



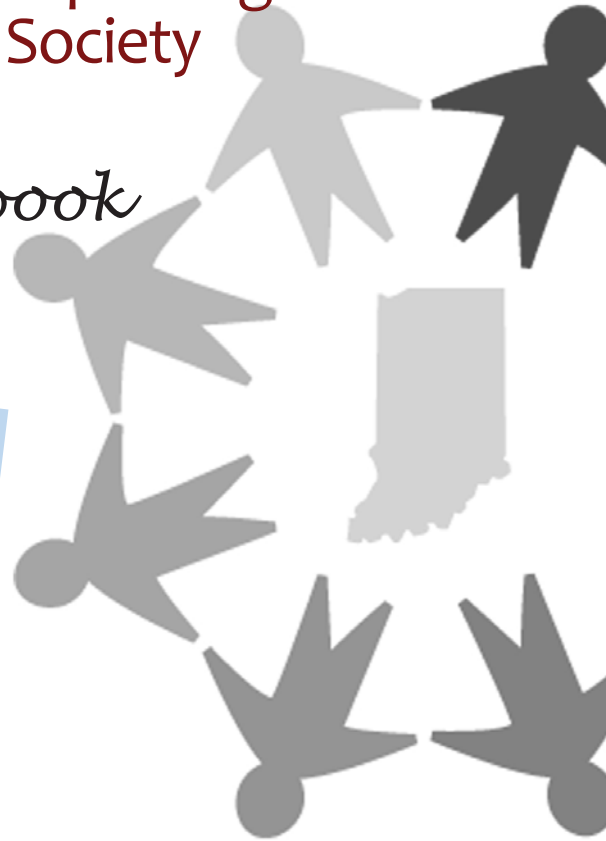
Planning Tools for
Elder-Friendly Communities

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COMMUNICATIONS TOOLKIT

The AdvantAge Initiative: Improving
Communities for an Aging Society

A Community Guidebook



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PLANNING TOOLS FOR ELDER-FRIENDLY COMMUNITIES

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INTRODUCTION

The AdvantAge Initiative is a community-building effort focused on creating vibrant and elder-friendly, “AdvantAged,” communities prepared to meet the needs and nurture the aspirations of older adults, while creating livable communities for people of all ages.

At the heart of the AdvantAge Initiative is a comprehensive survey of community-residing older adults.

Since 2003, more than 21,000 people in 30 communities nationwide have completed survey interviews, answering questions about their respective communities and what they envision as an ideal community for “aging in place.”

The purpose of this Indicator Guidebook is to serve as a communications toolkit for your community to reference when disseminating information about your local AdvantAge Initiative data. Throughout this guidebook, we have grouped related indicators, written a brief summary, and then created possible key messages and storylines. Our hope is that you may find some of these ideas compelling and adapt them for use in your community in light of your unique data. Indeed, we expect that your data may differ in significant ways from these national benchmarks, which were taken in 2004. We encourage you to use this Guidebook as a jumping off point to develop ideas that make sense for you.

Most of the ideas described here focus on working with traditional media (i.e., newspapers, radio, television), but there are variety of “new media” ways now available to get your message and associated stories out. Your or one of your community Task Force’s organizations may have a blog that can be an effective communications channel. Or you may simply want to comment on existing blogs

that cover issues in your area. You may use Facebook or Twitter to build a social network of “fans” or “followers” and build momentum for your cause. As in all communications work, the important thing is to be creative and strategic. What is your objective? What is the audience you want to communicate with? What do you want them to understand or do? And what is the best way(s) to get your message to that audience in the service of your project’s central aims.

No matter how you choose to communicate, we encourage you and your AdvantAge Initiative team to invest in efforts to get the word out about your work. Educating key constituencies—from local elected officials to business leaders to nonprofit and aging groups to older adults themselves—is critical to making the changes that you seek. A robust communications effort, combined with a substantive effort to change programs, practices and policies, can accelerate the pace of your progress and serve to build the kind of community—one that is good for people of all ages—that all of us are hoping to create.





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COMMUNICATING ABOUT AFFORDABLE HOUSING

Indicator 1

Percentage of people 65+ who spend 30% or more of their income on housing

Indicator 2

Percentage of people 65+ who want to remain in their current residence and are confident they will be able to afford to do so

Indicators Summary

The first thing that the 2004 national data on these indicators point to is that older people clearly want to continue to live in their community as long as possible. This may mean that most folks would like (not surprisingly) to avoid moving to an assisted living facility or nursing home. More positively, it may be construed to suggest that older adults are not bent on retiring full-time to sunnier, distant climes, away from friends, family and community. There is no place like home.

Housing affordability is the second issue. According to the national data, approximately one-third of older adults are not confident they can afford to remain in their current residence. This is pretty close to the 31% of folks who spend 30% of their income or more on housing. Feeling confident about staying in one's home seems like a powerful, symbolic indicator of elder-friendliness. If older adults can't pay the rent or afford the mortgage in a community, it's likely that they won't stay. How elder-friendly is that?

Possible messages

- There's no place like home

Contrary to popular beliefs, older people in our community aren't looking to retire in far-away places, but are happy where they are

(This message, of course, wouldn't be relevant in Florida or Arizona).

- Seniors struggle to stay put

Although almost nine out of ten older adults would prefer to remain in their current home, according to research from AARP, as many as one third in the AdvantAge data say they are not confident they will be able to afford to so.

Possible story lines

- Empty-nesters? Not so fast

This story could focus on older adults who have been affected by the recent housing crisis and have been forced to move in with their children's families.

- This Old House

This could be a Bob Vila-style feature that documents how an older adult in your community modifies his or her home to make it more elder-friendly (stylish bathroom and light fixtures, ramps, etc.). In August of 2008, AARP released a research report focusing on the concept of "visitability", a home design approach that improves the prospects for aging independently in one's home and community.

Construction practices such as a zero-step entrance, doorways with 32 inches of clear passage space and a half bathroom on the main floor are several key features of this concept that have already been adopted either voluntarily or by a mandatory ordinance into close to 30,000 homes nationwide (read report here: http://www.aarp.org/research/ppi/ltc/Other/articles/2008_14_access.html).

The story would focus on home modification, but there could certainly be a paragraph or two about older adults' desire to live in the community and the related affordability challenges. With the growing appeal of home improvement TV shows on stations like HGTV, this story idea may easily fit in with current

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shows that are of popular appeal.

- Ideas for Staying Close to Home

A variety of federal and community initiatives—including Section 8 vouchers, reverse mortgages, shared and intergenerational housing plans, home modification programs, new housing developments focused on low or middle income people/seniors—are available to help older adults continue to live in our community.

- A Resource We Can't Afford to Lose

Older adults are active citizens, volunteers, voters, charitable givers and civic leaders. Can we afford to lose these community resources because of high rents and soaring property prices/taxes? This might be a good op-ed.

- The Costs of Growing Old

In addition to dealing with the normal aches and pains aging, many older adults have to figure out how to make ends meet. You could pitch a story with three older adults who are struggling to get by and could explain the tradeoffs between the cost of housing, prescription drugs and other basic living expenses.

COMMUNICATING ABOUT HOUSING MODIFICATIONS

Indicator 3

Percentage of householders 65+ in housing units with home modification needs

Indicator Summary

From a communications point of view, this indicator is an extension of Indicators 1 and 2, which focus on affordable housing. As we noted in the previous section on these indicators, older people clearly want to continue to live in their community for as long as possible, though affordability is a big issue for many. With Indicator 3, this discussion

can now include housing quality, home repair, and perhaps even home renovation to accommodate disability.

Home is a very powerful symbol, and the ability to live in one's home a powerful descriptor of independence. As such, there is a communications opportunity, it seems, for a community to express its elder-friendliness quite dynamically (to hit a communications home run, one might say) by aligning itself with a range of programs and initiatives that try to create better homes and living spaces for older adults and indeed, people of all ages.

Possible messages

- Elder-friendly homes make elder-friendly communities

As a community, we must ensure that all older people live in good quality housing and can afford to live in their homes.

Messages from the previous housing indicators memo:

- There's no place like home

Contrary to popular belief, older people in our community aren't looking to retire in far-away places, but are happy where they are (This message, of course, may be less relevant in Florida or Arizona).





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- Seniors struggle to stay put

Although almost nine out of ten older adults would prefer to remain in their current home, according to AARP research, as many as one third say they are not confident they will be able to afford to so.

Possible story lines

- Joe Elder, Handyman

Here, we would feature an older or younger person or group of people who provide needed repairs to the homes of older adults. Many communities have programs like these that use volunteers that come in and fix toilets, replace windows, install air conditioners, etc. A nice angle would be to highlight a couple of retired carpenters or plumbers who are doing this either as part of a program or a way of giving back. You might even contact some of your local unions to see if they would be interested in starting a home modification effort that uses retired members.

- An Elder-Friendly Designer Showcase

Many communities have annual events where interior designers volunteer to design a room in a large house or mansion and then open it to the public. This is generally done as a fundraiser for a local charity. Beyond cost, one of the big barriers to home modifications for older adults is that they often look very institutional. This would be an opportunity for designers to show older adults and others how to make a home safer, more accessible and more beautiful. This is clearly a labor-intensive event, but would be a good engagement strategy (great contacts with the business and real estate community and with local society) and would likely generate a good deal of interesting press coverage.

- This Old House

As described in the previous section, this could

be a Bob Vila-style feature that documents how an older adult in your community modifies his or her home to make it more elder-friendly (stylish bathroom and light fixtures, ramps, etc.). The story would focus on home modification, and there could certainly be a paragraph or two about older adults' desire to live in the community and the related affordability challenges.

COMMUNICATING ABOUT COMMUNITY LIVABILITY AND SAFETY

Indicator 4

Percentage of people 65+ who feel safe/unsafe in their neighborhood

Indicator 5

Percentage of people 65+ who report few/multiple problems in their neighborhood

Indicator 6

Percentage of people age 65+ who are satisfied with the neighborhood as a place to live

Indicators Summary

From a communications (and likely a community development point of view), these three data points are likely to serve as important proxies for the “elder-friendliness” of a particular community. It is hard to imagine an elder-friendly community where a significant percentage of people didn't feel safe or who weren't very satisfied with their neighborhood as a place to live. The national data suggest that while 81% of folks were indeed “very satisfied” with their communities, a good-sized chunk of the population (19%) were “not very satisfied.” How does this compare with your data?

The data on safety and particularly on those people reporting “multiple problems” pro-

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vide some insight into this underwhelmed minority. These indicators point to traffic, crime, and streets in need of repair as the most common problems in many communities. Dark streets, too few traffic lights, access to public transportation, and distance from services were less commonly reported, but still significant. Your community may have a unique profile, which may focus your efforts. Also, sub-groups in your community (those 75+, who are poorer, who have few friends) may also tend to be less happy with their neighborhoods.

The common thread among most of the problems identified is that they affect not only older adults, but all members of the community. Thus, work to improve senior satisfaction could very well be framed as an effort to create a better community for people of all ages. One, perhaps quirky, note to support this notion-- If you take a look at Money Magazine's, Best Places to Live Web site (<http://money.cnn.com/best/bplive/>) and take their "Best Places Poll," and then view the results from almost 55,000 folks so far, you find that, "Low Crime Rate" is the single thing most important to people of all ages when they are thinking about a place to live. "Nice Weather" (tough to make a dent there) and a "Low Cost of Living" (see Housing Affordability indicators) are next.

Possible messages

- Safe streets: On the road to a more livable community

Improving people's safety and security—through crime prevention, better street lamps and lighting, managing traffic, and repairing streets—is critical to improving their perceptions of the community as a whole.

- Stop crime...and the fear of crime

Crime may be dangerous to older adults, but the fear of crime can also cause isolation and

disengagement and may be just as dangerous in the long-term.

- My Community: A Great Place to Live

Our data suggest that older adults love their communities. Here's why.

Possible story lines

- (Name of your community here): A Great Place to Live

In May 2009, Forbes magazine published the article, "Best Places to Grow Old" (<http://www.forbes.com/2009/05/18/best-retirement-places-lifestyle-real-estate-retire.html>), which focused on where retirees may find comfort, opportunity and financial peace of mind. In a comprehensive review of research literature on retiree relocation, author Philip Stafford cites the major "place characteristics" that push and pull retiring boomers and older individuals to relocate in later life (*Elderburbia: Aging with a Sense of Place in America*, Praeger, 2009: 18-27). It is interesting, I think, to read both pieces for their criteria, which community planners might consider as they reflect on the quality of their cities and towns. In addition to the survey research, it is important to gather and showcase the individual stories that help fill in the meaning of a good place to grow old.

The data from the Advantage Initiative report





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that big majorities of older people in communities nationwide are “very satisfied” with their neighborhoods. This may not be news in and of itself, but you could talk to 10 or 25 people (perhaps 50+ or even in a wider age range), and ask, “Why do you like/love to live in your community?” From these interviews, you might develop five or so stories (300-600 words max), add in your data, and create a publication that might be of interest to the local Chamber of Commerce or Realtors Association or could serve as the basis of human interest stories for your local paper, TV, or radio news. The key is to find “good stories” that have drama, human interest, represent the diversity of experience in the community, and highlight what are the five or so key appeals of your community.

- **Into the Streets**

Whether it’s traffic, potholes, lack of lighting, too few traffic lights or access to public transportation, some of the biggest problems in our communities have to do with the safety and accessibility of our streets. You could develop a PR-focused “Safe Streets Awards Program,” which could recognize public, non-profit, and private efforts to take on any or all of these challenges. You might hold a modest awards luncheon or breakfast, prepare brief descriptions of each of the award winners, hand out small plaques, and invite the media to interview the winners and tell their stories.

- **The Truth about Crime**

In many communities, violent crime rates have dropped (in some places precipitously) during the last several years. A partnership with local law enforcement to communicate this good news (assuming it is true or still true in your community), coupled with efforts to provide education to seniors about staying safe, could make a good story, particularly if an officer and an older adult team up to take the word out.

- **Let There Be Light**

If your community identified dark streets as a major issue, do a community survey and identify the 10 darkest and most dangerous corners/streets in your area. See what local Public Works is doing about the situation. If they are uninterested in responding, make a list of the intersections or streets and send them to the local press (if you can get pictures, all the better (I know, these are dark places). Publicize these locations as part of your larger effort to make your community’s streets safer for people of all ages. If the city takes care of these problems, work with them to recognize their efforts in the media.

- **Senior Street Smarts**

Invite senior members of your community to participate in a panel discussion to disclose tips on neighborhood “secrets” for older tourists or older adults who are new to the neighborhood, whether it’s to list the best place to gather for lunch, which areas or venues offer more senior-friendly accommodations, or what areas to avoid for any variety of reasons. This list could be included in local Convention/Visitor’s Bureau materials, if available, or listed on the city or town’s web site and within hotels, gift shops, and major tourist attractions.

COMMUNICATING ABOUT HUNGER AND NUTRITION

Indicator 7

Percentage of people age 65+ who report cutting the size of or skipping meals due to lack of money

Indicator Summary

Nationally, only a very small percentage of older adults indicated they were missing meals or going hungry due to poverty at some time during the last year. Writ large, this appears to be good news, an indication that the federal and

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state governments' safety net, complemented by food delivered to homebound older adults or available at congregate settings, is keeping most older people fed.

Indeed, recent data from the Federal Inter-agency Forum on Aging Related Statistics Older Americans 2008: Key Indicators of Well-Being report suggest that poverty levels among older adults have dramatically decreased from 1954, when 35 percent of people age 65 and over lived below the poverty threshold. This number has significantly shifted to nine (9) percent as of 2006. However, this rate has been slowly slipping in recent years, according to A Profile of Older Americans: 2008, released from the Administration on Aging and the U.S. Department of Health and Human Services, which states about 3.6 million elderly persons (9.7 percent), were below the poverty level in 2007. Given the recent economic downturn, these poverty indices are likely higher now.

Of equal importance to this indicator is the issue of poor nutrition among older adults. The 2005 Healthy Eating Index listed in the Older Americans 2008: Key Indicators of Well-Being report indicates a need to increase the intake of a number of food groups for people 65 and over. Federal support to ensure poverty levels don't affect the food security of older adults is evident within the nutrition services under the Older Americans Act, commonly referred to as the Nutrition Program for the Elderly (NPE). This is a targeted program to reduce hunger and food insecurity and promote the health, well being and independence of older adults.

Possible messages

- Older adults need not just to eat, but to eat right

A good, well-balanced diet is a pillar of healthy aging. While very few older adults in our

community are going hungry, too many aren't eating the foods they need to give them the best chance of staying healthy and vital.

Possible story lines

- Older adults: A Food Pyramid of Our Own

In 2008, Tufts University's USDA Human Nutrition Research Center on Aging published a modified Food Pyramid that addresses the special needs of older Americans. This places more emphasis on the importance of regular physical activity, in addition to maintaining a focus on drinking significant quantities of water and intake of vitamins (<http://nutrition.tufts.edu/docs/guidelines.pdf>).

The pyramid could be the subject of an information forum for older adults in the community, to which the press could be invited. From a strictly media perspective, you could also pitch the story of the dueling pyramids (between the Tufts pyramid and the USDA pyramid) and the confusion around what older adults should be doing about their diets. A list of "10 Do's and Don't's" might make a nice complement to this story. These could also go on a kitchen magnet with your organization's name on the top.

- What to Eat?

Each day, a new report touts the benefits of something like eggs, which we thought were





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bad, or points out the dangers of a food like pasta, which we thought was good. Older adults, in fact, all of us—end up a little confused by this welter of conflicting or at least changing information. You could work with a local gero-nutritionist to outline a common sense guide to what older adults should eat. A good punchy list could be distributed to the media, placed on a bookmark or a pot holder. Even better, you could develop an “Eating Right Tip of the Month” and send it out to the media regularly. Or, if you or one of your partners has a blog or well-read newsletter, this could be turned into a regular feature or an adjunct to a regular column on health and aging.

COMMUNICATING ABOUT COMMUNITY-BASED LIMITATIONS AND DISABILITY

Indicator 10

Percentage of people age 65+ who have one or more unmet need, among those who need assistance in basic daily activities.

Indicator 23

Percentage of people age 65+ with adequate assistance in activities of daily living.

Indicator 24

Percentage of people age 65+ with adequate assistance in instrumental activities of daily living.

Indicator Summary

These indicators measure the frailty (or conversely the vigor) of an older adult population based on people’s ability to perform a range of basic tasks from taking a bath and eating to preparing meals and keeping track of money and bills. It also points to how well frail older adults’ basic needs are being met.

Nationally, approximately 80% of older

adults reported having no limitations with instrumental activities of daily living (activities such as driving or taking public transportation, preparing meals, taking the right amount of medication). Those who required assistance needed it most when driving or taking public transportation and doing light housework or going outside the home. When it comes to basic activities of daily living – those categorized as eating, moving about the house, etc. – nationally, approximately 93% of older adults reported having no limitations at all. Among the biggest problems reported from the frail six or so percent that do have limitations are getting a bath or shower and getting in or out of a chair or bed.

While the majority of older adults are well enough on their own, among the small minority of those who experience limitations, almost half are not getting the assistance they need.

Possible Messages

- The New Longevity or “We’re just fine, thank you very much”

Contrary to popular perceptions, eight out of ten older adults live today without any major functional limitations on their ability to live on their own.

- Serve the “frail fraction”

While older adults are living healthier and more independently than ever, we must ensure that we provide needed assistance for that relatively small group of seniors who need help living on their own.

Possible storylines

- Living Longer, Living in the Community

As the AdvantAge data and other studies have suggested, older adults want to “age in place.” This is a tremendous opportunity

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for communities to reap the benefits of the financial, civic and social contributions older adults can make. While most older adults do just fine on their own, we can extend the time they live in their own homes by ensuring that those who become frail get the help they need, whether that means transportation to doctors' offices or hair appointments or more basic assistance preparing meals or even bathing. This story could feature several programs in the area that provide these kinds of services in low-cost or innovative ways. It might also focus on a single older adult who is quite frail, but through a web of informal and formal help, is able to lead an active interesting life.

- Getting Out and About: Older Adults Look For Help

The biggest challenge (according to our data) facing frail older adults revolves around getting out of the house. Active engagement in the community is a critically important aspect of aging well. If older adults don't have access to public or private transportation, they may become isolated. This can lead to serious consequences. Research has shown that isolation is correlated with not only repeat trips to the emergency department,¹ but a number of bad health effects, particularly heart disease² and depression.³

This story could again focus on innovative public and private programs that enable older adults to get around the community and remain engaged in the world around them. It might highlight seniors who are using this transportation not only to get to their bridge game, but who are making an important contribution to the community. It could also bring in transportation data from other parts of the AdvantAge survey to provide a sense of how older adults are actually getting around their community.

COMMUNICATING ABOUT PREVENTIVE HEALTH

Indicator 11

Rates of vaccination and screening for various conditions among people 65+.

Indicator Summary

Good health is one of the foundations of successful aging. Elder-friendly communities, therefore, must play a role in ensuring that older adults have access to the high quality medical care and services they need. Just as importantly, elder-friendly communities should promote preventive measures that help avert health problems before they start, or at least before they become more serious. This may begin with exercise, good nutrition and anti-smoking campaigns, but can also be extended to promoting a range of vaccinations and screenings for people 65+.

The indicators here show that, depending on the test, 3/5 to 2/3 of older adults get most of the widely known screenings and vaccinations studied. This sizable group appears to be well-connected to preventive strategies and perhaps to health care services more generally. A smaller, but significant group (generally poorer and older it appears) is not receiving these screenings and vaccinations, and it





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might be interesting to delve further to see if folks who get one screening tend to get several.

Within this general perspective, there is likely a set of particular stories related to individual screenings. The low rate of hearing tests stands out, especially when we consider one in four adults over age 65 and at least one in three adults over 75 experience hearing loss, but only 20% of individuals who could benefit from a hearing aid actually use one. (See Infoaging.org's Hearing Information Center http://websites.afar.org/site/PageServer?pagename=IA_I_hear_home). And a flu story is pretty much a given each fall.

Possible messages

- An Ounce of Prevention/ An Apple a Day...

Whether it is hypertension, breast cancer or heart disease, the best way to treat these conditions is to prevent them in the first place. This particular message could also resonate well with a younger audience of older adults 50+.

- Listen up

Just 28% of our communities' older adults get an annual hearing test, yet national studies suggest that 2/3 suffer from hearing loss, and only 1/10 use a hearing aid. These hearing problems reduce older adults' ability to engage in a whole range of social interactions and cultural events and may lead to disengagement and depression.

- Flu kills; flu shots save lives

According to the Centers for Disease Control, 36,000 people die each year from the flu, 90% of whom are over 65. One shot each fall can mean the difference between life and death.

Possible story lines/promotional angles

- The Prevention Checklist

Work with local health providers or use resources from the Web to design and publish a brief checklist of screens and vaccinations for men and women 65+ (or 50+ depending on your data). Distribute these at grocery stores, doctor's offices, senior centers etc. and promote this to media around Christmas holidays... "Older adults, and not just Santa Claus, are making a list and checking it twice" to ensure they are doing everything they can to promote healthy aging." For human interest, identify a couple of people whose annual checkup revealed a) they are strong as an ox (even at 92) or b) a serious condition that was treated and is now under control. Or have folks who get all their screens submit their checklist as part of a Healthy Aging raffle or drawing with prizes from area businesses.

- Hearing: The Disability You Can't See

This could be pitched as a pretty straightforward health information story, pointing to the high levels of hearing loss, the low levels of screenings, and the negative consequences for older adults who are unable to hear and therefore participate actively in their families and communities. It could also include information about the latest research in fighting hearing loss or a review of the best hearing aids on the market.

- Get Your Flu Shots-Today

Work with a local paper to run a list of places where older adults can get their flu shots every day from October-February.

- Pick a Pair

Your community could target people of all ages by coordinating an intergenerational race/walk around National Healthy Aging Month (September) or National Senior Health Fitness Day (May 26) to draw awareness to

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healthy aging by practicing preventative health techniques. Match a child or younger adult with an older person to participate together in the race and learn about better nutrition, exercise and health.

COMMUNICATING ABOUT MENTAL AND PHYSICAL HEALTH

Indicator 12

Percentage of people 65+ who thought they needed the help of a health care professional because they felt depressed or anxious

Indicator 13

Percentage of people 65+ whose physical or mental health interfered with their activities, among those who one or more unhealthy days

Indicator 14

Percentage of people age 65+ who report being in good to excellent health

Indicator Summary

Taken most broadly, the data here present an image of older adults as physically healthy, psychologically strong, and admirably gutsy in the face of aging's slings and arrows. Nationally, 75% of older adults rated their health as excellent, very good or good. Approximately 90% of respondents did not report feeling anxious or depressed enough to seek mental health services. And among the 40% or so who said that they had "unhealthy days," nearly 3 out of 5 reported that these bad days never kept them from doing their usual activities.

Beneath this rosy picture, however, a significant minority in the national data—about 24%—reported health problems. This group tended to be poorer, living in isolation with few friends, non-White, and less-educated. Many of these same identifiers have turned up in

several other indicators as risk factors, as it were, for less than optimal aging. Supported by the well-documented health disparities data from the federal government, this may suggest that we are witnessing a "generation divided" between the elder "haves, found in so many car and pharmaceutical ads, and elder "have nots," whose lives are generally invisible to all but their families and the social service and other agencies that serve them.

Possible messages

- Depression: The Invisible Epidemic

Because depression often co-occurs in older adults with other serious illnesses, such as heart disease, stroke, diabetes, cancer, and Parkinson's disease, it is commonly mistaken as a normal side effect by both health care professionals and patients alike. According to the National Institute of Mental Health (NIMH), depression is not a normal part of aging, and should be treated when it co-occurs with other illnesses, as untreated depression can delay recovery from or worsen the outcome of these other illnesses (see NIMH information here: <http://www.nimh.nih.gov/health/topics/older-adults-and-mental-health/index.shtml>).

- Attitude Counts

Though most older adults are in very good health, even a significant majority of those who report having "unhealthy" days,





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refuse to let their aches and pains slow them down.

- A Generation Divided: The Underside of the Aging Revolution

Though a large and growing number of older adults are living healthy and vibrant lives, we must develop services and support for the significant and under-recognized minority of older adults in our communities and nation who are having a much tougher time.

Possible story lines

- Aging Is Not Depressing

The data here could provoke a provocative and productive discussion with the mental health community. There is also a significant communications opportunity. Given the low rates of depressed older adults receiving care, a full-bodied public awareness campaign—either with advertising or free media or both—could focus on the signs and symptoms of late life depression, the disturbing rates of suicide among older adults,⁴ the beneficial effects of exercise on depression,⁵ and/or hopeful new models of team care,⁶ which have recently been implemented in or near several AdvantAge communities in the states of California, Florida, Indiana, New York, and Washington. To help in this effort, you could ask the local media to run a set of stories about this “invisible epidemic,” help de-stigmatize the disease, and encourage older adults and their families to learn more about what constitutes depression, common treatments, and the latest research in the field. A local celebrity who has fought and overcome his or her depression could also serve as a spokesperson.

- Older Adults: On the Move

They say “old age is not for sissies,” and judging from the data in our communities, older adults are anything but wimps. Even those reporting unhealthy days are for the most part still able

to do what they need to do except a few days a month. This story could feature three older adults who— despite common conditions like diabetes, osteoporosis or even cancer—are up and at ‘em every day, working, volunteering, taking care of grandkids, gardening, doing sports, you name it. For some interesting background information, you might take a look at *Functional Performance of Older Adults* (E.A. Davis Company: Philadelphia, 2009), which sheds light on the current aging experience. This book notes that older adults are becoming more adaptive to living longer than previous generations and are capable of actively participating within their communities throughout.

- The Two Faces of Aging

As a general story about the AdvantAge Initiative data, you can pitch a story of the dual picture of older adults in your community. The majority of seniors represent the success story of the aging revolution—the increasing number of older people who are vital, contributing members of your community. Just as important is the much smaller group of older adults who are struggling with health, financial, and other issues. This story could gather data from a variety of indicators to support this bifurcated description, bolstered by examples of older adults who find themselves in the “still striving” or “struggling” camps. In addition to pitching the story to the media, this theme could be expanded into a community report including the AdvantAge data and several profiles of older adults in your area.

COMMUNICATING ABOUT PHYSICAL ACTIVITY AND VOLUNTEERISM

Indicator 15

Percentage of people age 65+ who participate in regular physical exercise

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Indicator 31

Percentage of people age 65+ who participate in volunteer work

Indicator Summary

Exercise is an excellent topic for the media and indeed to talk about with older adults in your community. Just about everybody knows that they should exercise, but as the national data suggest, about 30% don't do anything. There is a great deal of debate about how much exercise is enough. The Centers for Disease Control lists general guidelines for how much physical activity seniors should be getting.⁷

Voluntarism is another good communications opportunity with the media and general public. Voluntarism, like exercise, is correlated with successful aging and provides important community benefits. As many of you know, Mark Freedman and Civic Ventures have done a great deal of good work in this area, pointing out that older adults are one of the nation's only growing natural resources. If you haven't picked up his book (see below), you should, as it provides very powerful language around this issue.

Possible messages

- Move and live—well

Exercise is one of the most powerful predictors for healthy and successful aging, as well as for preventing or reducing declines from disability (See Rowe and Kahn, et. al. below).

- Getting off the couch helps

The biggest benefits of exercise accrue to those who go from sedentary to relatively modest activity.

- Exercise—at any age

Exercise has important physical and psychological benefits, even for the oldest old.

- Exercise—a four way street

It's not just about walking. Older adults should seek four types of activity—aerobic exercise, strength training, stretching and balance work.

- We need you

The problems are big; the need is great. Our community needs more older adults, who can make a difference and leave a legacy of caring and commitment.

- Do good, live well

Like a healthy diet and exercise, volunteering is a key component of successful aging.

Possible story lines

- Old age—A time to get moving

Recent survey data indicates that older adults are heeding the message about the importance of exercise—approximately half of seniors are exercising three or more times a week—better than the adult population as a whole (less than 40% are exercising enough according to CDC data). This story could suggest ways older adults could take the lead in improving general exercise rates with their families or friends or it could turn and point out that, despite the good news, approximately 25% of elders are still not getting the message.





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- Exercise—The community challenge

Recent survey data report that 1/4 of all older adults in our community never exercise. Nationally, rates of youth and teen obesity are skyrocketing. But before we start blaming lazy seniors and kids, what are ways that our community can work together to promote more activity among people of all ages?

- Do good, live well

Recent research has demonstrated that serving others is highly correlated with successful aging. Yet, 3 out of 4 older adults (or whatever the percentage) in our community do not volunteer. While healthy seniors may be eating right and getting their exercise, they may be missing a critical ingredient in the broader recipe for aging well. And here are few ways older adults can get involved.

- Revving the volunteer engines

The same generation that was inspired by John F. Kennedy continues to be called upon and encouraged to volunteer today. With the passage of the 2009 Serve America Act, Congress is counting on the time and talents of older adults by developing new opportunities where older adults can help address some of the country's biggest challenges. This story could identify several local older adults who have made a difference or are working to make a difference in their community.

- Senior solutions

Older adults are a vast untapped civic resource. Here are three dynamic do-gooders (you dig up the examples) who are leading efforts to make our community a better place for people of all ages. This can be tied into holiday stories around Thanksgiving, Christmas, Hanukah and Kwanzaa.

- We gotta ask

Independent Sector reports that older adults

who were asked to volunteer served at a rate four times that of those who weren't asked. Religious groups, social service agencies and nonprofit organizations must remember the old adage, "If you don't ask, you don't get." You could round up representatives of these groups who commit to asking at least one new older adult to volunteer each week.

Information Resources

Print and electronic materials on health

The Robert Wood Johnson Foundation's National Blueprint: Increasing Physical Activity Among Adults Aged 50 and Older. Available at: <http://www.rwjf.org/pr/product.jsp?id=15729>

Creating Communities for Active Aging by The Partnership for Prevention. Available at http://www.prevent.org/images/stories/Files/publications/Active_Aging.pdf

Infoaging.org's Exercise Information Center. Available at http://websites.afar.org/site/PageServer?pagename=IA_I_exer_home

Medline Plus's Exercise page. Available at: <http://www.nlm.nih.gov/medlineplus/exercisephysicalfitness.html>

Rowe, Jack, and Robert Kahn. *Successful Aging*. New York: Dell Publishing, 1998.

Community health and wellness programs

The California Center for Physical Activity (formerly California Physical Activity and Health Initiative) <http://www.caphysicalactivity.org/about.html>

Senior Wellness Initiative, The Colorado Trust <http://www.coloradotrust.org/publications/evaluation-reports?filter=Date&pagenum=4>

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Voluntarism

There are plenty of good organizations and Web sites that have lots of information about models of voluntarism. Here are a few:

- Civic Ventures Encore Careers program (<http://www.encore.org/>)
- Experience Corps (<http://www.experiencecorps.org/>)
- Senior Corps (<http://www.seniorcorps.gov/>)
- Coming of Age (<http://www.comingofage.org/>)
- Environmental Alliance for Senior Involvement (<http://www.easi.org/>)
- Literacy Volunteers of America, Inc. (<http://www.proliteracy.org/>)
- Samaritan House (<http://www.samaritanhouse.com/>)

Also check out, Mark Freedman's *Encore: Finding Work that Matters in the Second Half of Life*. (Public Affairs: New York, 2007.)

Finally, take a look at the Administration on Aging's Civic Engagement Initiative for a wealth of additional information (http://www.aoa.gov/AoARoot/AoA_Programs/Special_Projects/Civic_Engagement/index.aspx).

COMMUNICATING ABOUT AGING, ILLNESS CARE, AND PALLIATIVE CARE

Indicator 16

Percentage of people age 65+ with a usual source of care

Indicator 17

Percentage of people age 65+ who failed to obtain needed medical care

Indicator 21

Percentage of people age 65+ who know whether palliative care services are available.

Indicator Summary

In terms of Indicators 16 and 17, in the national data at least, there appears to be relatively little to talk about the data per se. Given the ubiquity of Medicare, all seems well enough. There may be other health or health care issues to talk about, particularly those related to the quality of care and prevention. The data here, however, would have to be augmented by additional inquiries into how older adults are experiencing the care they are receiving. The bigger health care story out there (and particularly in the media) relates to affordability, where there are a wealth of opportunities to get involved in the public discussion. We'll discuss these stories when we get to Indicators 18 and 19.

The palliative care data, however, do present a chance to educate folks about the availability of these services; especially given the amount of misinformation on this topic with the current conversation surrounding healthcare reform's supposed "death panels" and rationing of seniors' healthcare. A 2009 article in US News & World Report, "8 Facts





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to Know About Palliative Care: Misconceptions abound. Patients and families need not be afraid to ask for help,” separates fiction from the facts while explaining how to adopt such care.

According to the national data, fewer than one in four older adults knew about the availability of palliative care. Note here, that even fewer probably could recognize the term, “palliative care,” and that the survey question referred to hospice or end-of-life care. A good one-stop shop for background information is the “End-of-Life Care” section of Robert Wood Johnson Foundation Web site (<http://www.rwjf.org/pr/topic.jsp?topicid=1194>), where you will find links to the Center to Advance Palliative Care, Last Acts, and the Promoting Excellence in End-of-Life Care Initiative, among others.

Possible messages

- Because death isn’t optional

Palliative, end-of-life and hospice care can ease needless pain and suffering and provide dying people and their families the support and services they need, but too often don’t know about.

- What do you mean, palliative care?

You may have heard of hospice or end-of-life care, but a range of agencies and specialists practicing “palliative care” can ensure very sick people can have less painful lives and more dignified deaths.

- Palliative is not the equivalent of Painful

The best time to ask about palliative care is not after an individual is already experiencing discomfort, but beginning with any new diagnosis of a serious illness or when admitted to the hospital, according to Donald Shumacher, president and CEO of the National Hospice and Palliative Care Organization.

Possible story lines

- Palliative Care: A Good Life, Up Until the End

By linking a local agency or hospice with the larger movement to improve death and dying nationwide, you could pitch a general story about palliative care--what it is and why it is important. A case story of someone who has a terminal illness, but is still communicative and appreciative of the services she or he is receiving could provide the hook. Testimonials from the children of parents, both who had suffered needlessly and who had benefited from the latest best practices, could round out the pitch.

- Changing Attitudes

Another related story could focus on attitudes about death, dying, and end-of-life care. This could focus not so much on the structural reasons (e.g., Medicare reimbursement, etc.) underlying folks’ reluctance to take advantage of hospice and palliative care alternatives, but clinicians’ difficulty in talking about death and dying and patients’ and families’ challenges in confronting end-of-life issues. This pitch could include practical suggestions (including a discussion of advanced directives, DNR orders, etc.) for people facing these problems, which would help them speak honestly and compassionately and ensure dying people receive the care they want at the end-of-life.

- Angel(s) of Mercy

You could also frame a similar kind of educational story on a person or two in the community who volunteers for a palliative care agency or hospice, focusing on her or his learnings, as well as describing the benefits of these services for terminally ill people. A local doctor or health authority who cares about this issue or has expertise in the area would also lend credibility to this human interest angle.

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COMMUNICATING ABOUT HEALTH CARE AFFORDABILITY

Indicator 18

Percentage of people age 65+ who had problems paying for medical care

Indicator 19

Percentage of people age 65+ who had problems paying for prescription drugs

Indicator 20

Percentage of people age 65+ who had problems paying for dental care or eyeglasses

Indicator Summary

These data suggest that people in our communities, for the most part, are able to pay for their basic health care services, although this attitude has shifted within the last year due to the struggling economy and controversial debate surrounding healthcare reform. According to an AARP-sponsored survey taken in December 2008, 55 percent of adults over the age of 45 said they are concerned about their ability to pay for their healthcare costs in the next 12 months.

Further under the radar are two quality of life indicators—dental and visual health. In most communities there were more than twice as many people who couldn't afford dental care or eyeglasses than who couldn't afford drugs. Likely, the drugs may be needed to forestall life-threatening conditions, but the data do provide an opening, it seems, to talk about the importance of helping older adults maintain function, as well as prevent disease and disability, as a key element in promoting healthy aging.

Possible messages

- More older adults making tough choices on health care

For a growing number of older adults, living on a budget often means choosing between needed drugs and services and the rest of life's necessities.

- Health care for older adults: It's about function

Addressing older adults' health care needs means ensuring they get the services (e.g., optometry and dental care) that sustain their quality of life and ability to function effectively in the community.

- What about MY Medicare?

With healthcare reform – and the future of Medicare – a hot topic, many older adults and Boomers are anxious to learn what will become of the system that has served them so well.

Possible story lines

- The Time to Save for Health Care Costs is Now
Indeed, lengthening life spans, declining retiree health benefits, and rising insurance premiums suggest folks may need to save hundreds of thousands of dollars to pay for out-of-pocket health costs in retirement. And this does not include long-term care costs. A recent report from the Employee Benefit Research Institute, *Savings Needed for Health Expenses in Retirement* indicates that men age 65 in 2009 retiring this year will need anywhere from





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\$68,000–\$173,000 in savings to cover health insurance premiums and out-of-pocket expenses in retirement if they want a 50–50 chance of being able to have enough money, and \$134,000–\$378,000 if they prefer a 90 percent chance. With their greater longevity, women will need more: a women retiring at age 65 in 2009 will need anywhere from \$98,000–\$242,000 in savings to cover health insurance premiums and out-of-pocket expenses in retirement for a 50–50 chance of having enough money, and \$164,000–\$450,000 for a 90 percent chance.

Many individuals will need more money than the amounts cited in this report because this analysis does not factor in the savings needed to cover long-term care expenses, nor does it take into account the fact that many individuals retire prior to becoming eligible for Medicare.

The data from your AdvantAge survey could be put in the perspective of this broader story. The EBRI report, and other information on health care costs, could be the centerpiece of a provocative informational meeting, helpful for Boomers and older adults alike. With local financial planning and health experts and a couple of local older adults telling their stories, this meeting could provide a very good event for the media. You might even set up a monthly series on preparing for retirement that focused on the financial, health and wellness, and psychosocial aspects of aging well.

- Older Adults Get “Sense”-able

While all of us worry about the serious diseases of aging—Alzheimer’s to osteoporosis, cancer to heart disease—we also have to protect our senses, particularly our vision, hearing and taste, including oral health, if we want to age successfully. To build this story, start with one-page information sheets on these topics (MedlinePlus, from the National Institutes of Health and the National Library of Medicine (<http://medlineplus.gov/>) is a good source). Use

the data from your indicators, as well as those on hearing screenings to provide a sense of the scope of the problem, focusing on affordability as one main barrier to sound preventive health for older adults. Any state, local or nonprofit agencies that promote these “sense”-able measures could be contacted to provide additional resources and could be engaged to create a regular series of workshops. Alternatively, pitch the larger story of a “focus on function” to local writers and reporters on senior life, with three parts on vision, hearing and oral health. Point to the very real and negative outcomes— isolation, deteriorating relationships, poor nutrition, linked diseases, etc.— associated with problems in these areas. For the reporter, also find older adults in your area who can talk to both the benefits of addressing these functional topics, as well as the dangers of ignoring them.

COMMUNICATING ABOUT TRANSPORTATION

Indicator 22

Percentage of people age 65+ who have access to public transportation

Frequency of use of public transportation in the past two months

Means of transportation used most frequently

Indicator Summary

This indicator is interesting, as it has demonstrated much broader variation among communities than any other previous data point. This is not surprising as transportation patterns differ widely in urban, suburban and rural areas. Transportation, driving and mobility have a variety of important effects on older adults’ quality of life. Particularly in communities where there are few accessible public transportation options, loss of driving

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privileges is associated with a whole swirl of bad outcomes. If we want to promote communities where older adults are active, engaged and connected, we have to find ways to ensure they can get around.

Possible messages

- Let's keep older adults moving

Higher levels of community activity and social engagement are associated with successful aging.⁸ Elder-friendly communities must ensure that older adults have access to the transportation they need to live in their homes and make a contribution to their communities.

- Let's keep older adults safe

Driver safety courses, medical check-ups, car safety retrofits, and better signage are just a few ways we can enable older adults to keep driving and protect them and the community.

Possible story lines

- Driving safety awareness

Nationally, 75% of older adults drive. To the media, this may sound like a lot, and therefore, a story that brings this data to their attention—linked to courses, guidelines, local signage initiatives or other resources focused on older driver safety—may get coverage. Identifying older adults in your community who have used these resources and have been able to drive more safely would round out this pitch nicely.

- Neighbor helping neighbor or Riding in cars with boys (or girls)

In suburban and rural communities where there is relatively little access to public transportation (and even in urban areas as well), non-profit ride services are often interesting transportation alternatives that many older adults may employ. (See a report from the Beverly Foundation of Pasadena, CA, "Supplemental Transportation Programs

for Seniors." For a list of programs available by state, visit <http://www.seniordrivers.org/notdriving/notdriving.cfm?button=profiles>.

Volunteer drivers use their own cars to take older people to doctor's offices, pharmacies, shopping, social engagements, hair appointments, etc. With the data from the survey as background, you can build a nice story here focusing on one or two driver-older adult pairs, where the older person gets out and about, and the younger person learns something about the history of the community or about aging or just connects with a neighbor. Of course, sometimes the younger person is 65 or 70, so an elder-helping-elder angle may be possible here as well.

- Public transportation: The underused elder-friendly service

In several communities, large percentages of residents report that they had access to public transportation, but only tiny fractions actually use it. This data could prompt a story about the accessibility limits of the current transportation system for older adults and particularly efforts to improve this access. A couple of cases of older people stuck in their homes because the system doesn't work for them, particularly if a small change would make a difference, would provide the human angle on this story.





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- Public transportation: The ultimate elder-friendly amenity

Conversely, if significant numbers of older adults are using your public transport, this may suggest a point of community pride, an example of how your community is a good place for older adults and people of all ages. As part of this story, you could identify examples of older men and women who are using public transportation to take advantage of a wide sampling of your city's cultural resources (with associated senior discounts) and/or make important civic or voluntary contributions.

COMMUNICATING ABOUT ACTIVITY AND SOCIAL ENGAGEMENT

Indicator 27

Percentage of people 65+ who socialized with friends or neighbors in the past week.

Indicator 28

Percentage of people 65+ who attended church, temple, or other in the past week.

Indicator 29

Percentage of people 65+ who attended movies, sports events, clubs or group events in the past week.

Indicator 30

Percentage of people 65+ who engaged in at least one social, religious or cultural activity in the past week.

Indicator Summary

Social engagement is a critical element of healthy and positive aging. Rowe and Kahn in *Successful Aging* note the “critical importance of connectedness in the lives of older people.” They see this engagement as an important mechanism for providing needed social sup-

ports for older adults. Strawbridge and Wallhagen, who have analyzed data from older adults in the Alameda County (CA) Study, have found that successful aging is active aging—physically, intellectually and socially. Older adults, their research suggests, would do well to seek ways to get out and about—to see (or be seen) by friends and neighbors—young and old. Elder-friendly communities, therefore, have an important stake in ensuring they make a wide variety of social, athletic, cultural and other activities accessible and available to people of all ages.

From this perspective, some of the data here are troubling. Nationally, approximately 35% of older adults don't socialize with friends or neighbors each week. While almost 90% of people engaged in one or more social, religious or cultural activity on a weekly basis, about one in nine doesn't engage in any. Even on the positive end of the spectrum, only approximately one in four participated in three or more activities. This seems to suggest that there is the potential at least to encourage many more older people to be much more active and to make our communities significantly more engaging through a wider variety of accessible activities.

Possible messages

- Get involved, get connected, get healthy

While engagement is correlated with successful aging, social isolation is associated with a wide variety of bad outcomes—from disease, mental illness, early death. So just as you might pump iron to build your physical strength, consider ways to make new or connect to old friends, and beef up the health of your social network.

- Are we helping older adults connect?

The flip side of urging older adults to connect is to work with local service providers,

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businesses, political and other leaders to ensure that older folks know about the wide range of activities available to them and that these activities are accessible and responsive to the interests of older adults.

Possible story lines

- Shall we dance?

When you think about it (or at least when we think about it), dancing is the perfect healthy aging activity. It is a social event, physical exercise, a cultural expression, and a whole lot of fun. Check around your community. Is there a place where older adults dance on a regular basis? Could you start one? The media would love this story, especially if there is some kind of sweethearts' dance that involves older people around Valentine's Day.

- The spirit of successful aging

Several studies published in peer-reviewed journals have shown that religious faith and participation in organized religion offer benefits for healthy aging. People with a strong personal faith who regularly attend religious services generally have lower blood pressure; are less likely to suffer from depression; have a greater sense of well-being; have stronger immune systems; and may live up to 23% longer.⁹ With this research as background, a good story here might focus on a few older folks who go to church, synagogue or mosque regularly and who use this religious affiliation to stay connected to the community more broadly (e.g., through social events, volunteering, visiting, etc.).

- Older adults get athletic

Link a local Senior Olympics event or even the senior flights in local tennis or softball tournaments, swimming or running races with the broader movement towards healthy aging in your community. You can focus not only on the benefits of the exercise, but also on the connection and relationships fostered through

these competitions and teams. Again, identify an individual or two to focus on, perhaps people who have overcome physical challenges or other losses. A good book that describes a whole host of these kinds of stories is *The New Face of Aging*.¹⁰

COMMUNICATING ABOUT WORKING AND HELPING COMMUNITIES

Indicator 32

Percentage of people 65+ who say they live in "helping communities."

Indicator 33

Percentage of people 65+ who are currently working/not working.

Indicator Summary

From a communications perspective, these are essentially separate topics.

In 2004, in terms of work, a significant majority of older adults – 85% – were no longer working full-time or part-time. However, significant minorities of these “retirees” – 24 % – would like to be working for pay. This is a significant percentage, one that is likely higher today, especially following the 2008 crash in retirement savings. Exploring this issue further with





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older adults and employers in your communities could create a “win-win,” where older adults are connected to useful work, needed income, and community life in general, while employers tap into a reliable new employee pool.

A few organizations/programs that currently address the issue of working older adults and seek to provide “second careers” for this target audience include Civic Ventures’ Encore Careers program, which provides comprehensive resources and information that help individuals transition to jobs in the non-profit world and the public sector. IBM has taken this process a step further with their transition2.org web site, which serves as a job placement resource, connecting potential job seekers with paid positions in the non-profit, government and education sectors. Civic Ventures Founder Marc Freedman has popularized the notion of a second career with his book, *Encore: Finding Work that Matters in the Second Half of Life*.¹¹

The “helping communities” indicator may be a proxy for social capital in your community. The central premise of social capital, according to Robert Putnam, the Harvard sociologist who popularized the term in the article and book *Bowling Alone*,¹² is that social networks have value. “Social capital,” writes Putnam, “refers to the collective value of all “social networks” [that people know] and the inclinations that arise from these networks to do things for each other (which Putnam calls ‘norms of reciprocity’).” This kind of social glue is critical to developing strong communities in which people of all ages can thrive. It is also hard to imagine an elder-friendly community that was not experienced as a “helping community” by very high majorities of older adults.

As an aside, according some early data from various communities around the country, northern urban areas appear to be less

helping than their southern, suburban or rural counterparts. Maybe there is more social capital. Maybe it’s the weather. My wife, who is from North Carolina, says she thinks it’s that people from the South, at least, are just nicer. As a native Northerner, I try to argue with her, but I fear that, as usual, I just proved her point.

Possible messages

- Put ‘em to work

Significant numbers of older adults want or need to work, but don’t. Older workers may be an under-tapped resource that will likely grow in the decades ahead as aging boomers edge away full-time employment.

- Connect and thrive

Community engagement is critical to the health and well-being of people of all ages. How can we come together to make sure our community is more welcoming and “helpful”?

Possible story lines

- Finding the good life through meaning/purpose

The idea of encore careers is becoming more relevant with the changing economy, coupled with the longevity of America’s Boomer population. Now, more than ever, people are faced with the challenge of trying to extend their hard-earned life savings into their retirement, and as a result many stories feature tips from families or individuals who have been able to successfully do so. You can locate one or more of these individuals within your community to localize this story.

- Second careers, lifetime passions

Poke around a little, and you will likely find people in their 60’s and 70’s who have reoriented their lives to start new businesses or pursue passions that have simmered for decades. A former All-American archer, 60-

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year old Phyllis Shipman, a retired elementary school principal from Honolulu, competed for a spot on the US Olympic archery team. An Air Force technician in the Korean War, then 66-year-old Len Lovette, sold his vacuum cleaner business, trained for his license, and became a commercial pilot flying charters around the Southeast. Dig up a few of these local stories, and back them up with national data around changing trends in retirement (see the Employment Benefits Research Institute's 2009 Retirement Confidence Survey (<http://www.ebri.org/rcs/2002/>)). This study found that more workers are planning to supplement their income in retirement by working for pay. The percentage of workers who plan to work after they retire has increased to 72 percent in 2009, up from 66 percent in 2007.

A good place to identify individuals who have pursued their passions in later life would be Civic Ventures' Purpose Prize winners, who have been highlighted for their accomplishments in their encore careers (You can find a list of current and past winners at <http://www.encore.org/prize>).

Also, you might tie in a local Senior Community Service Employment Program (SCSEP), which places low-income older adults in nonprofit agencies, where they have a chance to hone skills while they look for full-time work. There are sites in all 50 states and five U.S. territories. For more information: <http://www.doleta.gov/seniors/>. Add the AdvantAge Initiative percentages of older adults who want to work, but don't into the mix, and you have a story.

- Want a happy retirement? Help somebody. Giving is good for you. Researchers William Strawbridge and Margaret Wallhagen, writing about the Alameda County (CA) Study, an ongoing survey of nearly 900 adults 65-99, found that volunteering often was one of six key predictors for self-reported successful aging (Beilenson et al., *Aging Successfully*:

Findings from Research Sponsored by the AARP Foundation. AARP Foundation: Washington, DC, 2002).

Volunteerism is also an important contributor to social capital, the connections that bind people together and strengthen the places they live. Author Robert Putnam notes that, "social capital is really a very strong predictor of individual happiness and quality of life in a community, much more so than financial status. If you had to choose between a place rich in money and a place rich in social capital, I'd pick the place that has more social capital." (Register Herald, Beckley, W. VA.: 5.17.2003).

To build these ideas into a story, gather three or more examples of stellar older adult volunteers and/or local community service programs that are connecting (particularly older) people with one another socially, either formally or informally. A civic leader should be available to make a more general call for people to get out and "help." More broadly, there may be opportunities to gather community, civic, political, business leaders and residents to consider the "social capital" reflected in your AdvantAge data and to promote community-wide efforts to encourage helping, volunteerism and civic participation.





FOOTNOTES

1 See Hastings SN, George, LK, Fillenbaum, GG, Park, RS, Burchett BM, Schmader KE. "Does lack of social support lead to more ED visits for older adults?" *Am J Emerg Med.* 2008 May; 26(4): 454-61.)

2 See e.g., Sorkin D, Rook KS, Lu JL. "Loneliness, lack of emotional support, lack of companionship, and the likelihood of having a heart condition in an elderly sample." *Ann Behav Med.* 2002 Fall; 24(4):290-8.

3 See the University of Washington's PEARLS project for a discussion of depression in older adults, noting social isolation as a "high-risk" indicator." <http://www.pearlsprogram.org/>

4 <http://www.nimh.nih.gov/health/publications/older-adults-depression-and-suicide-facts-fact-sheet/index.shtml#treatments>

5 http://websites.afar.org/site/PageServer?pagename=IA_d_depress_11_r_exer

6 See Project IMPACT, <http://impact-uw.org/about>

7 See <http://www.cdc.gov/physicalactivity/everyone/guidelines/olderadults.html>

8 See Rowe, John, and Robert Kahn, *Successful Aging.* New York: Dell, 1998.

9 See http://websites.afar.org/site/PageServer?pagename=IA_feat9

10 See Magee, Mike, and Michael D'Antonio. *The New Face of Aging.* New York: Pfizer/Spencer Books, 2001.

11 See Freedman, Marc. *Encore: Finding Work that Matters in the Second Half of Life.* Philadelphia: Perseus Books Group, 2007.

12 See Putnam, Robert. *Bowling Alone: The Collapse and Revival of American Community.* New York: Simon & Schuster, 2000. <http://www.bowlingalone.com/>