Child by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	2.3%	6.5%	1.2%	2.6%
Less than once a year	0.0	0.0	0.0	0.0
About once a year	1.1	0.0	6.2	0.0
Several times a year	9.1	6.5	8.6	18.4
At least once a month	35.2	25.8	39.6	26.4
At least once a week	31.8	48.3	29.6	42.1
Daily	12.5	9.7	12.3	10.5
Child lives at home	8.0	3.2	2.5	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

The most common response for the questions regarding the sending to and receiving mail from the selected child several times a year (Table 44); "never" is the next frequent response, with 19.7 percent receiving letters and 30.7 sending letters. The respondents are more likely to receive mail from the selected child than to send mail to the selected child. About 50 percent receive mail from the selected child several times a year. Almost one-third never send mail to the selected child.

Table 44. Mail Exchange with Selected Child

	<u>Receive mail</u>	<u>Send mail</u>
Never	19.7%	30.7%
Less than once a year	2.5	4.2
About once a year	8.0	6.3
Several times a year	50.5	35.7
At least once a month	10.9	14.3
At least once a week	4.2	4.6
Daily	0.0	0.0
Child lives at home	4.2	4.2
	-----	-----
Total	100.0%	100.0%
N	(238)	(238)

In response to the question how often they see the selected child face-to-face, 18 percent of the respondents say they see the child, face-to-face at the most about once a year, 26 percent of the respondents see their child several times a year, 17 percent see them at least once a month, 27 percent see them at least once a week and 8 percent of the respondents see the selected child face-to-face everyday. The urban residents see the selected child face-to-face more often than do the rural residents; 40 and 45 percent respectively, of the young and old urban respondents see the selected child at least once a week or daily. Only 27 and 34 percent of the young and old rural respondents see the selected child at least once a week or daily (Table 45).

Table 45. Face to Face Contact with Selected Child by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	1.1%	3.2%	1.2%	2.6%
Less than once a year	5.7	0.0	6.2	0.0
About once a year	10.2	9.7	14.8	13.2
Several times a year	23.8	25.8	27.2	26.3
At least once a month	11.4	12.9	21.0	23.7
At least once a week	30.7	38.7	18.5	26.3
Daily	9.1	6.5	8.6	7.9
Child lives at home	8.0	3.2	2.5	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

About 70 percent of the sample say that the selected child does not help them with any everyday tasks. A series of five questions concerned with different types of tasks were asked to the 73 respondents who reported that the selected child does help them with everyday tasks. Most (95.9%) of the respondents do not receive any help from the selected child with bathing and dressing tasks (Table 46). Overall, about 74 percent of the 73 respondents do not receive any help from the selected child with fixing meals. Over half of the 73 respondents never receive help from the selected child in doing light tasks. The respondents are much more likely to receive help from the selected child in doing heavy tasks; 34.3 percent receive help several times a year with heavy tasks and 16.4 percent receive help at least once a week or daily. About 30 percent do not receive any help from the selected child with doing heavy tasks. The respondents report that the selected child takes them on errands; 12.5 percent are taken on errands at least once a week, 16.7 percent go on errands with the selected child at least once a month, and 20.8 percent are taken on errands several times a year. About forty-six percent never go on errands with the selected child.

Table 46. Assistance with Tasks by Selected Child

	<u>Bathing, dressing</u>	<u>Fix meals</u>	<u>Light tasks</u>	<u>Heavy tasks</u>	<u>Takes on errands</u>
Never	95.9%	73.9%	52.1%	30.2%	45.8%
Less than once a year	0.0	1.4	1.4	4.1	2.8
About once a year	0.0	1.4	4.1	5.5	1.4
Several times a year	2.7	9.6	13.7	34.3	20.8
At least once a month	0.0	5.5	12.3	6.8	16.7
At least once a week	1.4	8.2	13.7	16.4	12.5
Daily	0.0	0.0	2.7	2.7	0.0
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(73)	(73)	(73)	(73)	(73)

Approximately 43 percent of the respondents never receive advice from the selected child (Table 47); 25.2 percent say that they have received advice several times a year from the selected child. Most respondents (91.1%) do not receive any financial assistance from their children. When asked how often the selected child helps in an emergency, 50.8 percent respondents report never; About 22.3 percent receive help less than once a year or once a year; 21 percent receive help several times a year.

Table 47. Assistance with Additional Tasks by Selected Child

	<u>Gives advice</u>	<u>Gives lends money</u>	<u>Helps in emergency</u>
Never	43.4%	91.1%	50.8%
Less than once a year	8.4	3.4	11.8
About once a year	6.7	0.4	10.5
Several times a year	25.2	3.4	21.0
At least once a month	7.1	1.3	2.5
At least once a week	8.4	0.4	2.1
Daily	0.8	0.0	1.3
Total	100.0%	100.0%	100.0%
N	(238)	(238)	(238)

A majority of the respondents (85%) respond "a great deal" to the question "how much does the selected child trust you?" (Table 48). A large number of respondents also believe that the selected child cares about them "a great deal;" the percentage is 85.

Table 48. Quality of Relationship with Selected Child

	<u>Child trusts parent</u>	<u>Child cares about parent</u>	<u>Parent trusts child</u>	<u>Parent cares about child</u>
Not at all	0.8%	0.0%	0.0%	0.0%
A little	1.3	0.0	0.8	0.0
Somewhat	0.4	2.1	2.1	0.4
Quite a bit	12.2	12.6	8.0	4.6
A great deal	85.3	85.3	89.1	95.0
Total	100.0%	100.0%	100.0%	100.0%
N	(238)	(238)	(238)	(238)

A majority of each of the groups (89.1%) responded that they trust the selected child "a great deal." The largest percentage is in the "great deal" category in response to how much the respondent cares about the selected child (95%).

The majority of respondents in each of the four groups either agree or strongly agree that their relationships with the selected child is as they hoped it would be (Table 49); about half of each group agree. More variation among the groups is seen in the response category, "strongly agree," with the two urban groups showing the greatest gap: 30.7 percent for those under 75, and 54.9 percent for those 75 or over. The rural groups show similar responses: 47.4 percent for those 75 or over and 40.7 percent for those under 75.

Table 49. Relationship with Selected Child as Hoped by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	3.4%	0.0%	0.0%	2.6%
Disagree	6.8	3.2	3.7	0.0
Neither	3.4	0.0	3.7	0.0
Agree	55.7	41.9	51.9	50.0
Strongly agree	30.7	54.9	40.7	47.4
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

The majority of each of the groups agree that their views are similar to those of the selected child with lowest frequency reported by the urban 75 or over (58%) and rural under 75 (59.2%) groups (Table 50); the highest "agree" percentage is from the rural 75 or over (76.3%), and the urban under 75 group at 60.2 percent. The second most frequent response for the urban under 75 group is "disagree" (17%), followed closely by "strongly agree" (14.8%). For the other three groups, the second most frequent response is "strongly agree," with a range from 13.2 percent to 24.7 percent.

Table 50. Views Similar to Selected Child by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	2.3%	0.0%	0.0%	2.6%
Disagree	17.0	16.1	9.9	7.9
Neither	5.7	6.5	6.2	0.0
Agree	60.2	58.0	59.2	76.3
Strongly agree	14.8	19.4	24.7	13.2
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

Over half of both urban groups and the rural, under 75 group and only 42 percent of the rural 75 or over group report that the selected child would not be the child they would turn to first in an emergency. The respondents who report "no" were then asked who is the child that they are most likely to turn to. Table 51 presents a summary of the birth order of the child that the respondents are most likely to turn to in an emergency.

Table 51. Birth Order of the Child Respondent Turns to in an Emergency by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
1st	39.9%	67.7%	48.3%	63.2%
2nd	27.3	6.5	29.6	23.7
3rd	15.9	22.6	9.9	7.9
4th	5.7	0.0	4.9	2.6
5th	2.3	0.0	1.2	0.0
6th	1.1	0.0	0.0	0.0
7th	1.1	0.0	1.2	0.0
8th	1.1	0.0	0.0	0.0
9th	0.0	3.2	0.0	0.0
Refused to choose	5.6	0.0	4.9	2.6
Total	100.0%	100.0%	100.0%	100.0%
N	(88)	(31)	(81)	(38)

The child that is most likely to be chosen first is the oldest child (this includes only children), particularly for the 75 or over age group. The second oldest child is the next child most likely to be turned to for both rural groups and the urban under 75 years group; for the urban, 75 years or older group, the 3rd oldest child is the second most likely child to be chosen.

Five percent of all the participants strongly agree with the statement "children should take care of their parents, in whatever way necessary when they are sick"; 52 percent agree; 7 percent neither agree nor disagree; 31 percent disagree; and 5 percent strongly disagree. The older respondents, 75 or over, have a higher percentage of persons that agree with the statement (Table 52). About sixty-five percent of the urban and 73.3 percent of the rural older groups either strongly agree or agree. The urban and rural younger respondents, 54 percent and 50.5 percent, respectively, agree or strongly agree with the statement.

Table 52. Children Take Care of Parents by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	7.0%	4.9%	4.4%	0.0%
Disagree	33.0	19.5	38.5	20.0
Neither	6.0	9.8	6.6	6.7
Agree	50.0	65.8	43.9	66.6
Strongly agree	4.0	0.0	6.6	6.7
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Three percent of the parents respond that they strongly agree that adult children should give financial help if the parents need it; 62 percent agree, 8 percent neither agree or disagree; 23 percent disagree; and 4 percent strongly disagree. The older groups are more likely to agree or strongly agree than the younger groups: 73.3 percent for rural 75 or over, 65.8 percent for urban 75 or over, 54 percent for urban under 75 and 51.5 percent for rural under 75 (Table 53).

Table 53. Children Give Financial Help by Age and Location

	<u>Urban</u>		<u>Urban</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	4.0%	4.9%	5.5%	0.0%
Disagree	20.0	22.0	30.8	22.2
Neither	10.0	2.4	7.7	6.7
Agree	63.0	70.7	52.7	68.7
Strongly agree	3.0	0.0	3.3	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Three percent of the respondents strongly agree that parents are entitled to some return for the sacrifices they have made for their children; 40 percent agree or strongly agree and 6 percent neither agree nor disagree. Forty-five percent of the persons disagree and 6 percent strongly disagree. The group of rural, 75 or over have the highest percentage of agreement with the statement (64.4%) agreeing with the statement (Table 54). The group with the lowest percentage in this category are the urban under 75; in this case, 32 percent of the respondents either agree or strongly agree. In general, the older age groups are more likely to agree with the statement than the younger age categories.

Table 54. Parents Entitled to Return for Sacrifices by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	9.0%	4.9%	6.6%	2.2%
Disagree	51.0	43.9	46.1	26.7
Neither	6.0	7.3	5.5	6.7
Agree	32.0	43.9	35.2	64.4
Strongly agree	2.0	0.0	6.6	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

The majority of the respondents do not agree with the statement "no matter what, adult children should bring their parents into their home if the parents need help." Twelve percent disagree strongly and 52 percent disagree. Ten percent report they neither agree nor disagree. Twenty-five percent agree and only 1 percent strongly disagree with the statement. The persons 75 or over have highest percentages in the agree, strongly agree categories. Of these older persons, the urban group has 39 percent and the rural group has 35.6 percent, respectively, in this category. The younger age categories are more likely to disagree or strongly disagree with the statement than the older age categories; 71 percent of the urban and 64.8 percent of the rural younger groups either disagree or strongly disagree compared to 53.7 percent and 57.7 percent of the urban and rural older groups (Table 55).

Table 55. Adult Children Bring Parents into Home by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Strongly disagree	10.0%	2.4%	18.7%	8.9%
Disagree	61.0	51.3	46.1	48.8
Neither	9.0	7.3	15.4	6.7
Agree	19.0	39.0	18.7	35.6
Strongly agree	1.0	0.0	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Children. When the children are asked how often they visit their parent, the most common response is several times a year (Table 56); about 30 percent fit in this category. For children of parents who live in urban areas, the most common response is about once a week, but not daily. About 47 percent and 36 percent of the children of the 75 and older urban and rural groups, respectively, visit their parents at least once a week or daily; the corresponding percents for the younger urban and rural groups are 33.4 percent and 18.8 percent. Children of the older respondents tend to visit more frequently than children of the younger respondents. Almost four percent of the 508 children in the sample live with their parents.

Table 56. Children's Report of Their Visits to Parents' Home by Parents' Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	0.0%	0.0%	0.0%	0.0%
Less than once a year	9.7	10.9	7.7	2.6
About once a year	12.9	9.4	14.9	7.8
Several times a year	22.0	12.5	42.0	33.8
At least once a month	13.4	17.2	15.5	19.5
At least once a week	29.6	32.8	13.3	31.2
Daily	3.8	14.1	5.5	5.2
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(71)

The children report that their parents do not visit them as often as they visit their parents. Overall, about 7 percent of the children say that their parents visit them at least once a week or daily. The most frequent response is several times a year with 36 percent of the children responding in that category. The 75 or over age groups are not as likely to visit their children as the under 75 age groups (Table 57). Almost 13 percent of the children of the older urban group and 19.5 percent of the children of the older rural group report that their parents never visit them; 10 of the children of the younger groups report that their parents never visit them.

Table 57. Children's Report of Parents' Visits to Them by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	4.8%	12.5%	5.0%	19.5%
Less than once a year	15.6	12.5	10.5	15.6
About once a year	11.3	10.9	18.2	6.5
Several times a year	32.3	35.9	40.8	32.4
At least once a month	18.8	18.8	16.6	22.1
At least once a week	8.1	4.7	7.2	3.9
Daily	0.5	1.6	0.6	0.0
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Children of the 75 years or older respondents talk with their parents on the telephone more often than the children of the younger age groups (Table 58). Almost 63 percent and 54 percent, respectively, of the children of the urban and rural groups 75 years or older report that they talk to their parents at least once a week or daily. For the children of the under 75 age group, 50.1 percent and 37 percent, respectively, of the children talk to their parents on the phone at least once a week or daily. About 16 percent of all the children talk to their parents several times a year.

Table 58. Children's Report of Telephone Interaction with Parents by Parent's Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	0.5%	3.1%	0.0%	0.0%
Less than once a year	1.6	3.1	1.1	0.0
About once a year	1.1	1.6	1.7	0.0
Several times a year	13.4	10.9	18.8	18.2
At least once a month	24.7	15.6	40.3	28.6
At least once a week	37.3	43.8	29.3	40.2
Daily	11.8	18.8	7.7	13.0
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Less than one-third of the children never send nor receive any letters or postcards to or from their parents (Table 59 and Table 60). Children of the older urban respondents are the least likely to exchange mail with their parents; 46.8 percent of those children never send letters or postcards and 59.3 percent never receive any mail from their parents. The most frequent rate of mail exchange is several times a year.

Table 59. Children's Report of Sending Mail to Parents by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	28.5%	46.8%	18.8%	27.2%
Less than once a year	8.6	4.7	8.8	6.5
About once a year	11.3	9.4	9.9	9.1
Several times a year	30.7	25.0	46.0	32.5
At least once a month	7.5	7.8	8.8	10.4
At least once a week	4.8	1.6	6.6	14.3
Daily	0.0	1.6	0.0	0.0
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Table 60. Children's Report of Receiving Mail from Parents by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	23.7%	59.3%	27.6%	27.3%
Less than once a year	10.8	4.7	9.9	9.1
About once a year	11.8	9.4	10.5	6.5
Several times a year	30.0	14.1	39.8	37.6
At least once a month	10.8	7.8	6.1	9.1
At least once a week	4.3	1.6	5.0	10.4
Daily	0.0	0.0	0.0	0.0
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

One-third of the children report that they see their parents face to face several times a year; another one-third say that they see their parents at least once a week or daily. The children of the rural respondents are less likely to see their parents than the children of the urban respondents (Table 61); differences due to the age of the parent are also noted. Twenty-eight percent of the children of the under 75 urban group and 14.1 percent of the children of the 75 years and older urban group see their parents several times a year as compared to 47 percent and 38.9 percent, respectively, of the children of the under 75 and 75 or over rural groups. The respective percentages of the children seeing their parents at least once a week or daily are 34.9 percent, 53 percent, 22.1 percent and 36.4 percent.

Table 61. Children's Report of Face to Face Contact with Parents by Parents' Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	0.0%	0.0%	0.0%	0.0%
Less than once a year	4.3	6.3	4.4	1.3
About once a year	9.1	9.4	8.3	6.5
Several times a year	28.0	14.1	47.0	38.9
At least once a month	15.1	14.1	17.1	16.9
At least once a week	30.6	38.9	16.0	31.2
Daily	4.3	14.1	6.1	5.2
Child lives at home	8.6	3.1	1.1	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Two hundred thirty eight (46.8%) of the children report that they help their parents with everyday tasks or errands. If the parent is in the older age category, the child is more likely to report helping; 59 percent of the children of the 75 or older age groups report helping their parents with tasks or errands.

Of the children who report that they help their parent with everyday tasks, 90.5 percent do not help their parents with bathing or getting dressed (Table 62). Fifty-three percent of the children never fix any meals for their parents. The second most frequent response for how often children fix meals for their parents is several times a year with 22.7 percent of the children responding in this category.

Almost 29 percent of the children never do any light tasks for their parents; the same percentage, however, report that they do light tasks for the parents several times a year. Thirteen percent of the children report that they do light tasks for their parents at least once a week or daily.

Table 62. Children's Report of Assisting with Tasks

	<u>Bathing, dressing</u>	<u>Fix meals</u>	<u>Light tasks</u>	<u>Heavy tasks</u>
Never	90.5%	53.0%	28.8%	19.3%
Less than once a year	2.5	4.6	11.3	8.0
About once a year	0.8	7.6	10.1	15.5
Several times a year	2.1	22.7	28.8	34.1
At least once a month	0.8	4.6	8.0	10.9
At least once a week	2.5	5.0	8.4	10.5
Daily	0.8	2.5	4.6	1.7
Total	100.0%	100.0%	100.0%	100.0%
N	(238)	(238)	(238)	(238)

Children are more likely to help their parents with heavy tasks than light tasks. Less than 20 percent of the children respond that they never do any heavy tasks for their parents. Over 34 percent report that they do heavy tasks for their parents several times a year; 12.2 percent of the children say that they help with heavy tasks at least once a week or daily.

When asked how often they take their parents shopping or on errands, the children of the younger age groups are not as likely to help as the children of the older age groups (Table 63). About 50 percent of the children of the younger groups report that they never take their parents shopping as compared to 39.6 percent of the children of the urban 75 years and older group and to 19.6 percent of the children of the rural 75 years or older group. Almost 40 percent of the children of the urban 75 or over group and 21.8 percent of the children of the rural 75 or over group take their parents shopping or on errands at least once a month or at least once a week but not daily.

Table 63. Children's Report of Taking Parents on Errands by Parents' Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	51.0%	39.5%	51.5%	19.6%
Less than once a year	10.0	2.6	9.4	13.0
About once a year	6.7	2.6	14.1	26.0
Several times a year	17.8	15.8	15.6	19.6
At least once a month	5.6	15.8	4.7	10.9
At least once a week	7.8	23.7	4.7	10.9
Daily	1.1	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(90)	(38)	(64)	(46)

Twenty-three percent of the children report that they never give their parents any advice. Children of older parents give more advice than do children of younger parents (Table 64). Over 23 percent and 16.9 percent of the children of the urban and rural 75 or older groups, respectively, give advice to their parents at least once a month, once a week or daily as compared to 16.2 percent and 8.3 percent, respectively, of the urban and rural younger age groups.

Table 64. Children's Report of Giving Parents Advice by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	15.1%	39.1%	22.7%	27.3%
Less than once a year	14.5	9.4	14.9	11.7
About once a year	11.8	4.7	18.2	11.7
Several times a year	42.4	25.0	35.9	32.4
At least once a month	9.7	7.8	3.3	7.8
At least once a week	6.5	12.5	3.9	7.8
Daily	0.0	3.1	1.1	1.3
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

The children of the older parents, however, are more likely to report that their parents never give them advice than are the children of the younger parents. Approximately 10 percent of the children of the younger groups say that their parents never give them advice (Table 65); 32.9 percent of the children of the urban 75 or older group and 22.1 percent of the children of the rural 75 or older group say that their parents never give them advice. Almost 30 percent of the children of urban under 75 group report that their parents give them advice at least once a month, once a week or daily. Only 16 percent or less of the children of the other three groups report that their parents give them advice at least once a month, once a week or daily. Overall, 36 percent of the children report that their parents give them advice several times a year.

Table 65. Children's Report of Parents Giving Advice by Parents' Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	10.8%	32.9%	9.9%	22.1%
Less than once a year	11.3	20.3	12.7	15.6
About once a year	7.5	7.8	13.8	19.5
Several times a year	40.8	23.4	45.9	27.2
At least once a month	14.5	3.1	9.4	7.8
At least once a week	9.7	7.8	5.5	5.2
Daily	5.4	4.7	1.1	2.6
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

When asked how often they help their parents in an emergency, 57.1 percent of the children respond never or less than once a year (Table 66). Another 37.6 percent of the children report that they help their parents in an emergency about once a year or several times a year. Only 5.4 percent of the children say that they help their parents in emergencies at least once a month, once a week or daily. The corresponding statistics for how often the children report that their parents help them out in an emergency are: 60.3 percent of the children report never or less than once a year, 34.7 percent say about once or several times a year and 5 percent of the children report at least once a month, once a week or daily.

Table 66. Children's Report of Exchange of Help in an Emergency

	Child helps parent	Parent helps child
Never	24.6%	26.5%
Less than once a year	32.5	33.8
At least once a year	17.1	14.8
Several times a year	20.5	19.9
At least once a month	1.8	2.2
At least once a week	2.0	1.6
Daily	1.6	1.2
Total	100.0%	100.0%
N	(508)	(508)

Over three-fourths of the children report that they have not nor have they ever given or loaned money to their parents (Table 67). Less than 4 percent of the children have given or loaned money to their parents at least once a month. Over 10 percent report giving or lending their parents money less than once a year and another 10 percent of the children give or lend their parents money about once or several times a year. The vast majority, 97 percent, of the children are willing to lend their parents money if the parents need it. Over 50 percent of the children report that their parents have not given or loaned them money. Another 28.5 percent say that they receive money from their parents less than once a year. Seventeen percent of the children say that their parents give them money about once a year or several times a year.

Table 67. Children's Report of Exchange of Money

	<u>Child lends, gives money</u>	<u>Parent lends, gives money</u>
Never	75.8%	51.3%
Less than once a year	10.4	28.5
About once a year	4.3	8.3
Several times a year	5.7	8.7
At least once a month	2.8	2.0
At least once a week	0.6	0.6
Daily	0.2	0.6
	-----	-----
Total	100.0%	100.0%
N	(504)	(504)

Fifty-seven percent of the children report that they are not the child the parent is most likely to turn to in an emergency; 39 percent respond yes and 4 percent say that they are the only child. If the response was no, the child then provided the birth order of the child that the parent is most likely to turn to. Forty percent of those children say that the oldest child in the family is the child that the parents turn to first; 28 percent respond with the second child, 14 percent with the third child and 10 percent with the fourth oldest child. The remaining 8 percent responded with a child from the fifth born to the ninth born.

Over 95 percent of the children say that their parents trust them and care for them either quite a bit or a great deal (Table 68). When asked how much they care or trust their parents, 95.6 percent and 98.4 percent, respectively, of the children respond either quite a bit or a great deal.

Table 68. Children's Report Quality of Relationship with Parents

	<u>Parent trusts child</u>	<u>Parent cares about child</u>	<u>Child trusts parent</u>	<u>Child cares about parent</u>
Not at all	0.6%	0.8%	1.2%	0.2%
A little	0.4	1.0	0.4	0.2
Somewhat	2.8	2.6	2.6	1.2
Quite a lot	18.5	11.4	10.9	9.1
A great deal	77.7	84.2	84.9	89.3
Total	100.0%	100.0%	100.0%	100.0%
N	(508)	(508)	(508)	(508)

In general, the children of the older parents report that their parents are more likely to rely on them in making decisions than the younger parents; about 41 percent of the children of the 75 or over groups report that their parents rely on them quite a bit or a great deal (Table 69). The percentages for children of parents under 75 is 30.1 percent for and 20.4 percent, respectively, for children of urban and rural parents.

Table 69. Children's Report of Parents' Reliance on Children in Decision Making by Parents' Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Not at all	17.2%	23.4%	23.2%	10.4%
A little	19.4	10.9	26.5	20.8
Somewhat	33.3	25.0	29.9	27.2
Quite a lot	17.2	10.9	11.0	19.5
A great deal	12.9	29.8	9.4	22.1
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Almost 82 percent of the children agree or strongly agree with the statement "your relationship with your parents is as you hoped it would be." Less than 9 percent disagree or strongly disagree. The distribution of the responses are very similar across the four groups (Table 70).

Table 70. Relationship with Parents as Hoped by Parents' Age and Location.

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	2.7%	6.3%	1.7%	0.0%
Disagree	7.0	1.6	6.1	6.5
Neither	7.5	9.4	12.7	9.1
Agree	46.2	48.3	42.0	45.5
Strongly agree	36.6	34.4	37.5	38.9
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

When responding to the statement "your views about life are similar to those of your parent," 70 percent either agree or strongly agree (Table 71). Another 15 percent strongly disagree or disagree. In general, children of parents 75 or older are more likely to agree with the statement than are children of the younger parents (Table 71).

Table 71. Views Similar to Parents by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Strongly disagree	4.3%	10.9%	2.8%	0.0%
Disagree	15.1	6.3	11.6	6.5
Neither	15.1	10.9	15.5	13.0
Agree	46.7	46.9	49.7	51.9
Strongly agree	18.8	25.0	20.4	78.6
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Almost 87 percent of the children strongly agree or agree with the statement "adult children should take care of the parents, in whatever way necessary, when they are sick;" 91.7 percent of the children strongly agree or agree with "adult children should give their parents financial help if the parents need it" (Table 72). The statement "parents are entitled to some return for the sacrifices they have made for their children" has 75 percent of the children either agreeing or strongly agreeing; 13.7 percent either strongly disagree or disagree. One third of the children strongly agree or agree with the statement "no matter what, adult children should bring their parents into their homes in the parents need help"; 41.7 percent either strongly disagree or disagree and 24.6 percent neither agree nor disagree.

Table 72. Children's Report of Agreement with Statements About Parent-Child Relationship

	Children take care of parents	Children give financial help	Parents entitled to return	Bring parents into home
Strongly disagree	0.4%	0.2%	3.1%	8.9%
Disagree	3.3	2.2	10.6	32.8
Neither	9.6	5.9	11.2	24.6
Agree	45.4	50.6	39.6	18.5
Strongly agree	41.3	41.1	35.4	15.2
Total	100.0%	100.0%	100.0%	100.0%
N	(508)	(508)	(508)	(508)

Use of Health-Related Services

The largest share of each of the groups use the services of a doctor several times in the past year, with the greatest use reported by the urban under 75 groups (60%) and least by slightly less than half (48.9%) of the rural 75 or over group. Use of a doctor several times a year is reported by 56.1 percent of the urban 75 or over group and 50.5 percent of the rural under 75 group. Most frequent use of doctor services is reported for 1 to 3 times a month by 17.8 percent of the rural 75 or over group, which is twice as frequently as the next higher user group at 8.8 percent for rural under 75 years. Some respondents have not used doctor services at any time in the past year, with a range of 7.3 percent for the urban 75 and over to 17.6 percent of the rural under 75 giving this response (Table 73).

Table 73. Use of Doctors by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	16.0%	7.3%	17.6%	13.3%
Once a year	18.0	29.3	23.1	20.0
Several times a year	60.0	56.1	50.5	48.9
1-3 times a month	6.0	7.3	8.8	17.8
1-6 times a week	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

The respondents who use services of a doctor report high levels of satisfaction with doctor services, with over four-fifths of all groups reporting that they are satisfied or extremely satisfied. More specifically, 81.5 percent of the urban 75 or over, and 94.9 percent rural 75 or over reported being satisfied or extremely satisfied with doctor services (Table 74).

Table 74. Satisfaction with Doctors' Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	1.2%	0.0%	0.0%	0.0%
Dissatisfied	1.2	0.0	1.3	0.0
Somewhat dissatisfied	4.8	5.3	1.3	5.1
Mixed	3.6	7.9	5.3	0.0
Somewhat satisfied	3.6	5.3	8.0	0.0
Satisfied	51.5	57.8	50.8	66.7
Extremely satisfied	34.5	23.7	33.3	28.2
Total	100.0%	100.0%	100.0%	100.0%
N	(84)	(38)	(75)	(39)

Questions regarding transportation show that similar numbers of the urban and rural under 75 drive themselves to the doctor, with 77.3 percent and 73.8 percent respectively giving this response. A smaller majority (53.8%) of the rural 75 or over drive themselves, while similar numbers of urban 75 or over (52.6%) ride with others to the doctor. Riding with others is also reported by 35.9 percent of the rural 75 or over and by 21.4 percent of the urban under 75. The older groups do less driving of themselves and more riding with someone else (Table 75).

Table 75. Transportation to Doctors by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Drive self	73.8%	39.5%	77.3%	53.8%
Ride with others	21.4	52.6	16.0	35.9
Walk	1.2	2.6	6.7	7.7
Public transportation	2.4	5.3	0.0	2.6
Other	1.2	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(84)	(38)	(75)	(39)

Use of hospital services is reported by small percentages of these groups, with most frequent use reported by rural under 75 and least frequent use reported by urban under 75. The rural under 75 group report 25.3 percent for one use of the hospital in the past year, and are the only group to report use as frequent as 1 to 3 times a month (1.1%). Similar percentages of the other three groups report one use in the past year: 19.5 percent urban 75 or over, 19.0 percent urban under 75 and 17.8 percent rural 75 or over. The two groups under 75 show similar use of the hospital several times a year: 10.0 percent urban and 9.9 percent rural, as do the two groups 75 or over in this category: 14.6 percent urban and 13.3 percent rural. The groups show similar response to no use of hospital services in the past year, with 63.7 percent of the rural under 75 to 71.0 percent urban under 75 giving this response (Table 76).

Table 76. Use of Hospital Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	71.0%	65.9%	63.7%	68.9%
Once a year	19.0	19.5	25.3	17.8
Several times a year	10.0	14.6	9.9	13.3
1-3 times a month	0.0	0.0	1.1	0.0
1-6 times a week	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

The respondents who use hospital services report high levels of satisfaction with the service, ranging from 84.9 percent of the rural under 75 group to 100 percent of the rural 75 or over group reporting satisfied or extremely satisfied. The rural under 75 group show the widest variation in response to satisfaction, with 6.1 percent each reporting somewhat satisfied or somewhat dissatisfied, and 3.0 percent reporting extremely dissatisfied (Table 77).

Table 77. Satisfaction with Use of Hospital Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%	3.0%	0.0%
Dissatisfied	0.0	0.0	0.0	0.0
Somewhat dissatisfied	3.4	0.0	6.1	0.0
Mixed	3.4	0.0	0.0	0.0
Somewhat satisfied	0.0	7.1	6.1	0.0
Satisfied	37.9	50.0	48.4	50.0
Extremely satisfied	55.3	42.9	36.4	50.0
Total	100.0%	100.0%	100.0%	100.0%
N	(29)	(14)	(33)	(14)

Transportation to the hospital varies somewhat, with the rural under 75 group differing from the other three groups. The largest share (60.6%) of the rural under 75 group drive themselves to the hospital, while this means is reported by 28.6 percent of both groups 75 or over and 35.7 percent of the urban 75 or over group. The rural 75 or over group ride with others to the hospital (71.4%), while about half of the urban groups choose this means: 57.1 percent 75 or over and 48.3 percent under 75. Ambulance transport has been used by 14.3 percent for urban 75 or over, 10.3 percent urban under 75, 6.1 percent rural under 75, and none of the rural 75 or over. Again the younger ones who are more likely to have a driver's license are the ones driving themselves; the means of transport may also be related to severity of condition necessitating the visit to the hospital (Table 78).

Table. 78. Transportation to Hospital Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Drive self	34.5%	28.6%	60.6%	28.6%
Ride with others	48.3	57.1	30.3	71.4
Walk	0.0	0.0	3.0	0.0
Ambulance	10.3	14.3	6.1	0.0
Other	6.9	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(29)	(14)	(33)	(14)

As seen in Table 79, the reported use of a pharmacist is similar among the groups. About equal proportions of the rural groups use a pharmacist several times a year, 51.2 percent of the 75 or over group, and 42.8 percent of the under 75 group. About one-third of the urban groups report this frequency, 39 percent of the under 75 group and 34.1 percent of the 75 or over group. Use of the pharmacist 1 to 3 times a month shows little variation among the groups, with the urban and rural groups showing similar responses between the under 75 and 75 and over groups. The rural responses are 22.2 percent for the 75 or over group and 20.9 percent for the group under 75; urban responses are 29.3 percent for the 75 or over group and 30 percent for the under 75 group. Very small numbers utilize the pharmacist 1 to 6 times a week. There is little difference among the groups who report no use of the pharmacist, with a range of 20 percent rural 75 or over to 29.3 percent urban 75 or over giving this response.

Table 79. Use of Pharmacist Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	22.0%	29.3%	24.2%	20.0%
Once a year	8.0	7.3	11.0	4.4
Several times a year	39.0	34.1	42.8	51.2
1-3 times a month	30.0	29.3	20.9	22.2
1-6 times a week	1.0	0.0	1.1	2.2
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

A large majority of all groups report high levels of satisfaction with pharmacy services (Table 80). Highest satisfaction is recorded for rural 75 or over, with 100 percent of these respondents saying they are satisfied or extremely satisfied. Other groups reported 95.6 percent (rural under 75), 96.5 percent (urban 75 or over), and 97.4 percent (urban under 75) in the satisfied and extremely satisfied response categories.

Table 80. Satisfaction with Pharmacist Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%	0.0%	0.0%
Dissatisfied	0.0	0.0	0.0	0.0
Somewhat dissatisfied	1.3	0.0	1.4	0.0
Mixed	1.3	0.0	1.4	0.0
Somewhat satisfied	0.0	3.4	1.4	0.0
Satisfied	64.1	72.5	65.4	58.3
Extremely satisfied	33.3	24.1	30.4	41.7
Total	100.0%	100.0%	100.0%	100.0%
N	(78)	(29)	(69)	(36)

Responses regarding transportation to the pharmacist are similar for groups under 75 and groups 75 or over. About half of the latter group, and over three-fourths of the former group drive themselves to the pharmacist. About one-fourth of each group 75 or over ride with others to the pharmacist, while much smaller numbers of the under 75 groups choose this means. Persons in each group have pharmaceuticals delivered to them, with urban 75 or over choosing this means most frequently (17.2%), and 8.3 percent rural 75 or over choosing delivery (Table 81). Very small numbers of the groups under 75 choose delivery.

Table 81. Transportation to Pharmacist Services by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Drive self	75.6%	51.8%	79.8%	58.3%
Ride with others	15.4	24.1	10.1	22.2
Walk	3.8	0.0	5.8	5.6
Public transportation	1.3	0.0	0.0	2.8
Has delivered	2.6	17.2	2.9	8.3
Other	1.3	6.9	1.4	2.8
Total	100.0%	100.0%	100.0%	100.0%
N	(78)	(29)	(69)	(36)

Similarities exist in the patterns of use of dental services between the under 75 groups and the 75 or over groups. A dental service has been used once in the past year by 33 percent of the rural and 26 percent of the urban under 75 groups; and by 19.5 percent and 13.3 percent of the urban and rural respectively 75 or over groups. A similar response is revealed for use of dentists several times a year; 30.0 percent and 29.7 percent for urban and rural (respectively) groups under 75; and 19.5 percent and 15.6 percent for urban and rural (respectively) groups 75 or over. No visits to a dental service are reported by a majority of the 75 or over groups - 71.1 percent rural and 61 percent urban; and by 44 percent urban and 36.2 percent rural under 75 groups (Table 82).

Table 82. Use of Dental Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	44.0%	61.0%	36.2%	71.1%
Once a year	26.0	19.5	33.0	13.3
Several times a year	30.0	19.5	29.7	15.6
1-3 times a month	0.0	0.0	1.1	0.0
1-6 times a week	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

High levels of satisfaction with dental services are reported by all groups, with over 91 percent in each group reporting satisfied or extremely satisfied. All respondents in the groups 75 or over are no less than somewhat satisfied with dental services (Table 83).

Table 83. Satisfaction with Use of Dental Services by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Extremely dissatisfied	0.0%	0.0%	0.0%	0.0%
Dissatisfied	1.8	0.0	1.7	0.0
Somewhat dissatisfied	0.0	0.0	0.0	0.0
Mixed	1.8	0.0	1.7	0.0
Somewhat satisfied	1.8	6.3	5.2	7.7
Satisfied	55.3	62.4	55.2	53.8
Extremely satisfied	39.3	31.3	36.2	38.5
Total	100.0%	100.0%	100.0%	100.0%
N	(56)	(16)	(58)	(13)

Transportation to the dentist is most often accomplished through driving oneself which is most frequently the case for groups under 75. About 86.2 percent rural and 78.5 percent urban groups under 75 give this response. Over half of the 75 or over groups drive themselves, while about one-third of these groups ride with others (Table 84).

Table 84. Transportation to Dental Services by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Drive self	78.5%	56.1%	86.2%	53.8%
Ride with others	17.9	31.3	8.6	38.5
Walk	3.6	6.3	5.2	7.7
Public transportation	0.0	6.3	0.0	0.0
Other	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(56)	(16)	(58)	(13)

The rural 75 or over group uses congregate meals or nutrition sites more than any of the other groups. A total 31.3 percent of the rural 75 or over group use congregate meals or nutrition sites sometime in the past year, with the largest percentages using them several times (17.8%)

or one to six times per week (8.9%). Much less use is made of congregate meals or nutrition sites by the other groups: 16.5 percent rural under 75, 12.2 percent urban 75 or over, and a small number, 7 percent, urban under 75 (Table 85).

Table 85. Use of Congregate Meals or Nutrition Sites by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	93.0%	87.9%	83.5%	68.9%
Once a year	2.0	2.4	2.2	2.2
Several times a year	3.0	4.9	7.7	17.8
1-3 times a month	1.0	2.4	2.2	2.2
1-6 times a week	1.0	2.4	4.4	8.9
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

High satisfaction levels for congregate meal services are reported by these groups. All of the rural respondents and urban respondents 75 or over report they are somewhat satisfied, satisfied, or extremely satisfied with congregate meals, with a majority (75.7%) of the urban under 75 giving one of these responses (Table 86).

Table 86. Satisfaction with Congregate Meals or Nutrition Sites by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Extremely dissatisfied	14.3%	0.0%	0.0%	0.0%
Dissatisfied	0.0	0.0	0.0	0.0
Somewhat dissatisfied	0.0	0.0	0.0	0.0
Mixed	0.0	0.0	0.0	0.0
Somewhat satisfied	14.3	0.0	13.3	7.1
Satisfied	42.8	40.0	40.0	42.9
Extremely satisfied	28.6	60.0	46.7	50.0
Total	100.0%	100.0%	100.0%	100.0%
N	(7)	(5)	(15)	(14)

The type of transportation to congregate meals has some interesting variation. Driving oneself is used by 66.7 percent of the rural under 75, with similar response from urban 75 or over (60%). Half of the rural 75 or over drive themselves. In the urban under 75 group, 28.6 percent each has driven or walked to meal sites. Riding with others to meal sites is used by 42.9 percent each of the rural 75 or over and urban under 75 groups. In the urban 75 or over groups, the remaining 40 percent are split evenly between riding with others and using public transportation, the only group to do so (Table 87).

Table 87. Transportation to Congregate Meals or Nutrition Sites by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Drive self	28.6%	60.0%	66.7%	50.0%
Ride with others	42.9	20.0	6.7	42.9
Walk	28.6	0.0	26.7	7.1
Public transportation	0.0	20.0	0.0	0.0
Other	0.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(7)	(5)	(15)	(14)

Frequency of use of in home nursing services demonstrate similar results for the groups under 75 and for the groups 75 or over. Percentages represent use by five respondents in each group 75 or over, and by three respondents in each group under 75. Use several times a year is reported by 12.2 percent of the urban 75 or over, 4.4 percent by the rural 75 or over, 3.3 of the rural under 75 and 1.0 percent of the urban under 75. No use, then, of in home nursing services is reported as follows: 97 percent under 75, 96.7 percent urban under 75, 89 percent rural 75 or over, and 87.8 percent urban 75 or over (Table 88).

Table 88. Use of In-Home Nursing Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	97.0%	87.8%	96.7%	89.0%
Once a year	0.0	0.0	0.0	2.2
Several times a year	1.0	12.2	3.3	4.4
1-3 times a month	1.0	0.0	0.0	4.4
1-6 times a week	1.0	0.0	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

High levels of satisfaction are reported for the users of nursing services with similar levels reported by urban and rural groups 75 or over. Sixty percent in each older age group are satisfied, while 20 percent each are somewhat satisfied or extremely satisfied for each category. Responses for the subjects under 75 show an interesting turnabout; 66.7 percent of the rural group are extremely satisfied while this number is satisfied in the urban group and 33.3 percent of the urban group are extremely satisfied, and this number of rural is satisfied (Table 89).

Table 89. Satisfaction with In-Home Nursing Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%	0.0%	0.0%
Dissatisfied	0.0	0.0	0.0	0.0
Somewhat dissatisfied	0.0	0.0	0.0	0.0
Mixed	0.0	0.0	0.0	0.0
Satisfied	66.7	60.0	33.3	60.0
Extremely Satisfied	33.3	20.0	66.7	20.0
Total	100.0%	100.0%	100.0%	100.0%
N	(3)	(5)	(3)	(5)

As shown in Table 90, homemaker health services have only been used by respondents 75 or over, with four rural (8.8%) and six urban (14.6%) reporting use. Rural users are evenly divided between use several times a year and one to six times per week. Urban users show use over the entire range of responses. Nonusers are all respondents under 75, 91.2 percent rural 75 and over, and 85.4 percent urban 75 or over.

Table 90. Use of Homemaker Health Services by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Never	100.0%	85.4%	100.0%	91.2%
Once a week	0.0	4.9	0.0	0.0
Several times a year	0.0	4.9	0.0	4.4
1-3 times a month	0.0	2.4	0.0	0.0
1-6 times a week	0.0	2.4	0.0	4.4
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

The satisfaction patterns are not as positive as noted for other services. For the urban users, 66.6 percent are somewhat satisfied, with 16.7 percent in each of the mixed and somewhat dissatisfied response categories. For the rural users, 75 percent report they are satisfied, and 25 percent report they are dissatisfied with homemaker health aid services (Table 91).

Table 91. Satisfaction with Homemaker-Health Services by Age and Location

	<u>Urban</u>	<u>Rural</u>
	<u>75+</u>	<u>75+</u>
Extremely dissatisfied	0.0%	0.0%
Dissatisfied	0.0	25.0
Somewhat dissatisfied	0.0	0.0
Mixed	16.7	0.0
Somewhat satisfied	16.7	0.0
Satisfied	66.6	75.0
Extremely satisfied	0.0	0.0
Total	100.0%	100.0%
N	(6)	(4)

Home delivered meals have been used by two respondents under 75, one urban and one rural, by 11 percent rural 75 or over and by 9.7

percent urban 75 or over. The frequencies for nonusers are 99 percent urban under 75, 98.9 percent rural under 75, 90.3 percent urban 75 or over and 89 percent rural 75 or over (Table 92).

Table 92. Use of Home Delivered Meals by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Never	99.0%	90.3%	98.9%	89.0%
Once a year	0.0	2.4	0.0	2.2
Several times a year	1.0	0.0	0.0	4.4
1-3 times a month	0.0	0.0	0.0	0.0
1-6 times week	0.0	2.4	1.1	4.4
Daily	0.0	4.9	0.0	0.0
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Table 93 shows that the satisfaction levels vary somewhat among the groups: all urban under 75 are satisfied, while all rural under 75 are somewhat satisfied. In the urban 75 or over group, one-half are satisfied, while 25 percent each are either extremely satisfied or extremely dissatisfied. In the rural or over group, 40 percent each is satisfied or extremely satisfied, while 20 percent report mixed (Table 93).

Table 93. Satisfaction with Home Delivered Meals by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Extremely dissatisfied	0.0%	25.0%	0.0%	0.0%
Dissatisfied	0.0	0.0	0.0	0.0
Somewhat dissatisfied	0.0	0.0	0.0	0.0
Mixed	0.0	0.0	0.0	20.0
Somewhat satisfied	0.0	0.0	100.0	0.0
Satisfied	100.0	50.0	0.0	40.0
Extremely satisfied	0.0	25.0	0.0	40.0
Total	100.0%	100.0%	100.0%	100.0%
N	(1)	(4)	(1)	(5)

All the respondents who do not use the services of a doctor respond "don't need" as their reason for nonuse. All the respondents, except for 3.7 percent of the urban 75 or over who say they "can't afford" hospital services, state "no need." "No need" is the stated reason for all nonusers of counselor services, except for 1 percent each of the urban and rural under 75 who give "lack of knowledge" of the service as a reason and 2.4 percent of the urban 75 or over who state they have received counseling services elsewhere. "No need" of pharmacist services is true for 90 percent to 95.5 percent of nonusers in the four categories. In the rural group, 9.1 percent of those under 75 receive pharmacist services elsewhere; 8.3 percent of the urban 75 or over and 4.5 percent of the urban under 75 have given this response; and 10 percent of the rural 75 or over group choose not to respond.

Reasons for not using dentist services show slightly more variation, and dental service is the only service where "don't need" is not the majority response. Indeed, about half of all groups report that "having dentures" is the reason for nonuse, which may be interpreted as a synonym for "no need." Those responding with "no need" regarding this service range between 40.6 percent (rural 75 or over) to 44 percent (urban 75 or over). The next most popular response is "can't afford," given by 6.1 percent rural under 75, 4.5 percent urban under 75, and 3.1 percent rural 75 or over. Finally, 4 percent urban 75 or over say they "didn't want" dentist services and 3 percent rural under 75 give "health reasons" for not seeking service.

For services outside the home, the use of congregate meals or nutrition sites demonstrates the widest variation in reasons given for nonuse. Those under 75 more frequently report "don't need" than do those 75 or over, with about three-fourths of nonusers in the former group, and about one-half of nonusers in the latter group responding in this manner. The second reason given most frequently is "do it [meals] myself," followed closely by "don't want to." Other reasons given are: lack knowledge, inconvenient, health reasons, don't like, spouse doesn't go, and get service elsewhere.

The reasons why nonuser respondents do not use in-home services follow the previous pattern. All but 2.8 percent of the urban 75 or over who receive nursing services elsewhere state they do "not need" the services. All nonusers of homemaker health aid services have given "no need" as a reason, except for 1 percent of the urban under 75 who report the reasons as "lack knowledge" about the service, and 1.1 percent rural under 75 who state they "do it myself." Nonusers of meals on wheels services show the widest variation of reasons. The response "don't need" is again the majority, but with a more varied range: 91 percent urban under 75, 84.4 percent rural under 75, 75 percent rural 75 or over, and 56.8 percent urban 75 or over. "Do it myself" is given by 32.4 percent of urban 75 or over, and minimal numbers in other categories, which again may be a synonym for "no need." Other reasons for nonuse are similar to those given for congregate meal nonuse.

In summary, this sample reports frequent use of more traditional illness-related services such as doctors, hospitals, and pharmacists. Generally, this sample, however, shows a pattern of nonuse for a number of services and those who use in-home services represent a very small proportion of these respondents.

Those who do use services tend to be highly satisfied with those services. Transportation to out-of-home services tends to be driving oneself or riding with others. Public transportation and walking are used minimally.

Nonusers of services state they have no need for these services. Lack of knowledge and receiving the service elsewhere are other common reasons of nonuse.

Insurance Ownership. All respondents age 75 or older report coverage with some type of health insurance (Table 94); all but one (rural) respondent have Medicare. Medicaid coverage is reported by one rural respondent and by 12.2 percent of the urban group in the older category. Private insurance policies are owned by 90.2 percent of the urban and by 88.9 percent of the rural group 75 or older.

Table 94. Health Coverage by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Any health coverage	93.0%	100.0%	98.9%	100.0%
N	(100)	(41)	(91)	(45)
Type of coverage if have insurance				
Private insurance	94.6	90.2	95.6	88.9
Medicare	69.9	100.0	62.2	97.8
Medicaid	2.2	12.2	3.3	2.2
N	(93)	(41)	(90)	(45)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

For those under 75 a large majority also report insurance coverage. For the urban group, 93 percent are covered; and of those, 69.9 percent have Medicare, 2.2 percent have Medicaid, and 94.6 percent have private insurance. For the rural group, 98.9 percent report coverage, with 62.2 percent covered by Medicare, 3.3 percent by Medicaid, and 95.6 percent by private insurance. Since the younger age groups include persons 60 or older, it is not surprising that not all of them have Medicare coverage.

In summary, a large majority (97%) of the respondents have health insurance coverage. Ninety percent are covered by private insurance and 74 percent have Medicare

Psychological Support

This section describes the psychological support which is being utilized by the respondents. Counselor services and monitoring services which may provide an element of feeling of security for both the elderly and the adult children of the elderly are discussed.

Counselor. A counselor has been used by only four respondents during the past year, all in the groups under 75; one urban respondent used a counselor once a year, and the three other respondents report use several times a year. One urban respondent reports being satisfied with counselor services; the other two urban respondents report they were extremely satisfied with counselor service; and the rural respondent reports being dissatisfied with the counselor service. One urban respondent has driven self to the counselor; the three remaining respondents have ridden with others.

Monitoring. Table 95 shows the percentages of respondents who have some types of monitoring devices or have someone who calls them to check on them every day and also shows their level of concern that something might happen to them and no one will know. Those in the 75 or over group more frequently have a monitoring device with which to call for help when needed, with 9.8 percent of the urban and 4.4 percent of the rural saying "yes." Only around 2 percent of each category of respondents under 75 has such a device. Clearly, a large majority of all groups do not have such a device.

Table 95. Monitoring by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Monitor device	2.0%	9.8%	2.2%	4.4%
Someone calls to check everyday	39.0	61.0	26.4	35.6
Afraid something might happen and no one will know	5.0	7.3	5.5	15.6
N	(100)	(41)	(91)	(45)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

A majority (61%) of the urban 75 or over group report that someone calls or checks on them everyday. The responses for the other groups show significantly lower incidence: 39 percent of the urban under 75, 35.6 percent of the rural 75 or over groups, and 26.4 percent of the rural under 75 group have someone who calls or checks on them everyday.

The rural 75 or over group (15.6%) indicate they are the most concerned of any group that something will happen to them and no one will know. Fewer respondents in the other groups admit this concern: 7.3 percent urban 75 and over, 5.5 percent rural under 75, and 5.0 percent urban under 75.

There are some disparities with these items between parents and their children (Table 96). Over 71 percent of the children report that someone calls their parents every day to see if their parent are ok. This percentage is compared to the 37 percent of the parents who say that someone calls every day to see if they are ok. It would appear that the parents may not perceive the call they have received to be for that reason, or the children believe someone is calling which may not be happening. Because many children believe that their parents are being checked on may explain why so few are afraid that something might happen to their parents and no one would know about. Still about 16 percent of the children are concerned about this happening compared to 7 percent of their parents.

Table 96. Children's Report of Monitoring by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Someone calls to check every day	64.0%	89.1%	69.6%	76.6%
Afraid something might happen and no one will know	16.1	15.6	11.0	26.0
N	(186)	(64)	(181)	(77)

Percentages do not add to 100.0% because each item was asked separately with a yes-no response.

CHAPTER V. CURRENT HOUSING CONDITIONS BY AGE AND LOCATION

Introduction

This chapter presents the descriptive information about the current housing classified by age and location. The relationships between the current housing and housing preferences are presented in Chapter VI. Conclusions about housing, both current and preferred, are presented at the end of Chapter VI. and at the end of the report. The theme that flows through these two chapters and, indeed, through the entire report rests on the logical and empirical tension between (1) the expansive space-hungry, privacy-seeking housing enjoyed by most middle-aged and elderly Iowans and the compact, highly planned, age-oriented housing offered by many planners, policy makers, designers, and developers. This research is informative regarding the implications of the resolution of the tension.

Ownership and Rental

In Table 97 various aspects of home ownership and rental are presented. There is little variation in the rate of home ownership except that the rural under 75 group is somewhat more likely to be home owners than are the other three groups. One of the frequently suggested compromises that could be made in the standard housing package is to keep the ownership but compromise on the type of structure by living a condominium apartment building. Less than 4 percent of the urban respondents and none of the rural live in such housing.

Table 97. Aspects of Tenure by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Percent home owners	81.0	80.5	86.8	80.0	82.7
N	(100)	(41)	(91)	(45)	(277)
Percent condominium owners of all owners	3.7	3.0	0.0	0.0	1.7
N	(81)	(33)	(79)	(36)	(229)
Percent lot renters of mobile homes	100.0	100.0	33.3	0.0	75.0
N	(3)	(2)	(3)	(0)	(6)
Percent subsidized of all renters	16.7	12.5	36.4	50.0	26.7
N	(18)	(8)	(11)	(8)	(45)

*Does not include free rent

Another compromise that is available is to own a mobile home, a compromise in terms of durability and quality of construction. Less than 5 percent of the respondents in any group lives in a mobile home (Table 98). Of those who do, nearly all rent the lot on which the mobile home is located (Table 97). The data on both condominiums and mobile homes are based on such small percentages that differences between groups are very unreliable. The best conclusion is simply that these choices do not occur very often.

Table 98. Type of Structure by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Single-family detached	79.0%	68.3%	89.0%	82.3%	81.2%
Rowhouse, townhouse	2.0	0.0	0.0	0.0	0.7
Building with 2-3 living units	5.0	14.6	3.3	4.4	5.8
Building with 4-8 living units	4.0	2.4	1.1	13.3	4.3
Building with more than 8 living units	7.0	9.8	3.3	0.0	5.1
Mobile home	3.0	4.9	3.3	0.0	2.9
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)
Percent in apartments building	16.0	26.8	7.7	17.7	15.2
Percent not in single- family dwellings	21.0	31.7	11.0	17.7	18.8

Twenty percent or less of each group lives in rented housing. Of those who rent, a surprising percentage live in government subsidized housing. Perhaps most surprising is the fact that higher percentages occur in the rural areas than in the urban and that among the urban the percentage is smaller among the respondents in the older age group.

Type of Structure

Around 70 percent or more of each group lives in a single-family dwelling (Table 98). The percentage is somewhat less for the respondents in the higher age groups than it is for those in the younger groups. The highest percentage is in the rural, under 75 group and the lowest is in urban, over 75 category. Townhouses are very rare and appear only in the urban, under 75 category.

With respect to multi-units the higher percentage living in buildings with two to three living units occurs in the urban, over 75 group. The highest percentage living in buildings with four to eight living units occurs in the rural, over 75 group. The highest percentage living in the larger buildings occurs in the urban group with a somewhat higher percentage for the older group than for the younger group within the urban area.

Mobile homes were briefly mentioned in the previous section of this chapter. The highest percentage of mobile homes occurs among the urban, over 75 group (4.9%) and the lowest among the rural, 75 and over group (0.0%). It is worth repeating that the percentages are so small as to be subject to error in the variation among the groups. In any case, the percentage is quite low with less than 3.0 percent in the total sample.

Two sets of combined percentages are worth examining. The percentage of all who live in apartments indicates that the apartment living is more likely among the respondents who are aged 75 or more with over a quarter among the urban and nearly a fifth among the rural. Apartment living is quite rare among the rural under 75 group (7.7%).

Another combined percentage is the percentage not living in a single family dwelling. Obviously, it is reflection of the percentage living in single-family dwellings. Over thirty percent of the 75 or over groups live in other than single-family dwellings. The difference between the urban and rural younger group is notable with only 11 percent of the rural and 21 percent of the urban.

Space in the Dwelling

This section includes data on the number of rooms, bedrooms, and bathrooms as well as the combinations of other rooms in the dwelling. The section shows a continuation of the expansive kind of housing pattern but there are indications that as age progresses a percentage of the elderly begin to give it up.

Table 99 presents the information on the number of rooms in the dwelling. The two younger groups have a higher average number of rooms with 5.6 and 6.1 for the urban and the rural; the 75 or over groups have 5.1 and 5.3 for urban and rural. The differences by age by location do not seem large enough to matter but the older respondents have fewer rooms on the average than do the younger.

Table 99. Number of Rooms in the Dwelling by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
2 rooms*	1.0%	2.4%	0.0%	0.0%	0.7%
3 rooms	8.0	7.3	4.4	11.1	7.2
4 rooms	16.0	26.8	6.6	20.0	15.2
5 rooms	27.0	34.1	24.2	26.7	27.1
6 rooms	22.0	14.6	31.9	20.0	23.8
7 rooms	12.0	4.9	17.6	17.8	13.7
8 or more rooms	14.0	9.7	15.4	4.4	12.3
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)
Mean	5.6	5.1	6.1	5.3	5.6

*Includes one efficiency apartment

Table 100 shows the differences by age and location in the number of bedrooms in the current dwelling. Two younger groups have the largest numbers of bedrooms with 2.6 and 2.9 for the urban and the rural. The older groups have about one half a bedroom less than do the younger groups (2.1 and 2.5 for the urban and the rural). There is a rural-urban difference as well as with the rural respondents having a higher average number of bedrooms by about one third of a bedroom.

Table 100. Number of Bedrooms in the Dwelling by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
1 bedroom*	11.0%	17.0%	6.6%	13.3%	10.8%
2 bedrooms	35.0	63.5	27.5	37.9	37.2
3 bedrooms	40.0	14.6	42.8	33.3	36.1
4 bedrooms	13.0	4.9	19.8	13.3	14.1
5 bedrooms	1.0	0.0	3.3	2.2	1.8
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)
Mean	2.6	2.1	2.9	2.5	2.6

*Includes one efficiency apartment

Table 101 includes the number of bathrooms by age and location. The two younger groups and the two older groups are similar with an average of 2.0 bathrooms for both urban and rural in the under 75 groups and 1.8 in the 75 or over groups.

Table 101. Number of Bathrooms in the Dwelling by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
1.0 bathroom	0.0%	4.9%	1.1%	4.4%*	1.8%*
1.5 bathrooms	51.0	61.1	47.2	62.3	53.3
2.0 bathrooms	14.0	14.6	14.3	22.2	15.5
2.5 bathrooms	23.0	14.6	25.3	6.7	19.9
3.0 bathrooms	7.0	2.4	5.5	0.0	4.7
3.5 bathrooms	3.0	2.4	6.6	2.2	4.0
4.0 bathrooms	2.0	0.0	0.0	2.2	1.1
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)
Mean	2.0	1.8	2.0	1.8	1.9

*Includes 1 shared bathroom

A tentative conclusion from the rooms, bedrooms, and bathrooms data is that the elderly group has somewhat fewer of each on the average but not a great deal fewer. These data may relate to the somewhat higher proportion of the 75 or over groups who live in apartments which have a tendency to be smaller than single-family dwellings. It is not totally clear that the difference is due to changes in residence by a portion of the older group seeking housing more consonant with needs or if the younger group has been able to obtain larger housing that is more likely to be single-family detached housing because of historical differences in income, housing markets and the like.

Tables 102 and 103 present data on (1) living space and its combinations with dining space and (2) kitchen space and its combinations with dining space. Because of the many possible combinations only the two groupings are presented.

There seems to be no obviously understandable pattern in the results for living-dining combinations (Table 102). A living room with no dining room is the most common arrangement in the urban, under 75 group but in no other group. The most common arrangement for the urban 75 or over group and the rural, under 75 group is a separate living and dining room. No arrangement predominates in the rural, 75 or over category. The only uniformity is that the least common arrangement in each group is combination living-dining room.

Table 102. Living-Dining Space by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Living, no dining*	45.0%	26.8%	27.5%	37.8%	35.3%
Separate living and dining	38.0	56.1	50.5	37.8	44.8
Living-dining combination	17.0	17.1	22.0	24.4	19.9
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)

*Includes one efficiency apartment

With respect to kitchen-dining space (Table 103) the pattern is much more orderly. The most common arrangement in each group is a kitchen with a small eating area with about half or more. The kitchen with a large eating area is somewhat more common in the rural than the urban areas. In the urban areas a kitchen with no eating area is somewhat more common than in the rural areas; this finding connects to

some data not shown that would suggest that dining rooms are more common in the urban areas.

Table 103. Kitchen-Dining Space by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Kitchen with no eating area*	16.0%	22.0%	15.4%	8.9%	15.6%
Kitchen with small eating area	56.0	58.5	47.2	53.3	53.0
Kitchen with large	28.0	19.5	37.4	37.8	31.4
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)

*Includes one efficiency apartment

Although the presence in the dwelling of a family room or recreation room may seem to be particularly optional for the elderly, a substantial proportion of the respondents currently have one (Table 104). The main difference apparent in the table is that family rooms are more likely among those in the younger group. It is quite clear from this table (and others that precede this one) that changes in the expansiveness of the housing of the elderly occur in accompaniment with age.

Table 104. Family-Recreation Room by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
No	61.0%	80.5%	68.1%	86.7%	70.4%
Yes	39.0*	19.5	31.9	13.3	29.6
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)

*Includes recreation room in building

Having laundry facilities available in the dwelling has advantages and disadvantages. Having a washer and dryer means that one need not leave the dwelling to do laundry. On the other hand having the

equipment means that one would find it more difficult to turn the job of laundry over to someone else. Around 80 percent or more of each of the groups (Table 105) has a washing machine with somewhat smaller proportions in the older groups within each location.

Table 105. Laundry Facilities by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Percent with clothes washer in the dwelling	89.0	78.0	94.5	86.7	88.8
N	(100)	(41)	(91)	(45)	277)
Percent with clothes dryer in the dwelling	82.0	65.9	84.6	71.1	78.7
N	(100)	(41)	(91)	(45)	(277)

Smaller proportions of each group have clothes dryers and the smallest proportions occur among the older group. Over 80 percent of the respondents under age 75 have a dryer but less than 75 percent of the 75 or over group do so. The odd pattern is that there seem to be more of the elderly group who have a washer but no dryer than of the younger group. How do they get their clothes dry. Do they hang them out or send them out?

In Table 106 the number of floors in the dwelling is presented. The uniformity in the averages is notable. There is no obvious tendency in the averages to reduce the expansiveness of the housing package with age. There are slightly fewer three story dwellings in the rural area but more one story dwellings in the urban group.

Table 106. Number of Floors in Dwelling by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
1 floor	70.0%	70.8%	59.3%	64.4%	65.7%
2 floors	27.0	26.8	39.6	35.6	32.5
3 floors	3.0	2.4	1.1	0.0	1.8
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)
Mean	1.3	1.3	1.4	1.4	1.4

The data on outdoor space (Table 107) are somewhat confusing. One might expect to find larger outdoor space among the rural than among the urban respondents and more outdoor space among the younger than among the older respondent groups. That is not what appears in these data. The older urban residents are more likely to have a large private yard than are the under 75, urban respondents. Among the rural respondents it is the reverse with the under 75 more likely to have a large private yard.

Table 107. Outdoor Space by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
No yard	3.0%	4.9%	1.1%	4.4%	2.9%
Shared yard	10.0	7.3	4.4	8.9	7.6
Small private yard	28.0	17.1	20.9	20.0	22.7
Large private yard	59.0	70.7	73.6	66.7	66.8
Total	100.0%	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)	(277)

These data are likely to be somewhat subjective in that the respondents were permitted to decide whether the yard is small or large. It is hard to see that this potential source of distortion could explain the pattern that appears in Table 107, however.

Table 108 shows two aspects of the orientation of housing to elderly residents (1) whether it was designed for elderly persons and (2) whether the neighborhood is segregated by age. Relatively small proportions of Iowa's elderly live in such housing. In none of the four groups does the percentage reach 15. The smallest percentage of housing designed for the elderly occurs in the urban, 75 or over group (7.3%) and the largest percentage (14.3) occurs in the rural, under 75 group. That is a somewhat surprising pattern. Neighborhoods segregated by age occur rather uniformly except that the rural, under 75 group has less than ten percent of segregated neighborhoods. The other three groups have 12 percent or more. It seems somewhat likely that age segregation and design specifically for the elderly would occur together to some extent in government subsidized projects for example. Therefore, these results are a little puzzling, except that they do not indicate that being aged 75 or over is closely connected to age related housing arrangement.

Table 108. Elderly-Oriented Housing by Age and Location

	<u>Urban</u>		<u>Rural</u>		<u>Total sample</u>
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>	
Housing designed for the elderly	12.0%	7.3%	14.3%	8.9%	11.6%
N	(100)	(41)	(91)	(45)	(277)
Neighborhood all elderly	12.0	12.2	9.9	13.3	11.6
N	(100)	(41)	(91)	(45)	(277)

Conclusions

The high rate of home ownership, single-family dwellings, and related housing characteristics enjoyed by Iowa's elderly population is an important piece of information. It shows an expansive rather than a compact housing pattern supported by a large amount of data (presented in this chapter and the next) that indicate how attached Iowans are to a type of housing and a way of life that they are loath to give up until forced to by illness, disability, poverty, or death.

The psychological depth of the pattern of expansive, ownership-oriented, detached housing requires careful and thoughtful appraisal in the development of policies and programs for the housing of the elderly. It is one thing to suggest that the elderly should give up their large, relatively empty, single-family dwellings and move to something that is more compact and planned specifically for the needs of the elderly. It

is relatively easy for the young and middle aged to suggest that the elderly individual should plan ahead for housing that will better serve the needs of one who is old, in or potentially in ill health, and possibly disabled.

It is difficult in the absence of the requisite preconditions for such ideas to be implemented. It is especially difficult in the light of (1) the unpredictability of the age at which one's needs will change, (2) the psychological barriers to planning for a time and set of circumstances that are universally feared, and (3) the ease with which an apparently hale and hearty person can postpone dealing with unpleasant things that may never come to pass.

CHAPTER VI. CURRENT AND PREFERRED HOUSING: A SUBJECTIVE DEFICIT ANALYSIS

Purpose

One of the main purposes of this research is to discover preferences of elderly Iowans. Because it has been shown in the literature that the current housing affects what individuals say they prefer, the data gathering and analyses of preferences have been arranged to explicitly take account of the current type of housing.

General Orientation

The basic idea of the analysis is to examine the data with a view to the preferences of elderly Iowans for a set of housing characteristics that might or might not indicate a market for a more compact kind of housing that would better meet the changing needs of the elderly. The set of characteristics that comprise what will be referred to as the compactness pattern would include (1) rental rather than ownership; (2) small, apartment-size units with fewer rooms, bedrooms, and bathrooms; (3) less complex room and floor plan arrangements including combined-function rooms; (4) better access for wheelchairs and other aids for the handicapped and disabled; (5) less private outdoor space; (6) location near to relatives; (7) mixed-age rather than age segregated neighborhoods; (8) urban rather than rural location; and some related characteristics. The key question is, "Do these data provide suggestions for new types of housing for the elderly?"

It is not expected that a large portion of the elderly in Iowa will be living in housing other than that which they prefer. Generally, it is expected that well over two thirds of the respondents have the type of housing they prefer and are well satisfied with it. Therefore, attention must be made to those small percentages who have unmet preferences; they are the ones who are most likely to be ready for a change in housing and the most likely candidates for a more compact kind of housing.

Subjective Deficits

The data permit analysis of what is called a subjective deficit as a means to discovery of the unmet preferences of elderly Iowans. Related to the need to know about unmet preferences is the value of knowing if there are patterns of unmet preferences that could be met through innovations in housing types.

A subjective deficit is defined as a difference between a characteristic of the current housing and a preferred characteristic. The differences between the current and the preferred housing can lead to the discovery of, for example, (1) the proportion who live in owned dwellings who prefer ownership, (2) the proportion who live in owned

housing who prefer to rent, (4) the proportion who live in rented housing who would prefer to own. Individuals with unmet preferences would be included in (2) and (4). Those whose preferences have been met would be included in (1) and (3). This mode of analysis provides much more information about housing preferences than simply asking what type of housing is lived in currently and what type is preferred.

There are subjective deficits available in the data for (1) type of tenure, (2) type of structure, (3) number of rooms, (4) number of bedrooms, (5) number of bathrooms, (6) living room facilities, (7) kitchen facilities, (8) floors in dwelling, (9) outdoor space, (10), mixed age or segregated neighborhood, and (11) type of community.

The questions used in the interview to obtain the subjective deficits include (generally) a set of three questions for each characteristic. The set of three questions includes (1) one asking for the current housing characteristic, (2) one asking if a different characteristic is preferred, and (3) one asking what characteristic is preferred.

A different type of subjective deficit is available for (1) clothes washing machine, (2) clothes dryer, (3) wheelchair access to bathroom, (4) wheel chair accesses to kitchen, (5) wheel chair access to bathroom, and (6) housing designed for elderly persons. A few additional questions that have been discussed elsewhere in this report will be discussed briefly.

Current and preferred tenure. Nearly 83 percent of the respondents live in owned (combined regular and condominium ownership) dwellings (Table 109). The remainder rent or live in free housing (those who live free were combined with the renters). Very slightly fewer (82%) prefer ownership. Preference for condominium ownership is very slight. A little over 17 percent are renters with a similar percent who prefer rental. Relatively few live in and few prefer subsidized rental.

Table 109. Current and Preferred Tenure

<u>Tenure</u>	<u>Current</u>	<u>Preferred</u>
Regular Ownership	81.3%	80.1%
Condominium Ownership	1.4	1.8
Regular rental*	13.0	13.0
Subsidized rental	4.3	5.1
	—	—
Total	100.0%	100.0%
N	(277)	(277)

*Includes free rent

About 95% (78.4 + 1.4 + 11.2 + 4.3) of the sample are living in the type of tenure preferred (Table 110). In combination, about 78 percent are owners who prefer ownership. The only other sizable category is the 11 percent who rent and prefer to rent. Within categories, 96 percent of the owners prefer ownership. All condominium owners prefer that type of tenure. Over 86 percent of the renters prefer rental. About 14 percent would rather own. All subsidized renters prefer subsidized rental. The main conclusion is that only a tiny portion of owners are ready for a change. Movement toward more compact housing is evidenced by the 0.4 percent of owners who would prefer condominium and the 2.5 percent (1.8 + 0.7) who would prefer to rent. These are partially offset by renters who would prefer to own (1.8%) which turns out to be 14 percent of all renters.

Table 110. Combinations of Current and Preferred Tenure

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Own	Own	78.4%	96.4%
Own	Condominium Ownership	0.4	0.5
Own	Rent	1.8	2.2
Own	Subsidized	0.7	0.9
Subtotal			100.0%
N			(225)
Condominium ownership	Condominium ownership	1.4	100.0%
N			(4)
Rent	Rent	11.2	86.1%
Rent	Own	1.8	13.9
Subtotal			100.0%
N			(36)
Subsidized	Subsidized	4.3	100.0%
N			(12)
Total		100.0%	
N		(277)	

Current and preferred type of structure. The elderly population of Iowa is housed predominantly in single-family dwellings (81%) (Table 111). There are almost no townhouses, about 15 percent live in an apartment (5.8 + 4.3 + 5.1), and about 3 percent in mobile homes. The preferred type of housing nearly matches the actual with 77 percent who prefer the single-family dwelling. Not quite 2 percent prefer a townhouse, 18 percent prefer an apartment (6.5 + 5.8 + 5.8), and 3 percent a mobile home.

Table 111. Current and Preferred Type of Structure

<u>Type of structure</u>	<u>Current</u>	<u>Preferred</u>
Single family dwelling	81.2%	77.2%
Townhouse	0.7	1.8
Small apartment building	5.8	6.5
Medium apartment building	4.3	5.8
Large apartment building	5.1	5.8
Mobile home	2.9	2.9
	-----	-----
Total	100.0%	100.0%
N	(277)	(277)

Only a tiny portion of the sample has unmet structure preferences (Table 112). Over 92 percent live in the type of dwelling preferred (75.8 + 0.4 + 5.1 + 4.0 + 4.3 + 2.9). Of those who live in a single family dwelling over 93 percent prefer that type of dwelling. Of the two respondents who live in a townhouse one prefers that type of dwelling. Of the 16 who live in a small apartment building, 14 (87.5%) prefer such a type of dwelling. Of the 12 who live in a medium sized apartment building, 11 (87.5%) prefer that type. Of the 14 who live in a large apartment building, 12 (85.7%) prefer that type of dwelling.

Table 112. The Combinations of Current and Preferred Type of Structure

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Single family	Single family	75.7%	93.3%
Single family	Townhouse	1.1	1.3
Single family	Small apt. building	1.4	1.8
Single family	Medium apt. building	1.4	1.8
Single family	Large apt. building	1.4	1.8
Subtotal			100.0%
N			(225)
Townhouse	Townhouse	0.4	50.0%
Townhouse	Single family	0.4	50.0
Subtotal			100.0%
N			(2)
Small apt. building	Small apt. building	5.1	87.6%
Small apt. building	Townhouse	0.4	6.2
Small apt. building	Medium apt. building	0.4	6.2
Subtotal			100.0%
N			(16)
Medium apt. building	Medium apt. building	4.0	91.7%
Medium apt. building	Single family	0.4	8.3
Subtotal			100.0%
N			(12)
Large apt. building	Large apt. building	4.3	85.7%
Large apt. building	Single family	0.7	14.3
Subtotal			100.0%
N			(14)
Mobile home	Mobile home	2.9	100.0%
N			(8)
Total		100.0%	
N		(277)	

If there is a clear pattern in these results it is that the overwhelming majority are living in the type of dwelling preferred. No particular type of dwelling stands out except that single-family dwelling and mobile home may be slightly more preferred by those who live in them than the other types. The most obvious conclusions from these results is that there is no obvious demand for nonsingle-family dwellings on the part of elderly residents of single-family dwellings. The potential movement toward compactness is in the 8% of owners who would prefer a townhouse or an apartment (5% of the sample). All other potential changes are in the opposite direction, for example, the residents of apartments who prefer a single-family dwelling, a townhouse, or an apartment in a larger building (2.3% of the sample).

Current and preferred number of rooms. The average number of rooms in the respondent's current dwelling (Table 113) is 5.6 and the average number preferred is 5.4. The distribution of the current and the preferred number of rooms are quite similar.

Table 113. Current and Preferred Number of Rooms

<u>Number of rooms</u>	<u>Current</u>	<u>Preferred</u>
1	0.0%	0.4%
2	0.7	0.4
3	7.2	8.3
4	15.2	18.4
5	27.1	28.8
6	23.8	24.2
7	13.7	9.7
8	7.6	5.8
9	2.5	2.9
10	1.8	1.1
11	0.4	0.0
Total	100.0%	100.0%
N	(277)	(277)
Mean	5.6	5.4

These data on combined current and preferred number of rooms (Table 114) are grouped according to whether the respondent has the same number of rooms as preferred or more or less than the number preferred. It can be seen that nearly 80 percent have the number of rooms preferred. Twelve percent would prefer more and 8 percent fewer rooms. With respect to the compactness hypothesis there is a little support in the data on the number of rooms but it is offset by potential changers in

the other direction.

Table 114. Combination of Current and Preferred Number of Rooms

	<u>Percent</u>
Have the number of rooms preferred	79.4%
Prefer more rooms	12.3
Prefer fewer rooms	8.3
<hr/>	
Total	100.0%
N	(277)

Current and preferred number of bedrooms. The average respondent in the sample reports having 2.6 bedrooms while the average preferred is 2.5, a very slight decrease (Table 115). There is a tendency for the preferred number of bedrooms to move toward the average from the actual number of bedrooms. Those with one or two bedrooms are likely to prefer somewhat more and those with five or six somewhat fewer bedrooms.

Table 115. Current and Preferred Number of Bedrooms

<u>Number of Bedrooms</u>	<u>Current</u>	<u>Preferred</u>
0	0.7%	0.4%
1	10.1	8.7
2	37.2	46.9
3	36.1	32.1
4	14.1	10.8
5	1.8	1.1
<hr/>		
Total	100.0%	100.0%
N	(277)	(277)
Mean	2.6	2.5

More than three fourth (Table 116) of the respondents have the number of bedrooms preferred. Somewhat surprisingly, there are more who would like to have more bedrooms than they have now than would prefer to have fewer. As in the case of the number of rooms, the average number of bedrooms lends support toward the move to compactness; this is more than offset by potential change in the opposite direction.

Table 116. Combination of Current and Preferred Number of Bedrooms

	<u>Percent</u>
Have the number of bedrooms preferred	77.6%
Prefer more bedrooms	13.7
Prefer fewer bedrooms	8.7

Total	100.0%
N	(277)

Current and preferred number of bathrooms. The average current number of bathrooms (Table 117) is 1.9 and the average preferred number is 2.0. The data were recorded only in half or whole baths. One and three-fourth baths, for example, were coded as two bathrooms.

These data (Table 118) are arranged as were the bedroom data. Over three-fourths of the respondents have the number of bathrooms preferred. There are more who prefer fewer bathrooms than prefer more bathrooms. The result is in line with the expectations implicit in the compactness hypothesis in that 17 percent prefer to have fewer bathrooms. The result is somewhat more impressive than it would seem at first because more than 50 percent have fewer than two complete bathrooms.

Table 117. Current and Preferred Number of Bathrooms

<u>Number of Bathrooms</u>	<u>Current</u>	<u>Preferred</u>
1.0	1.8%	1.1%
1.5	53.1	41.9
2.0	15.5	16.6
2.5	19.8	32.9
3.0	4.7	3.6
3.5	4.0	3.2
4.0+	1.1	0.7
-----		-----
Total	100.0%	100.0%
N	(277)	(277)
Mean	1.9	2.0

Table 118. Combination of Current and Preferred Number of Bathrooms

	<u>Percent</u>
Have the number of bathrooms preferred	77.3%
Prefer more bathrooms	5.4
Prefer fewer bathrooms	17.3
—	
Total	100.0%
N	(277)

Current and preferred living-dining arrangement. In Table 119, it can be seen that about 35 percent have a living room but no dining room, 45 percent have both living and dining rooms, and about 20 percent have a living-dining combination. The percentages for the preferences are similar but with fewer respondents who prefer no dining room. Just over 30 percent prefer a living room and no dining room, over 45 percent prefer a separate dining room, and over 20 percent prefer a living-dining combination.

Table 119. Current and Preferred Living-Dining Arrangements

<u>Arrangement</u>	<u>Current</u>	<u>Preferred</u>
Living, no dining*	35.4%	30.7%
Separate living, dining	44.7	46.2
Living-dining combination	19.9	23.1
—		—
Total	100.0%	100.0%
N	(277)	(277)

*Includes efficiency apartments--too few cases to analyze separately

In combination (Table 120) the largest percentages are among those who have the preferred living-dining arrangements (about 86% in total). The category most primed for change is the living-no dining group; about 20 percent of them want a separate dining room or a living-dining combination. About 12 percent of those with separate living-dining rooms would prefer no dining room or a living-dining combination. This category fits the compactness hypothesis but is offset by potential change in the opposite direction. About 9 percent of those with a living-dining combination would prefer a separate dining room.

The conclusion from these data is that only about 5 percent of the sample (the respondents who have a separate dining room but would prefer either a combination or no dining room) fit expectations. The remainder either prefer what they have or prefer something larger or more complex.

Table 120. Combinations of Current and Preferred Living-Dining Arrangements

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Living, no dining	Living, no dining	28.2%	79.6%
Living, no dining	Separate living, dining	5.1	14.3
Living, no dining	Living, dining combined	2.2	6.1
Subtotal			100.0%
N			(98)
Separate living, dining	Separate living, dining	39.2	87.9%
Separate living, dining	Living, no dining	2.5	5.6
Separate living, dining	Living-dining combined	2.9	6.5
Subtotal			100.0%
N			(124)
Living-dining combined	Living-dining combined	18.1	90.9
Living-dining combined	Living, no dining	0.0	0.0
Living-dining combined	Separate living dining	1.8	9.1
Subtotal			100.0%
N			(55)
Total		100.0%	
N		(277)	

Current and preferred kitchen-dining arrangement. Table 121 indicates that about 15 percent have a kitchen separate from the dining area, over 50 percent have a small eating area in the kitchen, and about 30 percent have a kitchen with a large eating area (includes kitchen-dining combinations). The preferred kitchen-dining combination is similar with a reduced percentage who prefer a separate kitchen and a small eating area. About 11 percent prefer separate kitchen and dining rooms, 49 percent a kitchen with a small eating area, and 40 percent a kitchen with a large eating area.

Table 121. Current and Preferred Kitchen-Dining Arrangement

<u>Kitchen arrangement</u>	<u>Current</u>	<u>Preferred</u>
Separate from eating area	15.2%	10.8%
With small eating area*	53.4	48.8
With large eating area**	31.4	40.4
Total	100.0%	100.0%
N	(277)	(277)

*Includes efficiency apartment

**Includes kitchen-dining combination

The combinations (Table 122) show that most respondents are those who currently have the kitchen-dining arrangement that they prefer (83% in total). Of those with a separate kitchen 24 percent prefer a kitchen with a small eating area (fits with compactness). Of those with a small eating area nearly 20 percent would prefer a large eating area. Of those with a large eating area in the kitchen, 6 percent prefer a separate kitchen. The other percentages are very small.

The respondents who are potential changers are in both directions, toward compactness for some and away from it for others with more going away. Summing together the respondents who prefer kitchen arrangements toward the compact pole [separate kitchen who prefer combined kitchen-dining (30.9%), large eating area who prefer small about 1.1 percent] there are 32 percent who prefer kitchen arrangements to the compactness space.

Table 122. Combinations of Current and Preferred Kitchen-Dining Arrangements

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Separate kitchen	Separate kitchen	10.5%	69.1%
Separate kitchen	With small eating area	3.6	23.8
Separate kitchen	With large eating area	1.1	7.1
Subtotal			100.0%
N			(42)
With small eating area	With small eating area	43.4	81.1%
With small eating area	Separate kitchen	0.0	0.0
With small eating area	With large eating area	10.0	18.9
Subtotal			100.0%
N			(148)
With large eating area	With large eating area	29.2	93.2%
With large eating area	Separate kitchen	1.8	5.7
With large eating area	With small eating area	0.4	1.1
Subtotal			100.0%
N			(87)
Total		100.0%	
N		(277)	

Current and preferred number of floors in dwelling. In Table 123 it can be seen that about two-thirds of the sample live in dwellings with one floor, nearly one-third live in two floors, and about two percent have three or more floors. For the preferences, nearly 80 percent of the respondents would prefer to live in dwellings with only one floor. Another 20 percent prefer to live in dwellings with two floors.

Table 123. Current and Preferred Number of Floors in the Dwelling

<u>Number of floors</u>	<u>Current</u>	<u>Preferred</u>
1	65.7%	78.7%
2	32.5	19.9
3	1.8	1.4
	—	—
Total	100.0%	100.0%
N	(277)	(277)

Most of the respondents (86.2%) live in a dwelling that has the number of floors that they prefer, particularly those who live in a dwelling with one floor. Of those whose dwelling has two floors, 40 percent prefer to live in a dwelling with only one floor. Twenty percent of the respondents who live in a dwelling with three floors prefer to live in a dwelling with one floor. The direction of potential change for this housing characteristic is towards living in a dwelling with one floor which supports the compactness hypothesis (Table 124).

Table 124. Combinations of Current and Preferred Number of Floors in the Dwelling

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
One floor	One floor	65.3%	99.4%
One floor	Two floors	0.4	0.6
One floor	Three floors	0.0	0.0
Subtotal			100.0%
N			(182)
Two floors	Two floors	19.5	60.0%
Two floors	One floor	13.0	40.0
Two floors	Three floors	0.0	0.0
Subtotal			100.0%
N			(90)
Three floors	Three floors	1.4	80.0%
Three floors	One floor	0.4	20.0
Three floors	Two floors	0.0	0.0
Subtotal			100.0%
N			(5)
Total		100.0%	
N		(277)	

Current and preferred outdoor space. Table 125 indicates that two-thirds of the sample living in housing with a large private yard; this is not surprising for a sample taken in Iowa. Less than a quarter have a small yard, only 8 percent share a yard, and only 2 percent have no private or shared yard. Only about 50 percent of the respondents prefer to live in housing with a large yard. Forty-one percent would prefer to have a small private yard, 6.9 percent prefer to share a yard and only 1.4 percent prefer to have no yard.

Table 125. Current and Preferred Outdoor Space

<u>Type of Outdoor Space</u>	<u>Current</u>	<u>Preferred</u>
No yard	2.9%	1.4%
Shared yard	7.6	6.9
Small private yard	22.7	41.2
Large private yard	66.8	50.5
	—	—
Total	100.0%	100.0%
N	(277)	(277)

Nearly 80 percent of the sample have the amount of outdoor space that they prefer (Table 126). The most preferred outdoor space for the respondents with a potential to change is small private yard; 37.5 percent of those with no yard prefer a small private yard, 14.3 percent with a shared yard prefer a small private yard and 26 percent with a large yard prefer a small yard. This does lend some support towards compactness is provided by these data, but most of the respondents prefer to have private outdoor space.

Table 126. Combinations of Current and Preferred Outdoor Space

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
No yard	No Yard	1.4%	50.0%
No yard	Shared yard	0.0	0.0
No yard	Small private yard	1.1	37.5
No yard	Large private yard	0.4	12.5
Subtotal			100.0%
N			(8)
Shared yard	Shared yard	6.5	85.7%
Shared yard	No yard	0.0	0.0
Shared yard	Small private yard	1.1	14.3
Shared yard	Large private yard	0.0	0.0
Subtotal			100.0
N			(21)
Small private yard	Small private yard	21.7	95.2%
Small private yard	No yard	0.0	0.0
Small private yard	Shared yard	0.0	0.0
Small private yard	Large private yard	1.1	4.8
Subtotal			100.0%
N			(63)
Large private yard	Large private yard	49.0	73.6%
Large private yard	No yard	0.0	0.0
Large private yard	Shared yard	0.4	0.5
Large private yard	Small private yard	17.3	25.9
Subtotal			100.0%
N			(185)
Total		100.0%	
N		(277)	

Current and preferred mixed-segregated neighborhood. As expected the overwhelming proportion of the sample live in housing that is not segregated by age (Table 127). Less than 12 percent live in neighborhoods consisting only of elderly people. Preferences seem to be even stronger with 90.6 percent preferring the mixed-age neighborhood.

Table 127. Current and Preferred Mixed-Segregated Neighborhood

<u>Type of neighborhood</u>	<u>Current</u>	<u>Preferred</u>
Mixed	88.4%	90.6%
Segregated	11.6	9.4
Total	100.0%	100.0%
N	(277)	(277)

When combined about 85 percent of the respondents live in the type of neighborhood that they prefer (Table 128). About 82 percent live in mixed neighborhoods that are preferred and 2.9 percent are living in segregated neighborhoods that are preferred. About 7 percent of those living in mixed neighborhoods prefer age-segregated neighborhoods and 75 of the segregated respondents prefer mixed. It is clear that Iowa's elderly population is not very interested in age-segregated housing; the data support the compactness approach.

Table 128. Combined Current and Preferred Mixed-Segregated Neighborhoods

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Mixed	Mixed	81.9%	92.7%
Mixed	Segregated	6.5	7.3
Subtotal			100.0%
N			(245)
Segregated	Segregated	2.9	25.0%
Segregated	Mixed	8.7	75.0
Subtotal			100.0%
N			(32)
Total		100.0%	
N		(277)	

Current and preferred type of community. The distribution of the sample by type of community (Table 129) is quite even (with the exception of suburbs) which results from (1) the nature of Iowa settlements and (2) the way the sample was drawn to include both urban and rural residents. Less than one fifth of the sample lives in rural areas, small towns, or in large towns. Just over a fifth lives in small cities. Over a quarter live in large cities. Less than 2 percent live in suburbs or large cities. To some extent this number is low because some respondents in suburbs report living in the city itself and some who live in the suburbs actually live in the surrounding small towns, large towns, or small cities near a large city. Preferences for the various types of community are very similar to the actual community types.

Table 129. Current and Preferred Type of Community

<u>Type of community</u>	<u>Current</u>	<u>Preferred</u>
Rural Area	14.8%	13.7%
Small town	15.2	15.5
Large town	17.3	17.7
Small city	23.1	24.2
Suburb of a city	1.8	2.2
Large city	27.8	26.7
	-----	-----
Total	100.0%	100.0%
N	(277)	(277)

Summing all the respondents who live in the type of community preferred, 94.2 percent have no community deficit (Table 130). Examination of the groups shows that nearly 90 percent of the rural residents prefer rural residence, 5 percent each prefer small town and large town residence and 2.5 percent a large city. Among the small town residents, 95 percent prefer the small town. About 2.5 percent each prefer large towns and small cities. Among the large town residents, 95 percent prefer the large town. Two percent prefer small cities and 2 percent prefer the suburbs. Just 97 percent of the small city residents prefer that size of place and 1.5 percent each prefer rural and suburban living. Among the small city residents all but 3 percent prefer the small city. Those who do not are split between rural areas and suburbs. Among the few suburban residents, 80 percent prefer the suburbs and 20 percent prefer rural areas. The large city residents prefer the large city at a rate of 95 percent. The dissenters include 1 percent who prefer the small town and 4 percent who prefer the small city.

The conclusion from these data is that there is no obvious tendency toward centralization in the more urban areas. Overwhelming the respondents prefer the type community they live in. Nevertheless, about 10 percent of rural residents prefer something more urban thus supporting the compactness pattern. They, however, are counteracted by potential changers in the opposite direction.

Table 130. Combinations of Current and Preferred Type of Community

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Rural	Rural	13.0%	87.8%
Rural	Small town	0.7	4.9
Rural	Large town	0.7	4.9
Rural	Large city	0.4	2.4
Subtotal			100.0%
N			(41)
Small town	Small town	14.4	95.2%
Small town	Large town	0.4	2.4
Small town	Small city	0.4	2.4
Subtotal			100.0%
N			(42)
Large town	Large town	16.5	96.0%
Large town	Small city	0.4	2.0
Large town	Suburb	0.4	2.0
Subtotal			100.0%
N			(48)
Small city	Small city	22.3	97.0%
Small city	Rural	0.4	1.5
Small city	Suburb	0.4	1.5
Subtotal			100.0%
N			(64)
Suburb	Suburb	1.4	80.0%
Suburb	Rural	0.4	20.0
Subtotal			100.0%
N			(5)

Table 130 cont.

<u>Current</u>	<u>Preferred</u>	<u>Percent of total</u>	<u>Percent of group</u>
Large city	Large city	26.3	94.8%
Large city	Small town	0.4	1.3
Large city	Small city	1.1	3.9
Subtotal			100.0%
N			(77)
Total		100.0%	
N		(277)	

Simplified Subjective Deficits.

In the next group of housing characteristics, it is expected that few respondents want to have the characteristic if it is not present in their current housing. For these characteristics the respondents were asked the preference question only if they do not have the following characteristics in their housing: (1) a clothes washing machine, (2) a clothes dryer, (3) wheelchair access to dwelling, kitchen and bathroom, and (4) housing designed especially for the elderly.

Washer and dryer. Nearly 90 percent of these respondents have a clothes washing machine (Table 131). Of those who do not, only 30 percent would prefer to have one. There is a group who apparently do not have a washer because they do not want one. Presumably, they prefer having someone else do their laundry or going to a laundromat.

Table 131. Current and Preferred Washing Machine in the Dwelling

<u>Have washing machines</u>	<u>Current</u>	<u>Preferred*</u>
No	11.2%	70.0%
Yes	88.8	30.0
Total	100.0%	100.0%
N	(277)	(277)

*Only of those who have none

The data on clothes dryers are similar with about 80 percent having a dryer (Table 132). A somewhat higher percentage of those who have no dryer would prefer one compared with those who have no washer. This pattern may involve the persons who have a washer but no dryer. Hanging clothes on a line or going out to dry them may be a chore.

Table 132. Current and Preferred Clothes Dryer in the Dwelling

<u>Have clothes dryer</u>	<u>Current</u>	<u>Preferred*</u>
No	21.3%	59.6%
Yes	78.7	40.4
	—	—
Total	100.0%	100.0%
N	(277)	(277)

*Only of those who have none

Wheel chair access. As expected, relatively few of the respondents live in a dwelling with provisions for wheel chair access (Tables 133-135). Only 6.5 percent have access to the entrance, 9.4 percent access to the kitchen, and 7.2 percent access to the bathroom with a wheelchair. In each case approximately one quarter of the respondents who do not have wheel chair access would prefer it. This result does not necessarily mean that one-fourth use a wheel chair at the present moment but instead that they might need one in the future.

Table 133. Wheelchair Access to Dwelling

<u>Have access</u>	<u>Current</u>	<u>Preferred*</u>
No	93.5%	76.4%
Yes	6.5	23.6
	—	—
Total	100.0%	100.0%
N	(277)	(258)

*Only of those who have none

Table 134. Wheelchair Access to Kitchen

<u>Have access</u>	<u>Current</u>	<u>Preferred*</u>
No	90.6%	77.3%
Yes	9.4	22.7
Total	100.0%	100.0%
N	(277)	(251)

*Only of those who have none

Table 135. Wheelchair Access to Bathroom

<u>Have access</u>	<u>Current</u>	<u>Preferred*</u>
No	92.8%	74.3%
Yes	7.2	25.7
Total	100.0%	100.0%
N	(277)	(257)

*Only of those who have none.

Housing designed for the elderly. As in the case of wheelchair access, few (12%) of the respondents live in housing specifically designed for the elderly (Table 136). Of those who do not, about a quarter would prefer housing for the elderly. The conclusion from this is that a sizable minority of the respondents would prefer housing that is more tailored to their status as elderly, potentially handicapped individuals.

Table 136. Current and Preferred Design for the Elderly

<u>Live in dwelling designed for the elderly</u>	<u>Current</u>	<u>Preferred*</u>
No	88.4%	72.7%
Yes	11.6	27.3
Total	100.0%	100.0%
N	(277)	(242)

*Only of those who have none

Potential compromises. To explore a number of housing characteristics which might provide areas of compromise the respondents ranked four housing characteristics as to their relative importance: (1) having a bedroom separate from all other rooms, (2) large closets, (3) large kitchen, and (4) large bathroom. (Unfortunately, 45 respondents were unable to or refused to do the ranking. It can only be assumed that the missing responses are similar to those obtained.) The relative importance of each is quite clear (Table 137). A separate bedroom is mainly ranked number one (69%), large closets is mainly ranked number two (47.9%), a large kitchen is mainly number three (37.5%), and large bathroom is mainly ranked number four (54.3%). The average ranking for each characteristic shows the same pattern. Having a separate bedroom has an average rank of 1.5, large closets 2.4, large kitchen, 2.7, and large bathroom 3.4. These data would suggest that an efficiency type of unit is definitely not preferred relative to the other characteristics.

Table 137. Ranking of Various Housing Characteristics

<u>Rank</u>	<u>Separate bedroom</u>	<u>Large closets</u>	<u>Large kitchen</u>	<u>Large bathroom</u>
1	69.1%	14.2%	14.7%	2.2%
2	15.9	47.9	23.7	12.5
3	7.3	24.1	37.5	31.0
4	7.7	13.8	24.1	54.3
Total	100.0%	100.0%	100.0%	100.0%
N	(232)	(232)	(232)	(232)
Mean	1.5	2.4	3.4	2.7

A series of questions asking whether the respondent might be willing to move to several alternatives is quite revealing. Over 29 percent said they would be willing to move to a smaller dwelling (clearly in line with the compactness hypothesis). In contrast fewer than 5 percent would be willing to move to (1) the home of family or relatives, (2) shared housing, (3) an accessory apartment, (4) an elder cottage, or (5) a boarding home. Over a quarter would be willing to move to a retirement home and more than 10 percent would be willing to move to a nursing home. These data give rather mixed information about the compactness hypothesis. And, in particular, they provide little support toward some of the more recent innovations in housing for the elderly.

The data on satisfaction (presented elsewhere) are very much in accord with the finding that the overwhelming proportion of the respondents are living in the housing they prefer. Nearly 85 percent are satisfied with the dwelling and over 85 percent are satisfied with the neighborhood.

Conclusion.

Because of the findings presented in this and the previous chapter, it must be remembered that questions about the appropriateness of policies in the provision of housing for the elderly must be framed carefully. When transitions in health and independence are concerned, only a small proportion of elderly individuals are likely to be ready for a change at any given moment. Therefore, whatever policy is developed is likely to have only a small, incremental, gradual effect. Further, most usable housing alternatives for the elderly are already in existence and an appropriate policy stance might be to facilitate the transitions for elderly individuals rather than to develop new alternatives. The solution may be one of social facilitation and education rather than physical facilities.

Further, the expansiveness of the housing lived in and preferred by Iowans which carries over into the oldest ages is a fact to be dealt with rather than resisted. Like the rest of the American population and indeed much of the world elderly Iowans would rather own a home that is sufficiently separate from the housing of others to provide privacy and safety and that is large enough inside to allow some privacy within the household.

The housing is not just shelter but an instrument of social legitimation and psychic gratification. Policy having to do with persons who are forced by health and other circumstances to make undesired changes or adaptations in their housing is doomed to failure if the depth of attachment to such housing patterns is not taken as a basic starting point. Housing programs for the elderly that stray too far from the dictates of that attachment cannot succeed except for a very small proportion of the small percentage who at any given moment are ready for or in need of change.

It is likely to be economically, socially, and psychically cheaper for the state to concentrate on the provision of human services rather than physical facilities. When an elderly person reaches a point in life where the current housing is a burden or does not serve that person's needs there are basically three possibilities (four if one includes doing nothing) (1) move to different housing with the physical facilities that will substitute for the lost abilities of the elderly person, (2) make alterations in the current dwelling (alter the bathroom, the kitchen, move the bedroom to the first floor from the second, etc.), and (3) provide services in the form of such programs as meals-on-wheels, home maker aides, etc.

The relative length of the useful life of a dwelling unit (between 40 and 100 years) and the length of time during which an elderly individual with physical limitations is likely to be living in a specific dwelling unit (perhaps up to ten years) means that 2 and 3 are likely to be more rational policy approaches. Because of the attachment one develops to one's dwelling (whatever one's age) policies that are based on the idea that the aged person who becomes physically less able should change residence is likely to incur higher costs than are the alternatives. This relates, obviously, to housing transitions that occur prior to the time when the elderly person becomes frail and needs certain types of support.

The conclusions to which the data have led may seem to suggest a kind of do nothing approach to the housing of the elderly. On the contrary, they suggest that resources that might have been put into the development and construction of new types of housing should be used for support services and for alteration programs to provide support at home for those who need it. It also may be used to support education regarding availability of services for the elderly and of housing options for those who may want and need them. It seems unwise to insert into the housing market new types of housing that may or may not encounter sufficient demand to make their production profitable (approach number 1). Rather concentration on the second and third approaches which can be responses directly to specific needs of specific individuals with immediate recognizable beneficial results is recommended.

CHAPTER VII. FUTURE INTENTIONS

Most older people seem to believe they are getting along well today and that they may be doing as well or perhaps better than other people their age. Much of the literature in the field attests to that. What is of great concern to older people, however, is what will happen to them in the future. The questions the researchers in this study asked related to areas that older people are worried about shows that they do have a lot of anxiety about their futures. (See Chapter III).

In the belief that the future is of great concern to older people, the respondents were asked if they had any plans for the future and how those plans were made. Questions were asked about certain events or reasons which the respondents thought would precipitate a move for an older person, plans for moving, plans for the future, and the decision-making process. The children were also questioned in many of these same areas.

Reason for Moving

Sometimes things happen that cause people to move to a different type of housing. This is especially true for older people. As people age, changes occur both physically and socially. The differences between the older and younger groups of respondents in terms of health, marital status, etc. demonstrate this. The respondents' own expectations in terms of control also show some belief that they will have less control in the future than they now have. The respondents were asked if they thought certain events or conditions are good reasons for some older people to move.

Table 138 shows the percentages of respondents by age and location who believe that older persons think certain events or occurrence are good reasons to move.

Table 138. Perceptions of Events that Cause Older People to Move by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Death of a spouse	46.0%	48.8%	68.1%	55.6%
Declining health	83.0	87.7	90.1	82.2
Retirement	22.0	36.6	38.5	42.2
Children move from the community	18.0	24.4	25.3	28.9
Feeling unsafe in the home	84.0	75.6	81.3	71.1
Feeling unsafe in the neighborhood	92.0	78.0	86.8	77.8
N	(100)	(41)	(91)	(45)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

When asked if the death of a spouse is a good reason to move, the majority (55.2%) believe that it is. This is not an overwhelming majority, however; nearly 45 percent respond that death of a spouse is not a good reason to move. Interestingly, the rural respondents of both age groups express that it is a good reason to move more frequently than do the urban groups. In fact, 68.1 percent of the rural, under 75 group believe it is a good reason compared to 46 percent of the urban under 75. More of the rural 75 or over group feel it is a good reason to move than the urban 75 or over. It may be that the isolation of living in a rural area appears less positive when one is living alone rather than with a spouse.

Declining health is a stronger reason for people to move. Almost 86 percent of the sample say yes when asked if that is a good reason for older people to move. The strongest differences here are between the younger and older rural groups, 90.1 percent of the younger group say yes compared to nearly 82.2 percent of the older group. Yet for the urban group, more older than younger believe it is a good reason to move.

Retirement is not considered to be quite as good a reason to move for older people. Two-thirds of the respondents say no. The rural, 75

or over are the most positive (42.2%) followed by rural, under 75 (38.5%). The urban group, 75 or over is somewhat less positive (36.6%) but the younger urban group is the least positive. Only 22% report yes. For rural elderly, the place they live is very clearly tied to their life's work, and thus there may be more reason to leave when they are retired, to let younger people take over the work and the dwelling place, or perhaps it just isn't desirable to stay in the rural area when retired.

Having children move out of the community is even less of a reason for moving according to the respondents. Less than one-quarter of the sample respond yes to this query. Again more positive responses come from the rural older age group (28.9%) and the rural younger group, (25.3%). The least positive group is the urban, under 75 (18%).

For most of the sample, however, feeling unsafe in the home is a very good reason for older people to move. Almost 80 percent of the total sample respond yes. The younger groups are most positive about this. More of the urban, under 75 (84%) and rural, under 75 (81.3%) reply that this is a good reason to move than do the rural, 75 or over (71.1%) and the urban 75 or over (75.6%).

In a similar vein, feeling unsafe in the neighborhood is considered a good reason to move by nearly 86 percent of the total sample. Again more of the respondents in the younger groups are positive, urban under 75 (92%) and rural under 75 (86.8%) compared to the older urban (78%) and rural (77.8%) groups. Perhaps the younger groups believe they have more to lose by remaining there and the older groups feel they would lose more by leaving. The respondents have lived in those dwellings an average of 23.4 years ranging from less than 6 months to 72 years (Table 139).

Table 139. Years in Residence by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Mean	20.80	28.10	23.33	24.96
Median	21.00	29.00	23.00	20.50
Range	>6 mo to 67	>6 mo to 64	>6 mo to 70	1 to 72

For the children feeling unsafe in the neighborhood (92.9%), feeling unsafe in the home (91.3%), declining health (88.3%) are much better reasons for older people to move than are the death of a spouse (54.8%), retirement (45%), or children leaving the community (37.7%). This compares to the parents' sample overall where declining health (85.9%), feeling unsafe in the neighborhood (85.9%), feeling unsafe in the home (79.8%) are better reasons than death of a spouse (55.2%),

retirement (32.8%), or children moving (23.1%) for older people to move (Table 140).

Table 140. Comparison of Older Respondents and Children's Perceptions of Events that Cause Older People to Move by Parents' Age and Location

	Older Respondents	Children
Death of a spouse	55.2%	54.8%
Declining health	85.9	88.3
Retirement	32.8	45.0
Children move from the community	23.1	37.7
Feeling unsafe in the home	79.8	91.3
Feeling unsafe in the neighborhood	85.9	92.9
N	(277)	(508)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

Plans

For when the respondent may have to move. The respondents have made few plans for when they would have to move from their present dwelling (Table 141). Overwhelmingly the response is no when they are asked about such plans.

Table 141. Time When Have to Move by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
No	95.0%	80.5%	91.2%	91.1%
Yes	5.0	19.5	8.8	8.9
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Most of the persons, 91 percent, do not have any definite plans for the time when they would have to move from their present dwelling. Only 9 percent have made such plans.

The following responses were given by the group of twenty five respondents who report that they have definite plans for the time when they would have to move from their dwelling. Almost one-fourth, 24 percent would move to a low-income apartment, another 24 percent would move to a retirement community that has health provisions or would move to a Veterans' Soldier Home. Four respondents (16%) report they would move into a retirement condominium, senior citizen housing or retirement housing; the same number report they would move to a nursing home. One (4%) participant would move in with one of their children, another participant would move to a townhouse near medical facilities in a city, another would leave the farm and buy a home in a small town near the farm, another would move to another home which they currently own, and the last respondent would build a new home on acreage in 1987 (Table 142). There seemed to be no pattern by group. The urban 75 or over and the rural under 75 both include 32 percent of the respondents who have a plan.

Table 142. First Plan for a Time When Have to Move

Low income apartment	24.0%
Retirement community with health care	24.0
Retirement housing	16.0
Nursing home	16.0
Children	4.0
Townhouse	4.0
Buy home in small town near farm	4.0
Another home	4.0
Build	4.0
Total	100.0%
N	(25)

For when the respondent is no longer able to care for self. A minority, 13 percent, of the persons have definite plans for a time when they would not be able to take care of themselves for a long period of time. Nevertheless, most of them, 87 percent do not have any definite plans. The urban 75 or over, has made the most plans (26.8%) (Table 143).

Of the ones who do have definite plans, 47.9 percent report they would go to a nursing home (Table 144). Other responses include: moving to a retirement community with health care facilities or Masonic Lodge Apartments, 17.1 percent; moving in with a daughter, 8.6 percent; hiring help or increasing the amount of help or arranging to have someone come

in and stay, 5.7; moving near children or having children move in, 5.7 percent; moving to a Veteran's hospital, 3 percent; a daughter currently living with the respondent would care for him/her, 3 percent; staying at home and handling the situation, 3 percent; planning to put a trailer in the backyard and a daughter will move into the house, 3 percent; and committing suicide, 3 percent.

Table 143. Plans for When Unable to Care for Self by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	87.0%	73.2%	94.5%	86.7%
Yes	13.0	26.8	5.5	13.3
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Table 144. First Plan for When Unable to Care for Self

Nursing home	47.9%
Retirement community with health care	17.1
Daughter	8.6
Hiring help	5.7
Child moving in with parent	5.7
Veteran's home	3.0
Daughter lives there	3.0
Remaining in home	3.0
Trailer for daughter	3.0
Suicide	3.0
Total	100.0%
N	(35)

For choosing new housing. About one-sixth, 12 percent, of the participants have been looking for information on the different kinds of housing that they might move to as they get older. The rest of the group, 88 percent has not been looking for this kind of information. The younger groups, those under 75 have been doing the most looking (Table 145).

Table 145. Looking for Housing Information by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	89.0%	87.8%	82.4%	95.6%
Yes	11.0	12.3	17.6	4.4
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

All of the respondents were presented with a list of different kinds of housing alternatives that are available and were asked if they had ever thought of moving to any of them. The responses are listed in order of the most thought about to the least thought about option. Some would move to a small dwelling, 29 percent; to a retirement home or a retirement community, 27 percent; others would prefer to move to a nursing home, 12 percent; some would move to live with a family member or relative, 6 percent; some had thought about moving into shared housing, 4 percent; some had thought about moving into an elder cottage, 4 percent; some had thought about moving to a boarding home or a residential hotel, 3 percent; and a small percentage had thought about moving to an accessory apartment, 2 percent.

With the exception of moving to a nursing home, it appears to be the younger age groups which are doing the most thinking about moving into one of the housing options. The 75 or over groups, however, have done the most thinking about nursing homes with the rural older group having the highest percentage (24.4%) (Table 146).

Table 146. Consider Moving to a Different Dwelling by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Small dwelling	33.0%	17.1%	34.1%	22.2%
Retirement community or home	29.0	26.8	28.6	22.2
Nursing home	7.0	17.1	8.8	24.4
Family member	9.0	12.2	1.1	2.2
Shared housing	6.0	2.4	3.3	0.0
Elder cottage	4.0	2.4	3.3	4.4
Boarding home or residential hotel	2.0	4.9	2.2	4.4
Accessory apartment	5.0	0.0	0.0	2.2
N	(100)	(41)	(91)	(45)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

If classes were offered on housing for the elderly at little or no cost, the most chosen class is about choosing the appropriate housing to meet the needs of older people, 40 percent; on obtaining information about in-home services, such as meals on wheels, homemakers health aides, 38 percent; on choosing a retirement community, 31 percent; on choosing a nursing home, 24 percent; and on renovating the present housing to meet the needs of older people, 22 percent. Again the younger age groups are most interested in this kind of class. In fact, the rural under 75 has the most interest in all the classes (Table 147).

Table 147. Interest in Attending Classes on Housing for the Elderly by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Appropriate housing for elderly	43.0%	26.8%	47.3%	31.3%
In-home services	36.0	24.4	47.3	37.8
Retirement community	33.0	31.7	37.8	13.3
Nursing home	22.0	17.1	29.7	20.0
Renovating current home	16.0	19.5	34.1	13.3
N	(100)	(41)	(91)	(45)

Percentages do not add to 100.0% because each item was asked separately with a yes-no response.

Decisionmaking. All of the reasons that have been given and the plans that have been made are involved in the process of decisionmaking. Seeking information, choosing from among alternatives, attending classes to get more information are all part of this process. Other persons are frequently involved in this process. Table 148 shows the responses to the question "If you decided to move, would you ask for advice from . . .?"

The respondents would ask advice from different persons in case they decided to move. The most frequent response given is their children, 70 percent of participants, but this represents 81 percent of those respondents who have children; the spouse is mentioned by 56 percent of the sample but represents 97 percent of the persons who have a spouse; some would also consult with friends, 39 percent; and some would seek advice from other relatives, 25 percent. In this situation, the older groups from both urban (87.1%) and rural (89.5%) would turn to their children more than would the younger. The urban younger (75.3%) and older groups (87.1%) exhibit the greatest differences. All of the married older respondents would turn to spouse for help and almost all

of the younger group (rural, 96.9%; urban, 95.4%). There are no real differences on seeking advice from relatives, about one-quarter of all groups would. The younger age groups would turn to friends for advice more than the older ones. The urban under 75 group is the highest (45%) in seeking advice from friends.

Table 148. Advice Sought by Age and Location

	Urban		Rural	
	<75	75+	<75	75+
Children	75.3%	87.1%	80.2%	89.5%
N	(89)	(31)	(81)	(38)
Spouse	95.4	100.0	96.9	100.0
N	(65)	(14)	(65)	(16)
Relatives	25.0	29.3	26.4	20.0
N	(100)	(41)	(91)	(45)
Friends	45.0	24.4	39.6	35.6
N	(100)	(41)	(91)	(45)

Percentages do not add to 100.0% because each item was asked separately with a yes-no response.

Most of the participants, 82 percent, would go and visit several facilities, or have someone in the family do it, before deciding where to move. Eighteen percent report that they wouldn't. Again more of the younger groups state they or their family would visit while the rural 75 or older are the least (71.1%) likely to visit before moving (Table 149).

Table 149. Family Visits Facilities Before Moving by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	15.0%	19.5%	14.3%	28.9%
Yes	85.0	80.5	85.7	71.1
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Most of the persons, 76 percent, are not interested in the services of a professional housing consultant (Table 150). Twenty-five percent would consider consulting with a housing professional. Age seems to make a difference on whether the persons would be interested in hiring the services of a professional consultant. Thirty-one percent of the persons under 75 years would be interested in this service, while less than 10 percent of the persons 75 or over express any interest.

Table 150. Use of the Services of a Professional Housing Consultant by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	69.0%	90.2%	69.2%	91.1%
Yes	31.0	9.8	30.8	8.9
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Overall, it appears that the younger age groups are more interested in help with this decisionmaking process through seeking information and asking advice of others.

Definite plans

Moving. Four respondents have definite plans to move within the next twelve months (Table 151). One is planning to move to a different dwelling unit in the same neighborhood. Two are planning to move to a different neighborhood in the same community. The fourth has decided to move to a different community in Iowa. Of the four, two have already chosen a dwelling unit to which to move.

Table 151. Definite Plans to Move in 12 Months by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	100.0%	100.0%	100.0%	50.00%
Yes	0.0	0.0	100.0	50.0
Subtotal	100.0%	100.0%	100.0%	100.0%
N	(5)	(2)	(3)	(2)

Remodeling, altering, enlarging dwelling. Forty-one respondents (15%) say they have thought about remodeling, altering, or enlarging their dwelling units. Those interested in such changes tend to be among the younger respondents (Table 152). Sixteen to 19.8 percent of those under age 75 have definite plans to remodel, while less than 10 percent of those age 75 or older plan to do so.

Table 152. Plans to Remodel by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	84.0%	90.2%	80.2%	93.3%
Yes	16.0	9.8	19.8	6.7
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Of those who have thought about remodeling, over half (n=22) want to remodel within the next three years. Thirteen want to remodel in the next 12 months, 11 respondents expect to remodel in that time period, and nine (3% of the sample) have definite plans to remodel within the next year.

Living in a warmer climate

Only thirty three of the respondents report regularly spending the winter in a warmer climate. Eight percent of the rural dwellers do so, as opposed to 16 percent of the urban dwellers. Nearly 14 percent of those under age 75 and over 8 percent of those age 75 and older winter where it is warm (Table 153).

Table 153. Live in a Warmer Climate by Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	83.0%	87.8%	90.1%	95.6%
Yes	17.0	12.2	9.9	4.4
Total	100.0%	100.0%	100.0%	100.0%
N	(100)	(41)	(91)	(45)

Children's Views

Fifty-six percent of the adult children are not concerned that their parent's present housing will not continue to meet his/her needs as aging progresses and 44 percent are concerned. Children of older parents are the most concerned (Table 154).

Table 154. Children's Concern about Present Housing of Parents by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	56.5%	48.5%	60.2%	51.9%
Yes	44.5	51.5	39.8	48.1
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Even though almost half of the adult children are concerned about that problem, only 11 percent have helped their parent look for information on the different kinds of housing that he/she might move into in the future. Again the children of the older parents are most involved (Table 155).

Table 155. Children Help Parents Look for Housing Information by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	91.9%	78.1%	93.9%	79.2%
Yes	8.1	21.9	6.1	20.8
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Interestingly, it is the younger groups of parents who have responded that they have done the most looking into housing alternatives. Thirty-three percent of the children respond that they believe their parent would move at some point, and these respondents are more often children of the younger parents as shown in Table 156. It may be recalled that very few of the parents have made any definite plans to move.

Table 156. Children Expect Parents to Move by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	59.7%	84.4%	64.1%	79.2%
Yes	40.3	15.6	35.9	20.8
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

Almost 18 percent of the children do not believe a parent would move closer to a child; 24 percent respond yes, and 59 percent say that the parent already lives close to a family member. Children of older urban parents are the most likely to report that their parents already live close to one of their children (Table 157).

Table 157. Children's Belief About Parents Moving Closer by Parents' Age and Location

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
No	18.8%	4.7%	20.4%	20.8%
Yes	21.5	15.6	29.8	20.8
Already lives close	59.7	79.7	50.8	58.4
Total	100.0%	100.0%	100.0%	100.0%
N	(186)	(64)	(181)	(77)

The responses are very mixed regarding which family member the parent would chose to move nearer. Of those who felt the parent would move closer to a family member, 17.5 percent believe the parent would move closer to that particular child who is responding to the questionnaire, 25 percent responded nearer to a son, 40.0 percent to a daughter, 2.5 percent to a sibling, 12.5 percent nearer "one of the kids," and the remaining responded nearer other relatives (2.5%) (Table 158).

Table 158. Children's Report of Family Member Parent Would Choose to Move Nearer

Child respondent	17.5%
Son	25.0
Daughter	40.0
Sibling	2.5
Children	12.5
Sisters or children	0.8
Mother	1.7
<hr/>	
Total	100.0%
N	(120)

A list of various kinds of housing was given to the adult children as well as to the parents. The children were asked whether their parent would consider moving into any of the types of housing. As discussed earlier, the older respondents were also asked if they would consider moving into various housing options. The results of each are shown in Table 159.

Table 159. Move Into a Different Dwelling

	<u>Parents</u>	<u>Children</u>
Smaller dwelling	29.2%	35.0%
Accessory apartment	2.2	13.2
With a family member or a relative	5.8	19.7
Shared housing	3.6	11.2
Elder cottage	3.6	15.9
Boarding home or residential hotel	2.9	3.9
Retirement home or community	27.4	34.6
Nursing home	11.9	9.4
N	(277)	(508)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

A much higher percentage of children feel the parent would move in with a family member or relative than did the parents themselves: 19.7

percent of the children compared to 5.8 percent of the parents. Some of the housing options such as shared housing, accessory apartment, and elder cottages are chosen more frequently by children than by their parents. About one-third of both samples believe the parent would move to a smaller dwelling; approximately an equal number feel a retirement community or home would be the choice while about 9 to 12 percent of both samples think that a nursing home would be the choice.

The children were also asked if the parent is to move, from whom would the parent ask advice. Over 80 percent believe the parent would ask them for advice, and somewhat more than that percentage believe that their parent would ask advice from other children as well (Table 160). About 83 percent of those whose parents have a spouse feel that the parent would get advice from the spouse. Friends would also be concerned in this process according to the children; 56.2 percent believe that parents would ask for advice from their friends.

Table 160. Children's Perception of Whom Parent Would Ask for Advice on Moving

Adult child	80.3%
N	(508)
Other Children	82.4
N	(442)
Spouse	83.1
N	(385)
Friends	56.2
N	(386)

Percentages do not total 100.0% because each item was asked separately with a yes-no response.

A majority (86.6%) of the children respond that they or a member of their parent's family would visit several facilities, communities, or model homes in helping their parent make the choice of where to live (Table 161). Close to 32 percent feel that they would like a professional housing consultant to help make the decision by providing information as to types and availability of housing (Table 162). Table 163 shows the percentages of children who report that they would be willing to attend various classes on housing for the elderly if they would be available at little or no cost.

Table 161. Visit New Housing Before Making a Decision

No	13.4%
Yes	86.6
<hr/>	
Total	100.0%
N	(508)

Table 162. Children's Report of Use of Services of Professional Housing Consultant

No	69.1%
Yes	30.9
<hr/>	
Total	100.0%
N	(508)

Table 163. Children's Report on Attending Classes on Housing for the Elderly

Renovating	34.3%
In home service	47.2
Retirement home	37.4
Nursing home	26.2
Appropriate housing	56.5
N	(508)

Percentages do not add up to 100.0% because each item was asked separately with a yes-no response.

Most children have not discussed plans with their parents for a time when the parents would have to move from their homes; 15.2 percent have discussed such a plan (Table 164). This is a higher percentage than for the parents which is about 9 percent. The highest percentage of children who had discussed a plan with the parent have apparently discussed the possibility of the parent moving in with a child (32.5%). Moving to a retirement community or to a nursing home has been discussed next most frequently, 24.2 percent and 16.1 percent respectively. Percentages for the plans are shown in Table 165 and include moving to an apartment, buying a home in a nearby town, staying where they are now, moving to a smaller home, hiring help, and son moving back home. These were similar to the plans mentioned by parents.

Table 164. Children's Plans for Time when Parents Would Have to Move

No	84.8%
Yes	15.2
Total	100.0%
N	(508)

Table 165. Children's First Plan for Time when Parent Would Have to Move

Children	32.5%
Retirement community	24.2
Nursing home	16.1
Apartment	4.8
Buy home in town	3.2
Stay where live	4.8
Small home	3.2
Hire help	3.2
Son move home	1.6
Closer to child	4.8
House with easier access	1.6
Total	100.0%
N	(62)

A comparable number of children have discussed plans with the parent for a time when they are unable to care for themselves (14.6%) (Table 166). This is very similar to the parents who have made definite plans (13%). Over 40 percent of those who have discussed plans with their parents have discussed some type of alternative that offers longterm care: nursing home, care center, retirement community or veterans home with medical facilities. The remainder have discussed such options as moving in with daughter, hiring help, daughter living with them, staying in own home and handling the problem, children taking turns caring for them, moving to a smaller home, or talking the situation over with the family (Table 167).

Table 166. Children's Plans for when Parent Unable to Care for Self

No	85.5%
Yes	14.6
Total	100.0%
N	(508)

Table 167. Children's First Plans for when Parent Unable to Care for Self

Housing with health care	41.7%
Move in with daughter	23.3
Hiring help	15.0
Daughter moving in	3.3
Stay home	1.7
Children taking turns	8.3
Smaller home	1.7
Talk over with family	3.3
Move near kids	1.7
<hr/>	
Total	100.0%
N	(60)

When asked what they would do if something serious happened to their parent's health next week, responses are varied as shown in Table 166. About 20 percent each respond that the other parent would assume responsibility, that they will discuss the situation with the other parent, or that they will do whatever is necessary (Table 168).

Table 168. Children's Plans for Parents Having Serious Health Problem

Other parent assume care	21.2%
Discuss with other children	21.4
Do whatever is necessary	20.5
Help with decisions, etc.	10.0
Consult professional	5.9
Health care facility	2.9
Care for parent	2.3
Other child	1.4
Assist other parent	0.7
Move parent closer	3.4
In home services	3.4
Retirement home	0.5
Family all help	2.7
Worry about it then	0.7
Care for parent	1.4
Other family member	0.5
Financial assistance	0.2
Nothing	0.7
Too ill myself	0.2
Total	100.0%
N	(442)

The remaining responses include much involvement on the part of the child in helping the parent with whatever happened. Only about 3 percent believe the parent should move into a nursing home or a retirement home, and less than 1 percent say they would do nothing. The children are very concerned about what will happen to their parents.

Summary

Although the recommendation is frequently made to people who are becoming older that they need to plan ahead for the future, including making decisions about future housing, it is not being done to any great extent. There are obviously some good reasons why older people move: declining health, death of a spouse, feeling unsafe and vulnerable as aging occurs. Yet few of the respondents have made plans for the future. The children are also concerned about their parents' future but have not done a great deal to assist in planning ahead either. Their concern is evident in their responses, however.

CHAPTER VIII. HOUSING NEEDS AND PREFERENCES OF ELDERLY IOWANS:
SUMMARY, POLICY APPROACHES, AND CONCLUSIONS

The findings of the research are derived from two sources: (1) the sample of older adults in Iowa and (2) their adult children. The older adult respondents are grouped into four categories: (1) rural, under age 75, (2) rural, aged 75 or over, (3) urban, under age 75, and (4) urban, aged 75 or over. The adult children of those respondents are included regardless of age or residential locations.

Summary

Iowa has an increasing proportion of people who are aged 60 and over. The group that is 80 and over is increasing most rapidly of any age group. The population of older people in Iowa is about evenly split between rural and urban areas. The sample for the study was randomly selected and stratified on the basis of age and rural or urban residence. There are more females than males in the older population in Iowa and the sample of older respondents reflects that.

The older the respondents are, the more likely they are to live alone. More than one-third of the sample lives alone and more than half live in a two-person household. The most frequent additional members of the respondent's household are either a spouse or a child. The rural 75 or over group includes no households greater than a two-person household. The rural groups have fewer persons in the household to provide care for them should the need arise.

The majority of the sample is married and about one-third are widowed. The younger respondents are more likely to be married than are the older respondents. The older respondents are more likely to be widowed than are the younger ones. There are very few of the respondents who are divorced although a number have never married.

The highest grade achieved in school averages about 12 years for the younger groups and about ten years for the older groups. Almost one-third of the sample has either some college or has received at least one college degree. Most of the sample is retired although about 20 percent are employed either full-time or part-time.

Approximately 30 percent of the elderly sample has an annual income of less than \$10,000. Another 40 percent has incomes between \$10,000 and \$25,000. The average income for the total sample is \$24,285. The median income is \$16,574. Less than 10 percent of the sample report that their incomes are not adequate to meet all of their needs. The most common source of income is Social Security.

The sample of the elderly respondents is a healthy group in their own eyes. About two-third's claim that neither chronic bad health nor handicaps have much effect on the level of their activities. A very

small percentage state that chronic bad health or handicaps limit their activities all of the time. Most of the elderly respondents are able to get around both inside and outside the home without much problem or even using an aid such as a cane or a walker; they also need little or no assistance in performing activities of daily living such as housework, dressing, getting out of a chair or bed. They do need some assistance with shopping, however.

The most frequently reported services that are used by the respondents are those provided by a doctor, a pharmacist, a dentist, and less frequently, the hospital. Services such as those to help dependent elderly remain in their homes are used sparingly. Most respondents reported that they did not need a service when asked why they do not use one. Further, the number of elderly individuals who utilize some device, such as a call button, to notify others of their need for assistance, is very low. About one-third of the elderly sample, however, report receiving calls every day from someone who is checking to see if they are all right. There are more children than parents who report that the parent receives such a call.

The majority of the elderly respondents are home owners. More than 60 percent of each group by age and location lives in the single-family dwellings. As age progresses, a percentage of the elderly begin to change from the expansive type of housing pattern to a more contracting pattern, i.e., the older age groups may be more likely to be living in apartments and to prefer somewhat less space in the dwelling unit. Only a minority of the sample lives in housing designed for elderly persons or in segregated neighborhoods. Most of the elderly are living in a unit that is the tenure type, structure, and size that they prefer. One floor is preferable to two or three floors, and most of the elderly respondents prefer some private outdoor space. They also live in the neighborhood and community type that they prefer. Nevertheless, about a quarter of the sample would prefer housing specifically designed for the elderly, and about 30 percent would be willing to move to a smaller dwelling.

Most of the sample of elderly respondents have living children. The younger age group has more children than the older age group. The younger age group also has some living parents, generally a mother.

More children of the elderly female respondents returned their questionnaires than did those of the elderly male respondents. Because there are more women in the sample, that is logical. Generally the adult child who responded is either the first, second, or third child in the family. Half of these children live over 60 miles from their parent.

The households of the adult children averages about 3.7 persons. Some of these households include persons over the age of 60 but more of them include persons under the age of 18. The average age of the adult

child who responded is about 40. The children report that they are in good health. The average grade level achieved in school averages about 16 years for the adult children. Most are employed full-time, and they believe that their income is adequate.

The older respondents, both younger and older age groups, appear to have very strong relationships with their children. Both the children and their parents are in agreement on the strength of these bonds. From both generations, the picture of a caring, trusting, reciprocal relationship develops. A great deal of interaction between the generations is reported. Currently the children have little need to help most of the parents with certain tasks, the parents are healthy and are doing those things for themselves. Should the occasion arise though, both parents and their children believe that the children will be there to assist. Congruency exists between the expectations parents have about their children's obligations to them and the ones the children hold. Neither group believes strongly that the children owe their parents for the sacrifices the parents have made while raising the children nor does either group strongly support the idea that parents should be able to move in with the children when the need arises regardless of the situation in the child's life and home. Yet both parents and adult children expect a child to take care of the parent when the parent is sick and to give the parent any necessary financial aid. Given the strength of the relationship this is a highly probable outcome. The difficulty with this, however, is that many of the children especially among the rural elderly, do not live in the same community as their parents. Because they are not in the same community, they are not available to give the kind of assistance that may become necessary as a parent becomes more frail.

When the parent is 75 or over, the children are even more interested in the parent's welfare. Many differences in results of the study are based on the age of the parent. Children and parents visit more when the parent is 75 or over. They talk more frequently on the telephone, once a week or more; they are more inclined to believe that the relationship between parent and child is all they ever hoped for. Children help the parent who is 75 or over and are more likely to take them shopping and perform heavy tasks for them. The oldest parents are more likely to perceive that their view of life is similar to that of their children. The children have more involvement in the decisionmaking and tend to give more advice to the parent who is 75 or over than to the parent who is younger. They are also more committed to looking for information on housing options for the older parents than the younger parents because of their concern about where their parent will live in the future. The person who is 75 or over has more chronic disease--arthritis, heart disease, deafness, lung and respiratory disease than do the younger age groups. Neither the level of physical activity nor health--physical or psychological--is as satisfying to the 75 or over group as to the younger group. Even though they do have some kind of health insurance and almost all of their children report that

someone calls the parent every day to check on them, the higher incidence of chronic disease and the cumulative and limiting effect of aging are becoming problems for them.

For those, 60 to 74, more of them are likely to be married. They are the group with living parents; they also have more living children than the 75 or over group. Their children report less involvement in decisionmaking than do children of parents 75 or over but the children are concerned about their parents having to move sometime in the future. It is the younger age persons themselves who are doing more looking for information on housing options, who would attend classes, and who would use a professional housing consultant to help them make decisions about housing. This is the group that demonstrates some interest in making changes of one type or another in their housing situation.

Overall, the elderly in the study want to remain independent and not become a burden to their children. Most of the elderly respondents have purchased health insurance and have Medicare coverage. They have made some provision for the contingency of declining health. In other ways, they have not had as much foresight. For example, they know there are some reasons why older people move but apparently do not believe that these reasons apply to them. They believe older people worry about their health declining, the cost of health care, who will take care of them when they are older, being alone as they age, loss of a driver's license, and about a loss of independence, but very few have made any plans for their own future.

Further, the elderly, as a group, and the adult children agree that there are strong reasons why older people move from their homes as they age. The children, in fact, are more convinced that some of the reasons are good reasons to move than are the older people. Both agree, however, that declining health, feeling unsafe in the home or the neighborhood are all better reasons to move than death of a spouse, retirement, or children moving out of the community.

Even with all of these concerns, few of the elderly respondents have made any plans as to what they would do if they would have to move in the future. The small number who have made plans indicate that they would move into some type of housing that is smaller or some kind of retirement housing. A very small percentage would move in with one of the children. The responses reflect a desire for the older person to remain independent as long as possible.

Similarly only a small number of older respondents have made any plans for when they can no longer care for themselves. The most common plan that has been made is to move into a nursing home. Other plans include moving to a retirement community with health care facilities, hiring help, having involvement from the children in some way, and committing suicide.

About one-sixth of the older respondents indicate that they have been seeking information on different kinds of housing that might be available for them to move into when they need to make a move. The younger age groups have been doing most of the searching. The preferences of the older sample are a smaller dwelling, a retirement home or community, a nursing home, shared housing, a boarding home or residential hotel, or an accessory apartment. About 6 percent indicate that they would prefer to move in with a family member or a relative. The older age groups have done the most thinking about moving into a nursing home, particularly the rural older group.

The younger groups demonstrate the highest interest in attending classes on housing for the elderly. The rural under 75 age group expresses the most interest of any of the groups. Attending a class on choosing the appropriate housing to meet the needs of older people is the most appealing to the sample, about 40 percent demonstrate an interest in this type of class.

When making a decision about housing alternatives, those persons who are married would ask for advice from their spouse first. Children are also considered to be a primary source of advice for the parents. Friends and relatives will also be asked for advice especially by the younger age groups. Most of the respondents would also visit several facilities or have someone in the family visit for them before making such a decision.

Children are concerned about their parents' housing needs. They believe that the parents would consider moving into certain types of housing for the elderly. They also believe that they would be consulted in the decisionmaking process. They concur that few plans have been discussed for a time when the parent may no longer be able to care for himself or herself. Those who have discussed such a plan have considered a housing alternative with the parent. In an emergency situation, the children or the remaining parent would do whatever is necessary.

The study provides convincing evidence of the strength of the family support system of older people in Iowa. It focuses on the housing needs and preferences of elderly Iowans and demonstrates concerns about the future living arrangements of the elderly that some of the older individuals and their families hold.

Policy Approaches

A Dynamic Focus

One of the dominant forces underlying this research is the focus on housing as a dynamic process rather than a static stock of dwellings (or even a dynamic stock of dwellings that changes over time). The distinction between the process of housing and the stock of housing is

one that is often not made clearly which can lead to confusion in discussions of housing policy. This report has to do with the process of getting the elderly housed and, not so incidentally, meeting their other needs as well. It is also concerned with the place of the family in the housing decisions of the elderly because of the role of children in the support systems of the elderly and because children are involved in their parent's decision making particularly in times of crises and in cases of declining health of the parents.

The dynamic focus calls attention to the fact that, at any moment in time, only a very small proportion of the elderly population is at a stage where a transition in housing is appropriate or needed. That means, among many other things, that a relatively small number of alternative housing arrangements need be available at a given moment. The implication is that at given moments and even during given extended periods of time, there is only a limited demand for alternative housing.

The elderly are a very immobile population. A great deal of research has shown that not only do very small portions of the elderly move in a given year, very few of them want to move. Being realistic, then, policies based on residential mobility of elderly persons can have only a small incremental effect. Further, it means that even though, on reflection by outsiders, it would appear that moving is a good solution to some problem, it is unlikely to be viewed so by many of the elderly individuals. That, in turn, means that moving may be an unpleasant, disruptive event in the lives of some elderly persons.

The Compactness Hypothesis

The compactness hypothesis or research question was the main guide to the analysis of housing in this study. The basic idea is that there is a need to know to what extent Iowa's elderly population is engaged in or willing to be engaged in a process in which the expansiveness of their single-family, owner-occupied, large-lot, family-oriented housing would be exchanged for more compact elderly-oriented housing. The choice of an approach to future policy making could be facilitated by clear cut results of the research relative to this hypothesis. The fact that the results are somewhat mixed, sometimes saying yes and sometimes saying no, does not provide obvious guidelines for policy without further interpretation. Some of the further interpretation is given in the following section.

The Four Approaches

Four broad policy approaches have been developed: (1) the existing demand approach, (2) the alternative demand approach, (3) the demand-development approach, and (4) the supply-development approach. The four approaches are based on analysis and interpretation of the data, review of the literature on housing for the elderly, and the experience and background of the researchers.

The first two approaches allow the policy maker to concentrate on the meeting of housing and related needs through attention to needs of existing households in existing housing. With these two approaches it is not necessary to be concerned about the production of housing or about changes in housing preferences. The main techniques used under these approaches are programs to support renovation and retrofitting of dwellings so they meet the needs of the elderly and the provision of services such as Meals-on-Wheels and visiting nurses that can forestall or postpone the need to move to a different dwelling. The fact that such a move may still be necessary, however, is recognized.

The third and fourth approaches involve paying attention to potential changes in housing preferences and demand as well as innovations in housing production. The main techniques to be used include education about the availability of housing alternatives and the potential availability of new housing alternatives as well as the encouragement of creative engineering, architecture, planning, construction, and marketing of innovative housing, to better meet the needs of the elderly population.

Each of the approaches is supported by one or more parts of the research but none of them is shown to be clearly preferable, based solely on the research results themselves. Other considerations such as economic and political constraints may cause one approach to be favored over the others. An important follow-up to this research would be an attempt to construct cost/benefit evaluations of the four approaches.

The four approaches, in some ways overlap, and in other ways conflict. They might be used in various combinations or any of them might be used alone to develop or alter policy. The development of a balanced policy based on a review of the four approaches described here is recommended.

The existing demand approach. The first approach is based on the notion that housing succeeds best that responds to the existing demand among the potential population to be served. One assumption is that the kind of housing currently being provided has reached some kind of equilibrium with the demand and that both consumers and producers are generally relatively well informed about the housing alternatives that are needed and are available. It assumes that relative nonuse of some alternatives in the market for housing for the elderly results from lack of need or demand for such housing. It also assumes that the absence of some forms of housing from the market occurs because of the absence of demand for them.

It assumes that essentially all appropriate housing alternatives are in existence and that the inequities, shortages, and misallocations of housing for the elderly that exist are mainly the results of errors in the market that result from discrimination, poverty, and related factors. Such market errors should be dealt with directly rather than

through inventions and innovations in housing alternatives.

Because of the strong attachment and commitment of the elderly to their current housing it may well be that renovation programs, to make the current dwelling more congruent with the needs of the current occupant to avoid or forestall the cost and disruption of a move, should be considered. This kind of policy (which substitutes renovations for moving) may well be accompanied by one that will be suggested in the next approach (the substitution of human services for moving).

The alternative demand approach. The approach is based on the idea that, often, needs that can be stated as housing needs may equally appropriately be stated in terms of the need for human services. For example, a dwelling that once was quite suitable for the aging resident becomes difficult to cook in once the elderly person becomes disabled. One thing to consider is to move to a different dwelling that was designed for a disabled elderly individual. The alternative would be to utilize a service like Meals-on-Wheels or Homemaker Health Aides.

One of the assumptions of the approach is that social facilitation often is cheaper or more convenient than physical facilities. The basic idea would be to consider and evaluate alternatives to the design and construction of dwellings for the relatively short time (at least short relative to the life of a dwelling unit which may last from 40 to 100 years) during which an aging individual makes the transition from living independently to needing extensive health care.

To the extent to which human services can substitute appropriately for invention, construction and marketing of housing alternatives, they can potentially save societal resources including financial resources and postpone the disruptive movement to different housing of many elderly individuals. If, eventually, the elderly individual will have to move to a health care kind of facility, inserting an additional move from ordinary independent housing typical of later adult years into housing designed for the elderly may simply insert another disruptive move into the life of a person already concerned about the future. Unless, of course, the aging individual chooses to move into housing that incorporates several levels from independent living to a completely sheltered environment.

The demand-development approach. This approach, which might also be termed the demand facilitation approach is based on the assumption that the elderly are not well informed about the housing alternatives that exist or potentially exist and that through education they can be made aware of the alternatives and how they might fit into the individual's life. In addition, it is assumed that, because few elderly individuals make plans for future eventualities, that educational programs can help the elderly to develop a positive attitude toward planning for the future and to develop planning skills that facilitate the coming transitions.

One of the assumptions is that innovations in housing for the elderly which are as yet unfamiliar to the bulk of the elderly should be brought to the attention of elderly individuals and their families so they can know the advantages (and disadvantages) of such innovations. This assumption is based on the further assumption that not all useful innovations in housing alternatives are in existence and that if new ones come along education can serve to inform the public about them and thus help the elderly and their families to make more knowledgeable and timely decisions regarding future choices.

Knowing that the stated preferences of the majority of the sample is for single-family dwellings and for staying in the current dwelling, it seems reasonable to speculate as to the reasons for the low level of interest in the various alternatives. One might assume that smaller dwellings and retirement homes or communities are more familiar to the respondents (as are nursing homes) but that the other options are not as familiar. A reasonable conclusion would be that education about housing choices may affect the interest level in certain options and influence the decisionmaking process.

Support services and remodeling can help a great deal in keeping older individuals independent as long as possible, but a point will come for many when that will not suffice. It is at this time that education is needed about housing options that bridge the gap between the time when a person is able to live independently and the time when impairment levels of the individual may require so much support and monitoring that the individual cannot manage in an independent living situation. Alternatives to nursing homes are available that provide the frail elderly a more sheltered environment including intermediate and skilled care.

The supply-development approach. The supply-development approach is based on the assumption that there are potential new housing alternatives for housing the elderly that can or should be invented, designed, built and/or marketed that would better meet the needs of at least a portion of the elderly population of Iowa. This approach would involve encouraging designers, engineers, planners, gerontologists and others in developing such alternatives and then assisting in the marketing of those alternatives. This approach, obviously, is a complement to the demand-development approach.

In the absence of an informed demand sector, innovations in housing have little chance of market success. Therefore, education and advertising are needed to inform the potential consumers of the desirability and availability of the innovation and of the desirability of planning ahead.

Conclusion

Because the study was designed that way the results are derived from a sample of elderly residents of rural and urban Iowa who are living independently, generally in rather good health, are rather satisfied with the current life situation including their housing, and their relations with people. Because most of the respondents have spent a long life more or less successfully striving to get where they now are, many are not just satisfied with that life but are attached to it, committed to it, and willing to continue to struggle to maintain it.

The findings summarized in the first section of this chapter and the policy approaches presented need to be understood in light of the context outlined in the preceding paragraph. The recommendations are made with that context in mind and cannot successfully be adopted without being placed back in that context. For example, these recommendations and the research results they are based on apply to current conditions and transitions from the current conditions of this sample of elderly Iowans. They do not apply, for example, to the frail elderly who have already passed a number of transitions not yet faced by any but a few in the present sample.

This study of the housing needs and preferences of Iowa's elderly population provides some guidelines for the development of policy. The analysis and interpretation have suggested that there are four potential approaches that can be applied in various combinations depending upon constraints upon state actions. The four approaches involve (1) attempting to meet the needs of Iowa's elderly in their current housing as long as possible through renovation and retrofitting, (2) attempting to meet other needs in current housing that can be met through the provision of human services such as visiting nurses, (3) educational programs to inform the elderly about the availability of housing alternatives and about planning for the future, and (4) programs to encourage the development of innovations in housing alternatives to better meet the needs of the elderly. Each of the four approaches needs to be considered in conjunction with the family support that most of the elderly in the sample have. The housing decisions of the elderly are not made in isolation from their adult children.

Sound decisions about the appropriateness of each of the four approaches and how to mix them in an overall policy will require further analyses. Such further analyses could include cost-benefit analysis and analysis in terms of the social and political feasibility of the various approaches.

REFERENCES

Economic, Social, Psychological & Health Consequences of the Housing Decisions of Rural Families. Base Report. NC 178 Committee (Forthcoming 1987).

Gosselink, C., & Goudy, W. (1986) Iowa's elderly: 1980 and a century of perspective. Cooperative Extension Service, Iowa State University, Ames, IA.

A STUDY OF

THE HOUSING NEEDS OF ELDERLY IOWANS

Before we begin we'd like to thank you for agreeing to help Iowa State University with this research study.

I want you to know that any information you give us will be kept strictly confidential. If at any time a question comes up, let us know and I will attempt to clarify it. If a question seems too personal, you may refuse to answer it, but your cooperation in giving us all the information we ask for is critical to the project.

We'd like to begin by asking you about your current housing and any preferences you may have for housing.

APPENDIX A

INTERVIEW SCHEDULE
FOR
ELDERLY RESPONDENTS

The findings described in the main body of this chapter and the policy recommendations presented in the preceding chapter of the report will be the primary focus of the interview. The respondents will also be asked to comment on the content of the report and to provide any additional information that may be needed to clarify the findings and recommendations. The interview will be conducted in a format that is appropriate for the respondent's needs and preferences. The interview will be conducted in a format that is appropriate for the respondent's needs and preferences.

This study of the housing needs of the elderly population provides a basis for the development of policy. The analysis and interpretation of the data will be done in a practical approach that can be applied to the development of housing programs. The study will be conducted in a format that is appropriate for the respondent's needs and preferences. The interview will be conducted in a format that is appropriate for the respondent's needs and preferences.

Some preliminary work on the development of such a program will require further analysis. This further analysis will include a detailed analysis of the data and a review of the literature on the subject. The findings of this study will be used to inform the development of the program.

ID Number _____ - _____

Date ____ / ____ / ____

Interviewer ID ____

1 = AM

Start time ____ : ____

2 = PM

A STUDY OF
THE HOUSING NEEDS OF OLDER IOWANS

Before we begin we'd like to thank you for agreeing to help Iowa State University with this research study.

I want you to know that any information you give me will be kept strictly confidential. If at any time a question seems unclear, let me know and I will attempt to clarify it. If a question seems too personal, you may refuse to answer it, but your cooperation in giving us all the information we ask for is critical to the project.

I'd like to begin by asking you about your current housing and any preferences you may have for housing.

001. Do you presently own or rent your dwelling or do you live here rent free? _ ()

- 1 own
- 2 rent (GO TO Q003)
- 3 rent free (GO TO Q004)

002. Is it regular ownership or condominium ownership? _ ()

- 0 regular (GO TO Q004)
- 1 condominium (GO TO Q004)

003. Do you live in government-subsidized rental housing? _ ()

- 0 no
- 1 yes

004. Would you prefer some other kind of ownership or rental arrangement? _ ()

- 0 no (GO TO Q006)
- 1 yes

005. What ownership or rental arrangement would you prefer to have? _ ()

- 1 regular ownership
- 2 condominium ownership
- 3 rental
- 4 government subsidized rental housing

006. Would you look at CARD #1, and tell me what type of residence you live in now. _ ()

- 1 single family detached
 - 2 rowhouse, townhouse, duplex
 - 3 building with 2-3 living units
 - 4 building with 4-8 living units
 - 5 building with more than 8 living units
 - 6 residential hotel
 - 7 mobile home
 - 8 other, please explain _____
- (GO TO Q008)

[Q007 IS FOR MOBILE HOMES ONLY]

007. Do you own or rent this lot? _____ ()

- _____ 1 own
- _____ 2 rent
- _____ 3 use this lot free

008. Would you prefer to live in a different type of residence? _____ ()

- _____ 0 no (GO TO Q010)
- _____ 1 yes

009. Using CARD #1, please tell me what type of residence you prefer to live in? _____ ()

- _____ 1 single family detached
- _____ 2 rowhouse, townhouse, duplex
- _____ 3 building with 2-3 living units
- _____ 4 building with 4-8 living units
- _____ 5 building with more than 8 living units
- _____ 6 residential hotel
- _____ 7 mobile home
- _____ 8 other, please explain _____

010. How many rooms do you have in your present dwelling unit. Do not include bathrooms, pantries, utility rooms, or an unfinished basement? _____ (-)

_____ number

011. Would you prefer to have a different number of rooms? _____ ()

- _____ 0 no (GO TO Q013)
- _____ 1 yes

012. How many rooms would you prefer to have? _____ (-)

_____ number

013. How many bedrooms do you have? _____ (-)

_____ number

014. Would you prefer to have a different number of bedrooms? _____ ()

- _____ 0 no (GO TO Q016)
- _____ 1 yes

015. How many bedrooms would you prefer to have? _____ (-)

_____ number

016. How many bathrooms do you have? _____ (-)

_____ number

017. Would you prefer to have a different number of bathrooms? _____ ()

_____ 0 no (GO TO Q019)

_____ 1 yes

018. How many bathrooms would you prefer to have? _____ (-)

_____ number

019. Do you have ... (CHECK ONE) _____ ()

_____ 1 a living room and no dining room?

_____ 2 a separate living room and a separate dining room?

_____ 3 a living room-dining room combination?

_____ 4 a living room-bedroom combination?

_____ 5 or all these things combined together (studio)?

020. Would you prefer a different type of living room arrangement? _____ ()

_____ 0 no (GO TO Q022)

_____ 1 yes

021. Would you prefer to have ... (CHECK ONE) _____ ()

_____ 1 a living room and no dining room?

_____ 2 a separate living room and a separate dining room?

_____ 3 a living room-dining room combination?

_____ 4 a living room-bedroom combination?

_____ 5 or all these things combined together (studio)?

022. What type of kitchen arrangement do you have? Is it ... (CHECK ONE) _____ ()

_____ 1 a kitchen with no eating area?

_____ 2 a kitchen with a small eating area?

_____ 3 a kitchen with large eating area?

_____ 4 or some other type of arrangement (Specify)

023. Would you prefer a different type of kitchen arrangement? _ ()

- 0 no (GO TO Q025)
- 1 yes

024. Would you prefer to have ... (CHECK ONE) _ ()

- 1 a kitchen with no eating area?
- 2 a kitchen with a small eating area?
- 3 a kitchen with large eating area?
- 4 or something else? (Specify) _____

025. Do you have a family or recreation room? _ ()

- 0 no
- 1 yes (GO TO Q027)

026. Would you prefer to have a family or recreation room? _ ()

- 0 no
- 1 yes

027. Do you have a washing machine? _ ()

- 0 no
- 1 yes (GO TO Q029)
- 2 apartment building has one

028. Would you prefer to have a washing machine in your home? _ ()

- 0 no
- 1 yes

029. Do you have a dryer in your home? _ ()

- 0 no
- 1 yes (GO TO Q031)
- 2 apartment building has one

030. Would you prefer to have a dryer in your home? _ ()

- 0 no
- 1 yes

031. How many floors, not counting the basement, are in your present dwelling unit?
 [WE ARE ASKING FOR FLOORS IN THE DWELLING UNIT, NOT IN THE BUILDING.] _ _ (-)
 _____ number
032. Would you prefer to have a different number of floors? _ ()
 _____ 0 no (GO TO Q034)
 _____ 1 yes
033. How many floors would you prefer to have? _ _ (-)
 _____ number
034. Was this dwelling designed to allow for entrance and exit of a wheelchair? _ ()
 _____ 0 no
 _____ 1 yes (GO TO Q036)
035. Would you prefer that your dwelling unit be designed to allow for entrance and exit of a wheelchair? _ ()
 _____ 0 no
 _____ 1 yes
036. Was this dwelling designed to allow for use of a wheelchair in the kitchen? _ ()
 _____ 0 no
 _____ 1 yes (GO TO Q038)
037. Would you prefer that your dwelling unit be designed to allow for use of a wheelchair in the kitchen? _ ()
 _____ 0 no
 _____ 1 yes
038. Was this dwelling designed to allow for use of a wheelchair in the bathroom? _ ()
 _____ 0 no
 _____ 1 yes (GO TO Q040)

039. Would you prefer that your dwelling be designed to allow for use of a wheelchair in the bathroom? _ ()

0 no
 1 yes

040. Now I am going to read a list of 4 characteristics of housing. If you were looking for a new place to live, how would you rank each of these in importance to you? [READ LIST.] Which would be most important to you? [RECORD 1, ETC. TILL ALL 4 ARE RANKED]

a bedroom separate from the living area _ ()
 a lot of closet space _ ()
 a large bathroom _ ()
 a large kitchen _ ()

041. What kind of outdoor space do you have ... ? _ ()

0 no yard
 1 share a common yard or open space
 2 a small private yard
 3 a large private yard

042. Would you prefer a different outdoor space arrangement? _ ()

0 no (GO TO Q044)
 1 yes

043. What type of outdoor space arrangement would you prefer to have ... ? _ ()

0 no yard
 1 share a common yard or open space
 2 a small private yard
 3 a large private yard

044. Do you presently live in housing that is especially designed and planned for older people? _ ()

0 no
 1 yes (GO TO Q046)

045. Would you prefer to live in housing that is especially designed and planned for older people? _ ()

0 no
 1 yes

046. Do you presently live in a mixed-age neighborhood or is it a neighborhood where everyone is older? _ ()

- 2 mixed-age
- 1 all older (GO TO Q048)

047. Would you prefer to live in a neighborhood where everyone is older? _ ()

- 0 no (GO TO Q049)
- 1 yes (GO TO Q049)

048. Would you prefer to live in a mixed-age neighborhood? _ ()

- 0 no
- 1 yes

049. Do you live in a ... ? _ ()

- 1 rural area
- 2 a small town (under 2,500)
- 3 a large town (2,500-9,999)
- 4 a small city (10,000-49,999)
- 5 a suburb of a city
- 6 or a large city (50,000 and over)

050. Would you prefer to live in a different type of community? _ ()

- 0 no (GO TO Q052)
- 1 yes

051. What size of community would you prefer to live in? Would it be a ... ? _ ()

- 1 rural area
- 2 a small town (under 2,500)
- 3 a large town (2,500-9,999)
- 4 a small city (10,000-49,999)
- 5 a suburb of a city
- 6 or a large city (50,000 and over)

052. Do you have a definite plan for a time when you would have to move from this dwelling? _ ()

- 0 no (GO TO Q054)
- 1 yes

053. What do you plan to do?

054. Do you have a definite plan for a time when you would not be able to take care of yourself for a long period of time? ()

- 0 no (GO TO Q056)
 1 yes

055. What do you plan to do?

056. Have you been looking for information on the different kinds of housing that you might move to as you get older? ()

- 0 no
 1 yes

057. Now I am going to read a list of different kinds of housing available. Have you ever thought about moving to ...

- | | | | |
|--|---|---|-------|
| (a) a smaller dwelling? | 0 | 1 | _ () |
| (b) live with a family member or relative? | 0 | 1 | _ () |
| (c) shared housing, which is when 3 or more adults share one dwelling? | 0 | 1 | _ () |
| (d) an accessory apartment, which is an apartment in a relative's house? | 0 | 1 | _ () |
| (e) an elder cottage, which is small factory-made unit to be placed on the same lot with a relative's house? | 0 | 1 | _ () |
| (f) a boarding home or residential hotel? | 0 | 1 | _ () |
| (g) a retirement home or a retirement community? | 0 | 1 | _ () |
| (h) a nursing home? | 0 | 1 | _ () |

058. If classes were offered on housing for the elderly at little or no cost, would you attend a class on ...

- | | | | |
|---|---|---|-------|
| (a) renovating your present housing to better meet your needs as you get older? | 0 | 1 | _ () |
| (b) obtaining in-home services such as meals on wheels, homemaker health aides? | 0 | 1 | _ () |
| (c) choosing a retirement community? | 0 | 1 | _ () |
| (d) choosing a nursing home? | 0 | 1 | _ () |
| (e) choosing appropriate housing to better meet your needs as you get older? | 0 | 1 | _ () |

"Now let's talk about who might help you in making a decision if you were to move."

059. If you decided to move, would you ask for advice from ...

	NO	YES	
(a) your spouse? (ASK ONLY IF MARRIED)	0	1	_ ()
(b) your children?	0	1	_ ()
(c) your other relatives?	0	1	_ ()
(d) your friends?	0	1	_ ()

060. If you decided to move, would you or your family visit several facilities, communities, or model homes to help you make a choice? _ ()

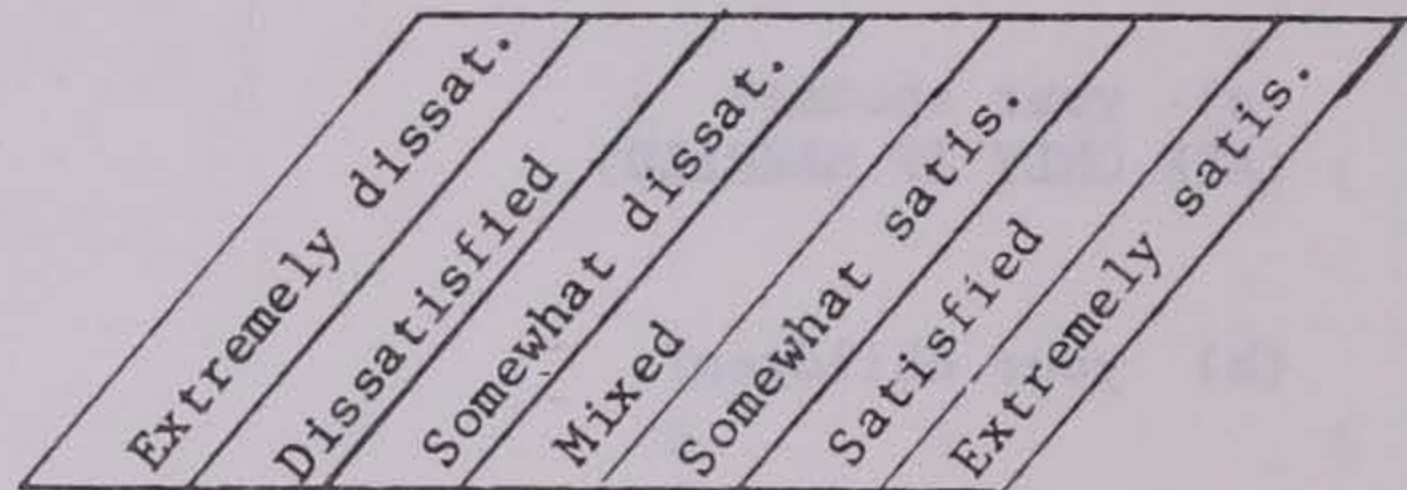
_____ 0 no
_____ 1 yes

061. Would you be interested in having a professional housing consultant explain different types of housing to you, locate the type of housing you want, visit different places in which you might be interested, or help you select a place to live? _ ()

_____ 0 no
_____ 1 yes

"Now I would like to ask some questions about how satisfied you are with some aspects of your life.

Using CARD #2, please tell me how satisfied or dissatisfied you are with ... "



- | | | | | | | | | | |
|------|--|---|---|---|---|---|---|---|-------|
| 062. | the overall quality of your life? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 063. | your overall housing situation? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 064. | your neighborhood? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 065. | your level of physical activity? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 066. | the number of people you see or talk to? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 067. | your physical health? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |
| 068. | your psychological health? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | _ () |

In the next 3 questions we would like to know about the amount of control you have over your life. Would you look at CARD #3 which lists 7 numbers, 1 means 'no control' and 7 means you have 'complete control'. Which number indicates how much control ...

	<div style="display: flex; justify-content: space-between; width: 100%;"> No control Complete control </div>							
069. you have over your life right now?	1	2	3	4	5	6	7	_ ()
070. you would you like to have over your life right now?	1	2	3	4	5	6	7	_ ()
071. you expect to have over your life two years from now?	1	2	3	4	5	6	7	_ ()

072. Next we'd like to know who is currently living with you. First, how many people are living in this household? _____
I'd like some information about (each of) you.

a. What is (person's) first name?

b. CODE SEX

c. What is the month and year of (name's) birth?

d. What is (name's) relationship to you?

e. Is (name) married; divorced; separated; widowed; or single, never married? [IF NEVER MARRIED GO TO QG.]

f. What is the month and year of (name's) most recent marriage?

g. What is the highest grade of regular school, college or vocational training that (name) completed?

h. Is (name) employed full time; part time; unemployed looking for work; unemployed not looking for work, a homemaker, retired, or disabled?

188

a Members	b Sex		c Birthdate		d Relationship to Respondent	e Marital Status					f Marriage Date		g Last Grade	h Employment Status						
	M	F	MO	YR		Married	Divorced	Separated	Widowed	N. Married	MO	YR		Full-time	Part-time	UN-Looking	UN-Not Look	Homemaker	Retired	Disabled
	1	0				1	2	3	4	5				1	2	3	4	5	6	7
(Respondent)	1	0				1	2	3	4	5				1	2	3	4	5	6	7
(Spouse)	1	0				1	2	3	4	5				1	2	3	4	5	6	7
	1	0				1	2	3	4	5				1	2	3	4	5	6	7
	1	0				1	2	3	4	5				1	2	3	4	5	6	7

"Now I would like to know a little about your health and activities."

073. How would you rate your health? Is it ... _ ()

- 1 poor
- 2 fair
- 3 good or
- 4 excellent

"Would you look at CARD #4 which lists different types of aids a person might need to use to get around."

074. Which of these, if any, do you use to get around inside your home, but not up or down stairs? [CHECK ALL THAT APPLY] _ ()

- 0 none
- 1 ordinary cane
- 2 four-pronged cane
- 3 crutches
- 4 walker
- 5 wheelchair

075. Which of these, if any, do you use when you walk outside? [CHECK ALL THAT APPLY] _ ()

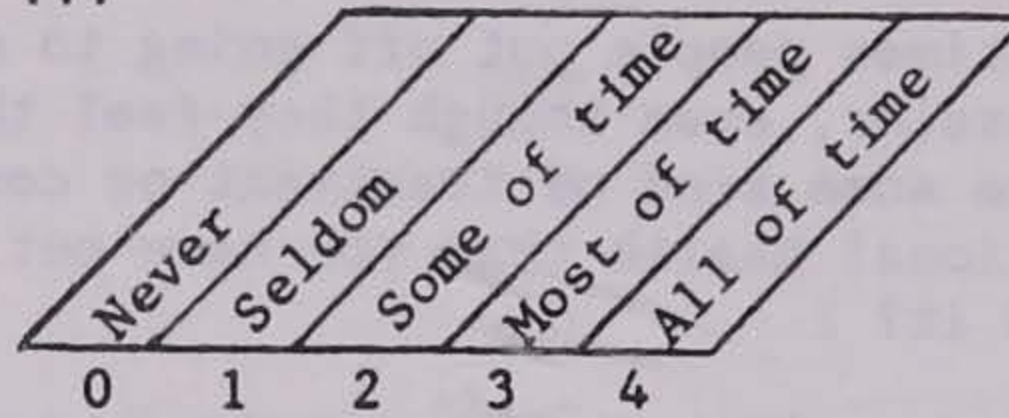
- 0 none
- 1 ordinary cane
- 2 four-pronged cane
- 3 crutches
- 4 walker
- 5 wheelchair

Now, we'd like to know if you need assistance with certain activities. Using Card #5, would you tell me ...

What kind of assistance, if any, do you need (activity) ?

Activity	No Assistance	Assistance - Person	Special device	Person & device	Can't do it at all
076. to prepare meals?	0	1	2	3	4
077. to eat?	0	1	2	3	4
078. with dressing and grooming?	0	1	2	3	4
079. with using the toilet?	0	1	2	3	4
080. with bathing?	0	1	2	3	4
081. to get out of a chair?	0	1	2	3	4
082. to walk up or down stairs?	0	1	2	3	4
083. to get out of bed?	0	1	2	3	4
084. to do housework?	0	1	2	3	4
085. to do shopping?	0	1	2	3	4

"Using CARD #6, please tell me how often ... "



086. does chronic bad health, sickness, or pain stop you from doing things you would like to be doing? 0 1 2 3 4 _ ()

087. do handicaps or disabilities limit your ability to participate in activities? 0 1 2 3 4 _ ()

088. do you feel you are useful and needed? 0 1 2 3 4 _ ()

089. do you feel sad or blue for no apparent reason? (IF ANSWER 0, GO TO Q091) 0 1 2 3 4 _ ()

090. do these feelings keep you from things you would like to be doing? 0 1 2 3 4 _ ()

"Now we would like to ask you several questions about the health care you have received in the past 12 months, or are now receiving."

091. Sometimes people put off going to see a doctor, a dentist or a counselor, even though they feel they should see someone. Is there some kind of treatment or counseling for your physical or emotional health that you have put off, even though you may still need it? _____ ()

_____ 0 no (GO TO Q093)
 _____ 1 yes

092. What is the reason you have not done something?

_____	PROBE FOR ALL REASONS

093. Do you have any of the following conditions: ...	NO	YES	_____ ()
a) heart disease, or circulatory problems?	0	1	_____ ()
b) a stroke?	0	1	_____ ()
c) lung or respiratory problems?	0	1	_____ ()
d) arthritis or similar conditions?	0	1	_____ ()
e) neuromuscular disorders such as paralysis and Parkinson's disease, multiple sclerosis, myasthenia gravis?	0	1	_____ ()
f) partial or total blindness?	0	1	_____ ()
g) partial or total deafness?	0	1	_____ ()
h) amputation of leg, foot, arm or hand?	0	1	_____ ()
i) any other major health conditions? Specify _____	0	1	_____ ()

094. Has your health caused you to ...
- | | NO | YES | |
|--|----|-----|-------|
| a) move to a different dwelling? | 0 | 1 | _ () |
| b) remodel, refinish or alter this dwelling? | 0 | 1 | _ () |
| c) move in with someone else? | 0 | 1 | _ () |
| d) have someone else move in with you? | 0 | 1 | _ () |
095. Do you have health insurance? _ ()

_____ 0 no (GO TO Q097)
 _____ 1 yes

096. What kind?
- | | NO | YES | |
|--|----|-----|-------|
| a) Medicare. | 0 | 1 | _ () |
| b) Private plans such as Blue Cross or Bankers Life. | 0 | 1 | _ () |
| c) Medicaid or Title XIX. | 0 | 1 | _ () |

"Now I will read a list of services provided in some areas of this state, and ask you some questions. Please respond using the last 12 months as a reporting time."

	a						b					c							d
	In the last 12 months how often have you used the services of ... ?						How do you usually get there? Do you ... ?					Using card 2, please tell me how satisfied you are with your ... ?							[IF SERVICE NOT USED ASK:] Why didn't you use the service of ... ?
	None (GO TO d)	Once	Several	1-3 per mo.	1-6 per week	Daily	Drive self	Ride w/ others	Walk	Public trans.	Other (spec.)	Ext. diss.	Dissatisfied	Somewhat dis.	Mixed	Somewhat sat.	Satisfied	Ext. satis.	
a physician	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	
a dentist	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	
a pharmacist	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	
a mental health counselor	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	
a public health nurse or visiting nurse	0	1	2	3	4	5						1	2	3	4	5	6	7	
a hospital	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	
a homemaker health aide	0	1	2	3	4	5						1	2	3	4	5	6	7	
meals on wheels or home delivered meals	0	1	2	3	4	5						1	2	3	4	5	6	7	
congregate meals or a nutrition site	0	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	6	7	

"Now I would like to ask you a few questions about your family."

098. Are either of your parents living? _ ()

- 0 no (GO TO Q100)
- 1 yes

099. Who? _ ()

- 1 mother
- 2 father
- 3 both

100. Do you have any living children?

[ADOPTED OR BIOLOGICAL CHILDREN OF RESPONDENT.
DO NOT VOLUNTEER STEP-CHILDREN, BUT ALLOW FOR STEP-CHILDREN IF
RESPONDENT FEELS THAT ALL THE STEP-CHILDREN ARE HIS OR HER OWN.] _ ()

- 0 no (GO TO Q125)
- 1 yes

101. Because of the importance of children in their parents' lives, the researchers of this project would like to contact your children to ask them about ways they may be helpful to you. At the end of the summer, we would like to mail questionnaires to your children and ask them to fill out and return them to us. Their participation is, of course, completely voluntary. In order to mail a questionnaire to them, I need their names and complete mailing addresses. Let's begin with your oldest child.

	A First and Last Name	B Complete Address	C Complete Phone No.	D Sex	
				M	F
1.				1	0
2.				1	0
3.				1	0
4.				1	0
5.				1	0
6.				1	0
7.				1	0
8.				1	0
9.				1	0
10.				1	0

"Now we would like to ask a little bit about your children. Using CARD #7, please tell me how often ... "

- | | Never | Less than 1/year | About 1/year | Several/year | At least 1/month | At least 1/week | Daily | |
|---|-------|------------------|--------------|--------------|------------------|-----------------|-------|-------|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | |
| 102. you visit your children in their home? | | | | | | | | _ () |
| 103. your children visit you in your home? | | | | | | | | _ () |

IF THE RESPONDENT HAS MORE THAN ONE CHILD, SELECT ONE OF THEM USING THE RANDOM TABLE AND THE LIST ON PAGE 21. WRITE HIS/HER NAME HERE

"I would now like to ask you questions about your relationship with _____ (name of child) _____. I am interested in the relationship you have with _____ (name of child) _____ even though he/she may not be the child who helps you out the most or who lives closest to you. Because the project involves a large number of people, we want to be able to get an idea of many kinds of family relationships.

Using CARD #7, please tell me how often you ... "

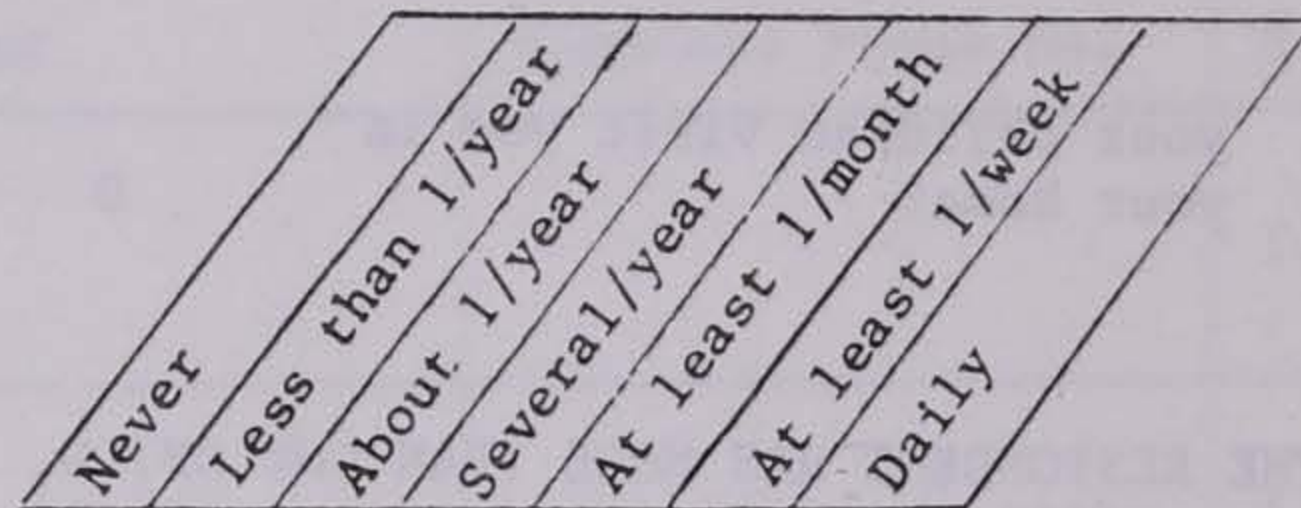
- | | Never | Less than 1/year | About 1/year | Several/year | At least 1/month | At least 1/week | Daily | |
|---|-------|------------------|--------------|--------------|------------------|-----------------|-------|-------|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | |
| 104. talk on the telephone with _____ (child) _____ ? | | | | | | | | _ () |
| 105. send letters and postcards to _____ (child) _____ ? | | | | | | | | _ () |
| 106. receive letters and postcards from _____ (child) _____ ? | | | | | | | | _ () |
| 107. see _____ (child) _____ face-to-face? | | | | | | | | _ () |

"Adult children often help their parents in various ways."

108. Does (child) help you out with any everyday tasks or errands? _ ()

 0 no (GO TO Q114)
 1 yes

"Using CARD #7 again please tell me how often (child) ... "



109. helps you with bathing or getting dressed?

0 1 2 3 4 5 6 _ ()

110. fixes your meals?

0 1 2 3 4 5 6 _ ()

111. does light tasks in your home such as cleaning or putting things away?

0 1 2 3 4 5 6 _ ()

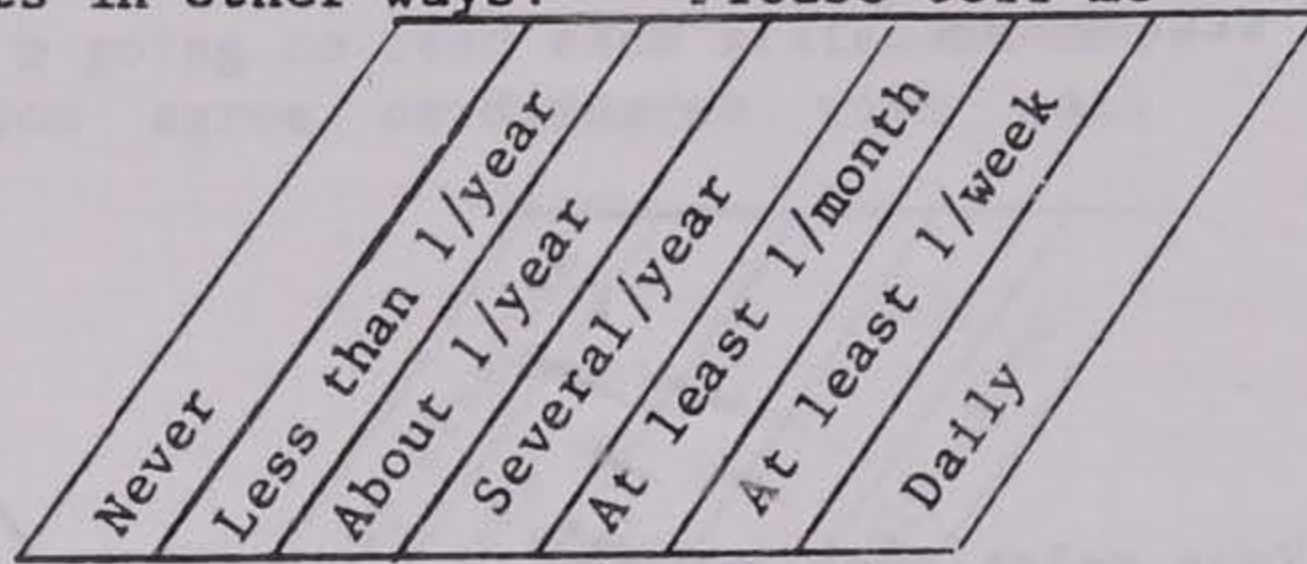
112. does heavy tasks around your home such as moving furniture, yardwork or shoveling snow?

0 1 2 3 4 5 6 _ ()

113. takes you to the grocery store, shopping or to the doctor?

0 1 2 3 4 5 6 _ ()

"Often children help out their parents in other ways. Please tell me how often (child) "

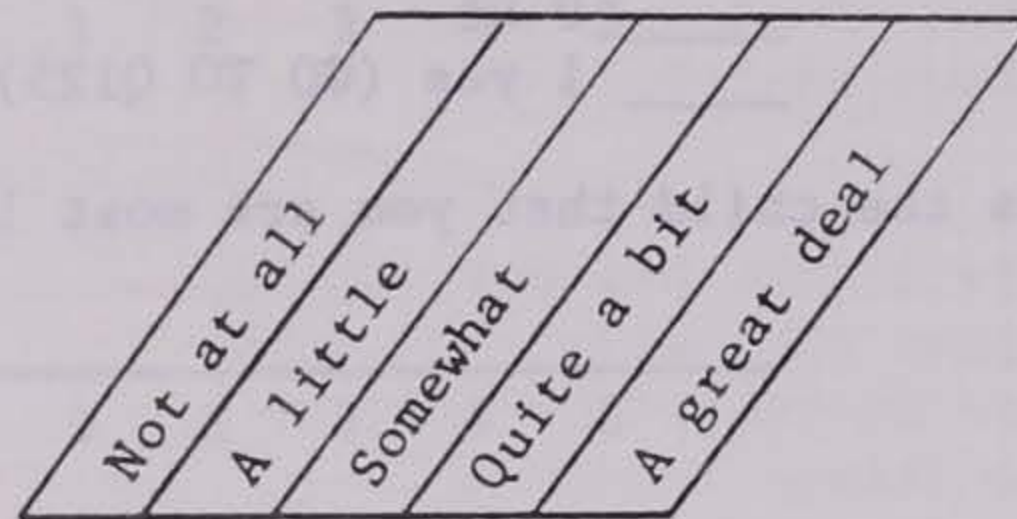


114. gives you advice? 0 1 2 3 4 5 6 _ ()

115. gives or lends you money when you need it? 0 1 2 3 4 5 6 _ ()

116. helps you out in an emergency such as an accident, sickness or death of someone close to you? 0 1 2 3 4 5 6 _ ()

"Using CARD #8, please tell me ... "



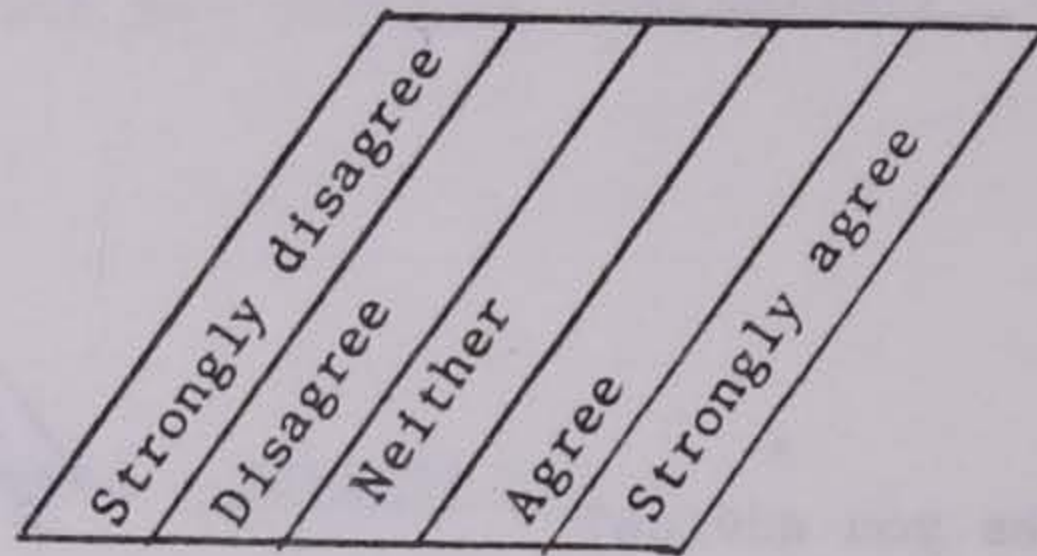
117. how much (child) trusts you? 0 1 2 3 4 _ ()

118. how much (child) cares about you? 0 1 2 3 4 _ ()

119. how much you trust (child) ? 0 1 2 3 4 _ ()

120. how much you care about (child) ? 0 1 2 3 4 _ ()

"Using CARD #9, please tell me if you agree or disagree with the next set of statements."



121. Your relationship with
 (child) is as you hoped
it would be?

1 2 3 4 5 _ ()

122. Your views about life are
similar to those of
 (child) ?

1 2 3 4 5 _ ()

123. Of all your children is
 (child) the one you most likely turn to first in an
emergency?

_ ()

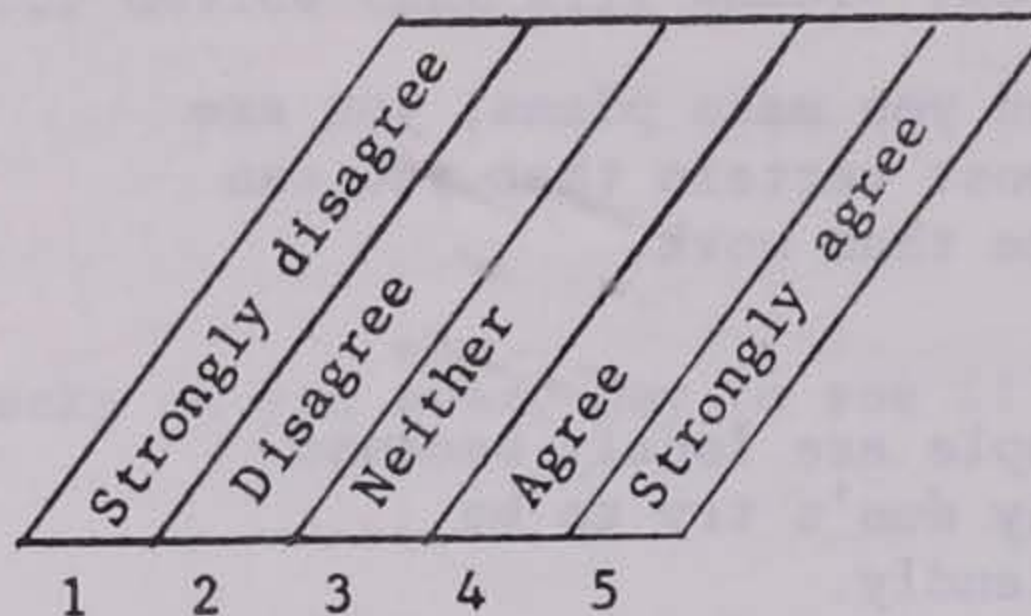
_____ 0 no
_____ 1 yes (GO TO Q125)

124. Who is the child that you are most likely to turn to?

_ _ (-)

_____ (NAME)

"Now we would like your opinions on some statements. Let's look at CARD #9 once again, I'm going to read each statement and I'd like you to tell me whether you agree or disagree with each statement."



125. Adult children should take care of their parents, in whatever way necessary, when they are sick.

1 2 3 4 5 _ ()

126. Adult children should give their parents financial help if the parents need it.

1 2 3 4 5 _ ()

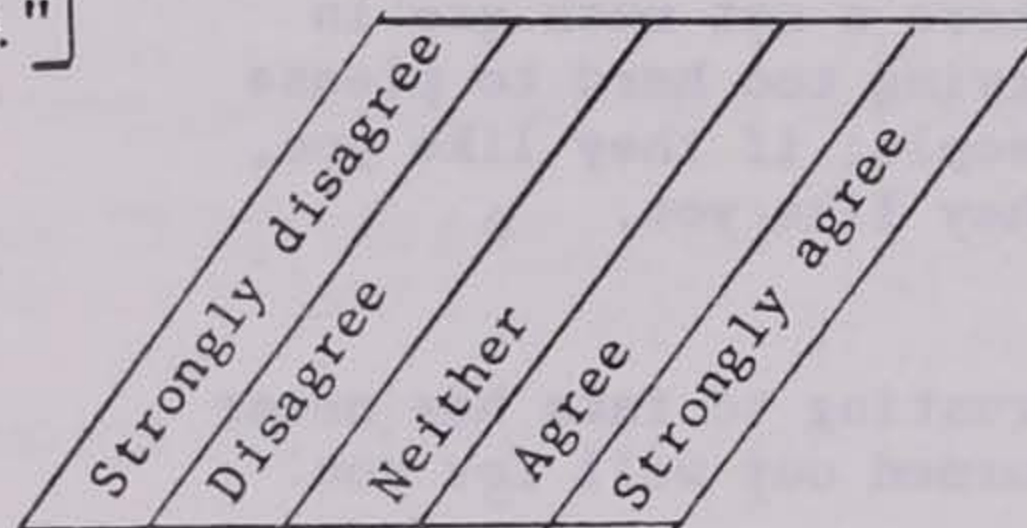
127. Parents are entitled to some return for the sacrifices they have made for their children.

1 2 3 4 5 _ ()

128. No matter what, adult children should bring their parents into their home if the parents need help.

1 2 3 4 5 _ ()

"Now I would like to know whether you agree or disagree with the next set of statements. [CONTINUE USING CARD # 9.]"

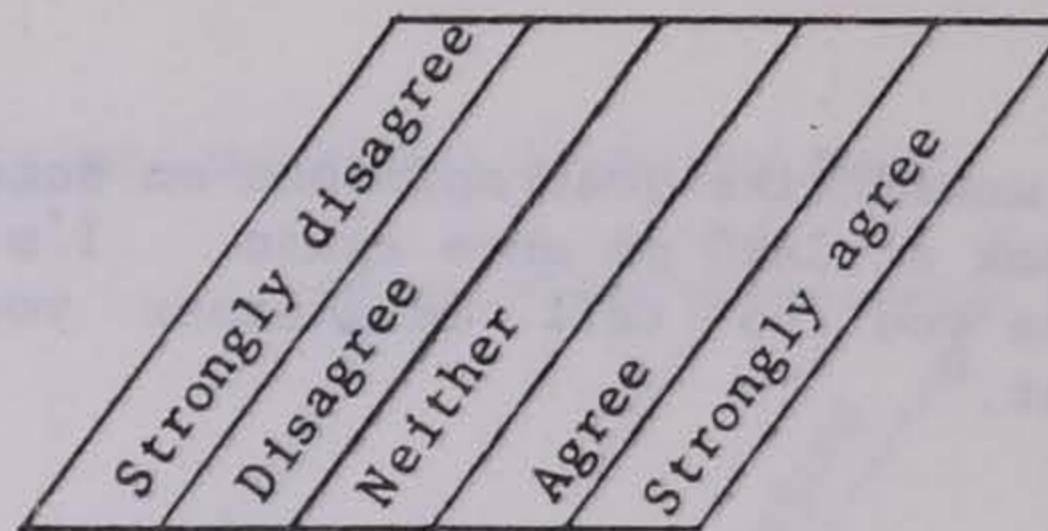


129. These are the best years of your life.

1 2 3 4 5 _ ()

130. Many times you feel that you have little influence over the things that happen to you.

1 2 3 4 5 _ ()



131. When you make plans, you are almost certain that you can make them work. 1 2 3 4 5 _ ()
132. People are lonely because they don't try to be friendly. 1 2 3 4 5 _ ()
133. You have often found that what is going to happen will happen. 1 2 3 4 5 _ ()
134. It is not always wise to plan too far ahead because many things turn out to be a matter of good and bad fortune anyhow. 1 2 3 4 5 _ ()
135. It is impossible for you to believe that chance or luck plays an important role in your life. 1 2 3 4 5 _ ()
136. There's not much use in trying too hard to please people; if they like you, they like you. 1 2 3 4 5 _ ()
137. Trusting to fate has never turned out well for you. 1 2 3 4 5 _ ()

"Next I would like to ask you some questions about your safety and security."

138. Do you have a call button or a monitor device that will enable you to call for help if you need it? _ ()

_____ 0 no
 _____ 1 yes

139. Do you have someone who calls or checks on you every day to see if you're OK? _ ()

_____ 0 no
 _____ 1 yes

140. Are you afraid that something might happen to you in your home and no one will know? _ ()

_____ 0 no
 _____ 1 yes

"We know that all people have things that they worry about. We would like to know what you think."

141. Do you think that older people worry about ...

	NO	YES	
(a) being alone as they age?	0	1	_ ()
(b) becoming a burden to their families?	0	1	_ ()
(c) not being able to drive?	0	1	_ ()
(d) having their health decline?	0	1	_ ()
(e) the costs for health care becoming too great to handle?	0	1	_ ()
(f) not being able to live independently?	0	1	_ ()
(g) where they will live in the next ten years?	0	1	_ ()
(h) who will take care of them if they become too ill or disabled to care for themselves?	0	1	_ ()

142. Sometimes things happen that cause people to move to a different kind of housing. We'd like to know if you think any of the following are good reasons why some older people move.

Do you think ...

	NO	YES	
(a) the death of a spouse is a good reason to move?	0	1	_ ()
(b) declining health is a good reason to move?	0	1	_ ()
(c) retirement is a good reason to move?	0	1	_ ()
(d) children moving away from the community is a good reason to move?	0	1	_ ()
(e) feeling unsafe in their home is a good reason to move?	0	1	_ ()
(f) feeling unsafe in their neighborhood is a good reason to move?	0	1	_ ()

143. How long have you lived in this residence? _ _ (-)

_____ months
_____ years

144. Have you ever thought about moving from this dwelling unit? _ ()

_____ 0 no (GO TO Q151)
_____ 1 yes

145. Do you want to move within the next 3 years? _ ()

_____ 0 no (GO TO Q151)
_____ 2 yes

146. Do you want to move within the next 12 months? _ ()

_____ 0 no (GO TO Q151)
_____ 3 yes

147. Do you expect to move within the next 12 months? _____ ()

- _____ 0 no (GO TO Q151)
- _____ 4 yes

148. Do you have definite plans to move within the next 12 months? _____ ()

- _____ 0 no (GO TO Q151)
- _____ 5 yes

149. Have you chosen the dwelling unit to which you will move? _____ ()

- _____ 0 no
- _____ 1 yes

150. Are you thinking of moving to _____ ()

- _____ 1 a different dwelling in this neighborhood?
- _____ 2 a different neighborhood in this community?
- _____ 3 a different community in this state?
- _____ 4 a different state in the U.S.?
- _____ 5 outside the U.S.?

151. Do you spend part of your winter in a warmer climate? _____ ()

- _____ 0 no
- _____ 1 yes

[CHECK QUESTION 001 TO SEE IF THE RESPONDENT OWNS OR RENTS THIS DWELLING.
IF RENTER, GO TO Q155.
IF RENT FREE, GO TO Q156.]

[ASK Q152-154 FOR OWNERS ONLY]

"As I recall you own this dwelling"

152. Do you have a mortgage or contract on this dwelling unit? _____ ()

_____ 0 no (GO TO Q154)
_____ 1 yes

153. What is the approximate current balance of your mortgage or contract? _____ (-)

\$ _____

154. What do you think is the value of this house right now? How much do you think you could get for the house and yard if you sold it? We want your best estimate. _____ (-)

\$ _____ (GO TO Q156)

[ASK Q155 FOR RENTERS ONLY]

155. Please tell me about how much you spend on rent and whether you pay monthly, quarterly, or yearly.

How much do you pay for . . .

rent? \$ _____ (-)

per: 1 month _____ ()
2 quarter _____
3 year _____

156. In this next series of questions I am going to ask about your income and your spouses income sources in 1985.
 [ASK QA FOR ALL SOURCES LISTED]

A. Did you receive any income from _____ (source) ? [IF YES, ASK QB]

B. In 1985 what was your (net or gross) income from _____ (source) ?

Source	Yes No		Amount	
1) Wages and salaries? (gross)	1	0	\$ _____ per	1 = week 2 = month 3 = year
2) Farming or market gardening? (net)	1	0	\$ _____ per	1 = week 2 = month 3 = year
3) Farm land rental? (net)	1	0	\$ _____ per	1 = week 2 = month 3 = year
4) Other rental property? (net)	1	0	\$ _____ per	1 = week 2 = month 3 = year
5) Your own business, professional practice, or trade? (net)	1	0	\$ _____ per	1 = week 2 = month 3 = year
6) Roomers or boarders? (net)	1	0	\$ _____ per	1 = week 2 = month 3 = year
7) Dividends, interest ,trusts, royalties on stock, bonds or other investments? (gross)	1	0	\$ _____ per	1 = week 2 = month 3 = year
8) Social security retirement payments? (gross)	1	0	\$ _____ per	1 = week 2 = month 3 = year

Source	Yes	No	Amount
9) Any other type of retirement benefits or annuities? (gross)	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
10) Other social security such as disability, supplemental security, etc? (gross)	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
11) Other disability payments? (gross)	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
12) Unemployment or workmen's compensation? (gross)	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
13) Alimony	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
14) Gifts from friends or relatives?	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
15) Other sources?	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year
(specify) _____ _____	1	0	\$ _____ per _____ 1 = week 2 = month 3 = year

157. Overall, do you feel that your income and your spouse's income. . . ()

- _____ 1 is not at all adequate
- _____ 2 can meet necessities only
- _____ 3 can afford some of the things you want but not all
- _____ 4 can afford about everything you want
- _____ 5 can afford about everything you want and save some money too

"In this last series of questions we would like to know if you have any plans to change this dwelling unit."

158. Have you ever thought about making any alterations or additions to this dwelling unit? _ ()

_____ 0 no (GO TO END)
_____ 1 yes

159. Do you want to remodel, alter, or enlarge this dwelling unit within the next 3 years? _ ()

_____ 0 no (GO TO END)
_____ 2 yes

160. Do you want to remodel, alter, or enlarge your your dwelling unit within the next 12 months? _ ()

_____ 0 no (GO TO END)
_____ 3 yes

161. Do you expect to remodel, alter, or enlarge this dwelling unit within the next 12 months? _ ()

_____ 0 no (GO TO END)
_____ 4 yes

162. Do you have definite plans to remodel, alter, or enlarge this dwelling within the next 12 months? _ ()

_____ 0 no
_____ 5 yes

Thank you very much, you have been very helpful. We appreciate your cooperation and the time you have taken to help with our research.

Is there anything you'd like to add about housing or your housing needs?

Ending time _ _ : _ _

APPENDIX B

INTERVIEW SCHEDULE

FOR

CHILDREN

A copy of the questionnaire that was mailed to children of female elderly respondents is included in Appendix B.

Similar questionnaires with the appropriate substitution of father, he, him, and his for mother, she and her were mailed to children of male elderly respondents.

1. Are you concerned that your mother's present housing situation will not continue to meet her needs as she gets older?

YES NO

2. Have you helped your mother look for information on the different kinds of housing that she might move to as she gets older?

YES NO

3. Do you think that your mother will ever move?

YES NO

4. If your mother were to move, do you think she should move closer to a family member?

_____ YES

_____ NO (SKIP TO Q6)

_____ ALREADY LIVES CLOSE TO A FAMILY MEMBER (SKIP TO Q6)

5. Which family member?

_____ (GIVE RELATIONSHIP)

6. Below is a list of different kinds of housing available. We'd like to know whether you think your mother should consider moving into any of these types of housing.

(a) a smaller dwelling? YES NO

(b) an accessory apartment, which is an apartment in a relative's house? YES NO

(c) the same dwelling with a family member or relative? YES NO

(d) shared housing, which is when 3 or more adults share one dwelling? YES NO

(e) an elder cottage, which is small factory-made unit to be placed on the same lot with a relative's house? YES NO

(f) a boarding home or residential hotel? YES NO

(g) a retirement home or a retirement community? YES NO

(h) a nursing home? YES NO

"These next questions ask about who might help your mother in making a decision if she were to move."

7. If your mother were to move, would she ask for advice from ...

- | | | | |
|-----------------------------------|-----|----|-------------------|
| (a) you? | YES | NO | ----- |
| (b) her other children? | YES | NO | NO OTHER CHILDREN |
| (c) her husband? | YES | NO | NOT MARRIED |
| (d) her friends? | YES | NO | ----- |

8. If your mother were to move, would you or other members of her family visit several facilities, communities, or model homes to help her make a choice?

YES NO

9. Would you be interested in having a professional housing consultant explain different types of housing for the elderly to you and your mother, locate the type of housing she wants, visit different places in which she might be interested, or help her select a place to live?

YES NO

10. If classes were offered on housing for the elderly at little or no cost, would you ...

- | | | |
|---|-----|----|
| (a) attend a class on renovating your mother's present housing to better meet her needs as she gets older? | YES | NO |
| (b) attend a class on obtaining in-home services such as meals on wheels or a homemaker health aide? | YES | NO |
| (c) attend a class on helping your mother choose a retirement community? | YES | NO |
| (d) attend a class on helping your mother choose a nursing home? | YES | NO |
| (e) attend a class on helping your mother choose appropriate housing which would better meet her needs as she gets older? | YES | NO |

11. Have you and your mother discussed a plan for a time when she would have to move from her home?

YES NO (SKIP TO Q13)

12. What is that plan?

13. Have you and your mother discussed a plan for a time when she would not be able to take care of herself for a long period of time?

YES NO (SKIP TO Q15)

14. What is that plan?

15. If something serious were to happen to your mother's health next week, what would you do about seeing that she's taken care of?

16. Does anyone call or check on your mother every day to see if she is OK?

YES NO

17. Are you afraid that something might happen to your mother in her home and no one would know?

YES NO

18. How would you rate your mother's health?

____ POOR
____ FAIR
____ GOOD
____ EXCELLENT

"Now we would like to know a little bit about your relationship with your mother. Please circle the number which represents the frequency with which these things occur."

0 = NEVER
1 = LESS THAN ONCE A YEAR
2 = ABOUT ONCE A YEAR
3 = SEVERAL TIMES A YEAR, 2-11
4 = AT LEAST 1X/MONTH, NOT EVERY WEEK
5 = AT LEAST 1X/WEEK, NOT DAILY
6 = DAILY

19. How often do you visit your mother in her home? 0 1 2 3 4 5 6
20. How often does your mother visit you in your home? 0 1 2 3 4 5 6
21. How often do you talk on the telephone with your mother? 0 1 2 3 4 5 6
22. How often do you send letters and postcards to your mother? 0 1 2 3 4 5 6
23. How often do you receive letters and postcards from your mother? 0 1 2 3 4 5 6
24. How often do you see your mother face-to-face? 0 1 2 3 4 5 6

"Adult children sometimes help their parents in various ways."

25. Do you help your mother with any everyday tasks or errands?

YES NO (SKIP TO Q31)

"Please indicate how often you help with each of the following tasks."

0 = NEVER
1 = LESS THAN ONCE A YEAR
2 = ABOUT ONCE A YEAR
3 = SEVERAL TIMES A YEAR, 2-11
4 = AT LEAST 1X/MONTH, NOT EVERY WEEK
5 = AT LEAST 1X/WEEK, NOT DAILY
6 = DAILY

26. How often do you help your mother with bathing or getting dressed? 0 1 2 3 4 5 6

27. How often do you fix your mother's meals? 0 1 2 3 4 5 6

28. How often do you do light tasks in your mother's home such as cleaning or putting things away? 0 1 2 3 4 5 6

29. How often do you do heavy tasks around your mother's home such as moving furniture, yardwork or shoveling snow? 0 1 2 3 4 5 6

30. How often do you take your mother to the grocery store, shopping or to the doctor? 0 1 2 3 4 5 6

"Now we'd like to know how often you give your mother other kinds of help."

31. How often do you give your mother advice? 0 1 2 3 4 5 6

32. How often do you help your mother in an emergency such as an accident, sickness or death of someone close to her? 0 1 2 3 4 5 6

33. How often do you give or lend your mother money when she needs it? 0 1 2 3 4 5 6

34. Would you be willing to give or lend your mother money if she needed it?

YES NO

"Parents often help their children in many ways. Circle the response which best represents how frequently the following things occur."

- 0 = NEVER
- 1 = LESS THAN ONCE A YEAR
- 2 = ABOUT ONCE A YEAR
- 3 = SEVERAL TIMES A YEAR, 2-11
- 4 = AT LEAST 1X/MONTH, NOT EVERY WEEK
- 5 = AT LEAST 1X/WEEK, NOT DAILY
- 6 = DAILY

35. How often does your mother give you advice? 0 1 2 3 4 5 6

36. How often does your mother help you in an emergency such as an accident, sickness or death of someone close to you? 0 1 2 3 4 5 6

37. How often does your mother give or lend you money when you need it? 0 1 2 3 4 5 6

"The next set of questions ask about feelings between you and your mother. Please circle the response that describes your feelings."

- 0 = NOT AT ALL
- 1 = A LITTLE
- 2 = SOMEWHAT
- 3 = QUITE A BIT
- 4 = A GREAT DEAL

38. How much does your mother trust you? 0 1 2 3 4

39. How much does your mother care about you? 0 1 2 3 4

40. How much do you trust your mother? 0 1 2 3 4

41. How much do you care about your mother? 0 1 2 3 4

42. How much does your mother rely on you in making decisions? 0 1 2 3 4

"Please circle the response that describes the extent you agree or disagree with the next two statements."

SD = STRONGLY DISAGREE
D = DISAGREE
N = NEITHER
A = AGREE
SA = STRONGLY AGREE

43. Your relationship with your mother is as you hoped it would be. SD D N A SA

44. Your views about life are similar to those of your mother. SD D N A SA

45. Of all your brothers and sisters, are you the one your mother is most likely to turn to first in an emergency?

- YES (SKIP TO Q47)
- YES, I AM AN ONLY CHILD (SKIP TO Q47)
- NO

46. Who is the child that your mother is most likely to turn to?

_____ (NAME)

"Please circle the response that best describes the extent you agree or disagree with each statement."

SD = STRONGLY DISAGREE
D = DISAGREE
N = NEITHER
A = AGREE
SA = STRONGLY AGREE

47. Adult children should take care of their parents, in whatever way necessary, when they are sick. SD D N A SA

48. Adult children should give their parents financial help if the parents need it. SD D N A SA

49. Parents are entitled to some return for the sacrifices they have made for their children. SD D N A SA

50. No matter what, adult children should bring their parents into their homes if the parents need help. SD D N A SA

"We'd like some background information about you and the people you live with."

51. How many people live in your household, including yourself?

52. How many of these people are 60 years of age or older, including yourself?

53. How many of these people are 18 years of age or younger, including yourself?

54. What is your age?

55. Are you male or female?

_____ MALE

_____ FEMALE

56. How would you rate your health?

_____ POOR

_____ FAIR

_____ GOOD

_____ EXCELLENT

57. Do you need any help with personal care needs, such as eating, bathing, dressing or getting around your home?

YES NO

58. What is the highest grade of school that you have completed?

59. Which category best describes your employment?

- FULL-TIME
- PART-TIME
- UNEMPLOYED
- RETIRED
- DISABLED
- OTHER (PLEASE EXPLAIN _____)

60. What is your marital status?

- MARRIED
- DIVORCED
- SEPARATED (SKIP TO Q72)
- WIDOWED
- NEVER MARRIED

61. What is your spouse's age?

62. How would you rate your spouse's health?

- POOR
- FAIR
- GOOD
- EXCELLENT

63. Does your spouse need any help with personal care needs, such as eating, bathing, dressing or getting around your home?

YES NO

64. What is the highest grade of school that your spouse has completed?

65. Which category best describes your spouse's employment?

- FULL-TIME
- PART-TIME
- UNEMPLOYED
- RETIRED
- DISABLED
- OTHER (PLEASE EXPLAIN _____)

66. Is your mother-in-law living?

YES NO

67. Is your father-in-law living?

YES NO

"If neither in-law is living, skip to Q72."

68. Do you help your in-laws with any everyday tasks or errands?

YES NO

69. Do you help your in-laws in any other ways?

YES NO

70. Do either of your in-laws live with you?

YES NO (SKIP TO Q72)

71. Who?

- MOTHER-IN-LAW
- FATHER-IN-LAW
- BOTH

72. Do you have any living children?

YES NO (SKIP TO Q74)

73. How many?

74. Do you have any living grandchildren?

YES NO (SKIP TO Q76)

75. How many?

76. What category best describes your total household net income (take home pay) for 1985?

_____ UNDER \$5,000

_____ \$5,000 - \$9,999

_____ \$10,000 - \$14,999

_____ \$15,000 - \$19,999

_____ \$20,000 - \$24,999

_____ \$25,000 - \$29,999

_____ \$30,000 - \$34,999

_____ \$35,000 - \$39,999

_____ \$40,000 - \$44,999

_____ \$45,000 - \$49,999

_____ \$50,000 AND OVER

77. Overall, do you feel that your family income ...

_____ IS NOT AT ALL ADEQUATE.

_____ CAN MEET NECESSITIES ONLY.

_____ CAN AFFORD SOME OF THE THINGS YOU WANT BUT NOT ALL.

_____ CAN AFFORD ABOUT EVERYTHING YOU WANT.

_____ CAN AFFORD ABOUT EVERYTHING YOU WANT AND SAVE SOME MONEY TOO.

"We know that some older people have things that they worry about. We would like to know what you think."

78. Do you think that older people worry about ...

- | | | |
|---|-----|----|
| (a) being alone as they age? | YES | NO |
| (b) becoming a burden to their families? | YES | NO |
| (c) not being able to drive? | YES | NO |
| (d) having their health decline? | YES | NO |
| (e) the costs for health care becoming too great to handle? | YES | NO |
| (f) not being able to live independently? | YES | NO |
| (g) where they will live in the next ten years? | YES | NO |
| (h) who will take care of them if they become too ill or disabled to care for themselves? | YES | NO |

79. Sometimes things happen that cause people to move to a different kind of housing. We'd like to know if you think any of the following are good reasons why some older people move. Do you think ...

- | | | |
|---|-----|----|
| (a) the death of a spouse is a good reason to move? | YES | NO |
| (b) declining health is a good reason to move? | YES | NO |
| (c) retirement is a good reason to move? | YES | NO |
| (d) children moving away from the community is a good reason to move? | YES | NO |
| (e) feeling unsafe in their home is a good reason to move? | YES | NO |
| (f) feeling unsafe in their neighborhood is a good reason to move? | YES | NO |

APPENDIX C

WEIGHTING THE SAMPLE

The sample of 277 respondents were chosen on the basis of age -- 60 to 74 years and 75 years or older -- and residence -- rural or urban. Urban residence is defined as living in towns and cities with a population of 20,000 or more; sixteen counties in Iowa have urban areas. Because of nonresponse and an attempt to oversample the oldest categories of respondents, the number of people interviewed across the categories does not necessarily represent the true state population distribution. It is therefore necessary to weight the categories to obtain a true representation of how elderly Iowans respond to the questions asked in this study.

The appropriate weights for the state are provided in Table A. The weights are calculated by first estimating the number of persons who live in households for each of the four categories. Then the probabilities of selection with an additional adjustment to compensate for nonresponse are figured; the adjustment is based on the assumption that those selected to be in the sample but who were not interviewed do not differ as a group for those who were interviewed. The weights can be used in statistical packages such as SAS and SPSSX to estimate the appropriate totals for the state.

Table A. State Weights

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
Iowa	1422	1400	2243	1907

It is also important to estimate the population for different areas of the state in order to have accurate results of those particular regions. For that reason, the geographical areas of the sixteen Area Agencies of Aging are grouped into five regions. The regional weights are then calculated in a manner similar to the state weights. The weights and the Area Agencies of Aging that comprise each region are provided in Table B.

Table B. Regional Weights and Area Agencies of Aging

	<u>Urban</u>		<u>Rural</u>	
	<u><75</u>	<u>75+</u>	<u><75</u>	<u>75+</u>
North/Northwest (AAA 2,3,5)	706	595	2772	2149
West/Southwest (AAA 4,12,13,14)	2367	2279	1600	2075
Central (AAA 11)	1130	1384	2815	1537
Northeast (AAA 1,6,7,8)	753	555	2107	1530
Southeast (AAA 9,10,15,16)	1774	2213	4883	4341

To use the weights, it is necessary to group the counties in which interviews took place into their appropriate regions. This may be done in SPSSX with IF statements. An IF statement creates a new variable from a variable that already exists. The variable, CNTY1, is a variable in the data set that represents the county in which the respondents live; REGION, the new variable that is being created, represents the area of the state in which the respondents live. The IF statement that defines the respondents who live in the Northeast region is:

```
IF (CNTY1 EQ 03 OR CNTY1 EQ 42 OR CNTY1 EQ 64 OR CNTY1 EQ 86 OR
    CNTY1 EQ 07 OR CNTY1 EQ 19 OR CNTY1 EQ 31 OR CNTY1 EQ 49)
    REGION=1
```

Similar IF statements for each of the other four regions are necessary, but change the value of REGION to 2,3,4 and 5 to represent the particular region that is being specified. The use of the SPSSX VALUE LABELS command, a command that labels the values of variables, is beneficial when running the statistical program.

When writing the SPSSX statements that weight the sample, use the variable GRP1; GRP1 defines the age and residence category of the respondents. The SPSSX commands to weight the sample to represent the state population are:

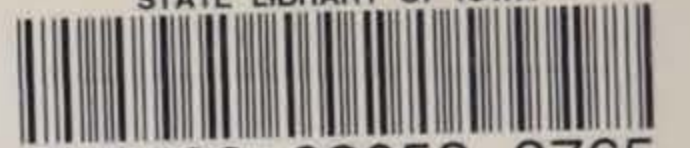
```
IF (GRP1 EQ 1)STWEIGHT=1422
IF (GRP1 EQ 2)STWEIGHT=1400
IF (GRP1 EQ 3)STWEIGHT=2243
IF (GRP1 EQ 4)STWEIGHT=1907
WEIGHT BY STWEIGHT
```

The SPSSX commands to weight the sample to represent the Northeast region (in this example, Region 1) are :

```
SELECT IF (REGION EQ 1)
IF (GRP1 EQ 1)R1WEIGHT=753
IF (GRP1 EQ 2)R1WEIGHT=555
IF (GRP1 EQ 3)R1WEIGHT=2107
IF (GRP1 EQ 4)R1WEIGHT=1530
WEIGHT BY R1WEIGHT
```

Similar statements for each of the other four regions are necessary; change each line of these commands as necessary to represent the particular region that is being analyzed.

STATE LIBRARY OF IOWA



3 1723 02053 8765