Aging in Place

A collaboration among Geisinger Commonwealth School of Medicine, Keystone College, King's College, Lackawanna College, Luzerne County Community College, Marywood University, Misericordia University, Penn State Wilkes-Barre, Penn State Scranton, The Wright Center, University of Scranton & Wilkes University
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Executive Summary
As the baby boomer generation enters their retirement years, providing them with safe and affordable housing may present a challenge. Most older adults will want to remain in their homes for as long as they possibly can; however, in order to make this a possibility, many homes may need serious and costly upgrades.

In Northeastern Pennsylvania, there is not only a higher percentage of older adults than Pennsylvania and the United States as a whole, but also a much older housing stock. Older homes may cost more to maintain and modify to meet the needs of older adults, and the risk of blight brought upon by poor maintenance (itself a consequence of poverty and/or physical inability to do work) is a threat to both the safety of the homeowner and the overall experience of neighbors in that neighborhood.

Older adults are also at a higher risk of being disabled, and disabled older adults may require some specific modifications. Another group with a greater need are those in poverty—older adults in poverty may be more likely to let their homes turn into blighted properties if they do not have the funds to support fixing the homes, and are less likely to install modifications for the same reason.

Older homeowners staying in their homes also benefit the community. Since retired people often volunteer to fill their time, they contribute greatly to the community they live in. Older adults also contribute by spending their money locally and by donating to community organizations. The results of aging in place in their own home and community may also contribute to a greater sense of mental health for older adults. When older adults are lonely or depressed, they are more likely to fall. These falls can be costly, and in worse scenarios, they can be fatal.

The best solution is for a strengthened focus on education and action for homeowners looking to age in place. Older homeowners should be informed of how their home can be modified to accommodate their individual needs and why safety should be a concern. Action can be taken to create programs in both the public and private sectors that reach out to help fund home repairs or modifications in order to make homes safer and reduce the risk of blight. As always, collaboration between programs with common goals may be the ideal way to address the multi-faceted issue of aging in place. Interested organizations may include home ownership centers, community revitalization organizations, nursing- and therapy-related organizations, elderly interest organization, and others.
Introduction
Aging in place is the ability to live in one’s own home and community safely, independently, and comfortably, regardless of age, income, or ability level. This is the ideal living arrangement for many older adults in Lackawanna and Luzerne Counties; however, some challenges still exist for seniors with low incomes, those who live in older homes, or those who live alone or without help.

The purpose of this research is to identify the need for seniors in Lackawanna and Luzerne Counties to be able to age in place safely. This paper will highlight some of the current challenges older adults face in their homes, and offer solutions to prepare for the higher-than-average population of adults 65 and older that are projected for the two counties in the next 20 to 30 years.

Research Methods
The data compiled is from secondary sources, primarily the United States Census and AARP studies. It is brought together in such a way to show the full scope of aging in place and how funding those programs serves to benefit not just older adults, but all members of the community.
Why Age in Place?
Many older adults have lived in their homes for years or decades. In many cases, they have put work into their homes to suit their needs and make them as comfortable as possible. They may know their community and their neighbors, and may feel very attached to their home. Even if they are safe, relatively active, and in good health, they may still elect to choose different housing options as they age. For example, they may want to downsize to a smaller apartments to save money, or they may be worried about maintenance and upkeep in their current homes becoming too difficult or expensive. However, according to a 2010 AARP study, approximately 90 percent of homeowners aged 65 or older want to age in their homes, and 80 percent believe that they will live in their homes for the rest of their lives.¹

There are many challenges for older adults wishing to age in place, namely safety and financial security. According to the US Center for Disease Control and Prevention, one in four Americans over the age of 65 fall every year. These falls are the leading cause of fatal injuries in older adults, and the most common cause of non-fatal trauma-related hospital trips. Additionally, the report states that “the financial toll for older adult falls is expected to increase as the population ages and may reach $67.7 billion by 2020.” Hospital trips caused by falls are costly burdens to older adults, especially those living on fixed incomes. Improving their home safety to help reduce the risk of a fall will be beneficial to their overall health and financial stability. Additionally, when an older adult is struggling financially, they may be less able to invest or needed renovations or basic upkeep of their home. This can result in blight, which is linked with lower property values and potentially making homes less safe to inhabit.

Marcella and Matthew (above) have been married for over 50 years. However, recent health problems have limited their mobility. Although their home had a first floor bathroom, difficulties were presented as it had no grabbers, and was too narrow for a walker. These changes greatly increased safety and mobility.
Aging Population Data

2016 Census Estimates Quick Facts

Of all Lackawanna County citizens aged 65+:
- 49.1% live alone
- .7% are responsible for their grandchildren
- 22.9% have veteran status
- 36.6% have a disability
- 16.6% are in the labor force
- 74.2% own their homes
- 30.2% spend 30% or more of income on housing needs
- 9.1% live below the poverty level

Of all Luzerne County citizens aged 65+:
- 50.2 % live alone
- .8% are responsible for their grandchildren
- 22.9% have veteran status
- 37.3% have a disability
- 16.6% are in the labor force
- 75.5% own their homes
- 28.5% spend 30% or more of income on housing needs
- 9.0% live below the poverty level

Harvard University’s report “Projections and Implications for Housing a Growing Population” states that by 2035, one in three heads of households in the United States will be aged 65 or older. These population trends can be seen in Lackawanna and Luzerne Counties, where by 2030 almost a quarter (24.6 percent) of the population in these two counties will be aged 65 or older (24 percent of all Lackawanna County residents and 25.02 percent of all Luzerne County residents).
The amount of citizens in the United States expected to be 65 or older in the year 2030 is about 21 percent. The 2016 Census Estimates show that 18.8 percent of all citizens in Lackawanna county are 65 years of age or older, 14 percent are considered “future seniors” (aged 55-64), and the remaining population, 67.2 percent are under 55 years of age.

In neighboring Luzerne County, 18.9 percent of all residents are aged 65 or older, 14.7 percent are between the ages of 55-64, and the remaining 66.4 percent of the population is younger than 55 years old.

In both counties, there are more women aged 65 or older than there are men. In Lackawanna County, 58.3 percent of adults 65+ are women, while 41.7 percent are men. In Luzerne County, that percentage is almost identical, with 58 percent of this specific population being women and 42 percent being men. This can be attributed to the known medical and social aspects that make it more likely for women to live longer than men. Additionally, almost one-third of the older population in both counties are made up of widows or widowers: 29.7 percent in Lackawanna County and 29.6 percent in Luzerne County have lost a spouse.

These trends are already higher than national averages: Census estimates from 2016 put the number of adults 65 and older at 18.8 percent of the total population of both Lackawanna and Luzerne Counties, while being 16.7 percent of Pennsylvania’s population and 14.5 percent of the United States population. Not only do these numbers change drastically every year, but they support the following: the percentage of the older population is growing, and more so the two-county region than the rest of the state and country respectively.

The following figure shows the projected growth of the population 65 and older in the two counties. The number of older adults is expected to grow until it levels out between 2030 and 2040. The figure below illustrates this trend.
Aging Population - 65+

<table>
<thead>
<tr>
<th>Year</th>
<th>Lackawanna</th>
<th>Luzerne</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>37,895</td>
<td>57,595</td>
</tr>
<tr>
<td>2020</td>
<td>46,385</td>
<td>70,227</td>
</tr>
<tr>
<td>2030</td>
<td>54,977</td>
<td>83,640</td>
</tr>
<tr>
<td>2040</td>
<td>55,198</td>
<td>84,497</td>
</tr>
</tbody>
</table>

This trend is affecting the country as a whole - this is the aging arch of the “baby boomer” generation, or those born between the early- to mid-1940s and the early- to mid-1960s when birthrates were at a historic high. The baby boomer generation is larger than any of the subsequent generations. As such we can see some decrease in the aging population based on those that are currently in the 55 to 64 age group.

Housing Data

In general, the housing stock of the two county region is older, typical of many industrial regions in the Northeastern United States. Over 39 percent of homes in Lackawanna County were built in 1939 or earlier, while nearly 36 percent of homes in Luzerne County were built during the same time.

It should be noted that information in the following charts is derived from 2016 data, while the last data range is “built 2014 or later.” There were an estimated 105 homes built in Lackawanna County and 44 homes built in Luzerne County during that time.

Homes Built in Lackawanna County by Year

Homes Built in Luzerne County by Year

Aging Population - 55-64

<table>
<thead>
<tr>
<th>Year</th>
<th>Lackawanna</th>
<th>Luzerne</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>28,645</td>
<td>43,035</td>
</tr>
<tr>
<td>2020</td>
<td>30,478</td>
<td>46,664</td>
</tr>
<tr>
<td>2030</td>
<td>25,127</td>
<td>38,916</td>
</tr>
<tr>
<td>2040</td>
<td>24,625</td>
<td>33,630</td>
</tr>
</tbody>
</table>
The national percentage of homes built before 1939 is 13 percent, and in Pennsylvania, these homes constitute 26.5 percent of all homes. In Lackawanna County, 39.4 percent of homes were built in 1939 or earlier and in Luzerne County, this is true of 35.7 percent of all homes. Just as the homes have stood for a long time, many of the homes’ tenants have been living there a long time. In Lackawanna County, a combined total of 41.9 percent of the population moved into their homes sometime before 1999. In Luzerne County, that percentage is 43.8 percent. The breakdown of these percentages can be seen in the figures to the right.

Poverty Data

A major challenge older homeowners face in maintaining the safety of their homes is cost. Some amenities that are required for safety, such as retrofitting bathrooms or installing ramped entryways to replace steps, could be costly. Many retired citizens rely on social security and other assistance programs to meet their needs after retirement, especially if they are unable to work due to disabilities or health problems or if they do not have a large amount of savings.

Year Householder Move in: Lackawanna

<table>
<thead>
<tr>
<th>Year Householder Move in: Luzerne</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 2015 or later</td>
</tr>
<tr>
<td>□ 2010-2014</td>
</tr>
<tr>
<td>□ 2000-2009</td>
</tr>
<tr>
<td>□ 1990-1999</td>
</tr>
<tr>
<td>□ 1980-1989</td>
</tr>
</tbody>
</table>

It should be noted that this data only considers income and household size when determining poverty status. An individual over the age of 65 living alone is considered to be in poverty if their income is less than $11,367 a year, for two adults over 65 the threshold is $14,342. That number is $16,275 when the household is one adult over 65 and one child under 18. These calculations do not account for individual costs like rent, medical issues, disabilities, or other dependents a person may have, or regional variation in cost of living. Therefore, there may be more people in need than the number accounts for. Additionally, since the threshold is set so low, even those who make more than what is considered to be in poverty by the federal government may not have enough money to pay for modifications or repairs that could be costly.
The U.S. Census Bureau 2016 estimates found that in Lackawanna County, the median selected monthly income costs for a home without a mortgage were $542, while the costs for a home with a mortgage were $1,294. In Luzerne County, it costs homeowners without a mortgage a median amount of $482 a month to maintain the home, and $1,209 for homeowners with a mortgage. 5 This number includes “the sum of payment for mortgages, real estate taxes, various insurances, utilities, fuels, mobile home costs, and condominium fees” and is used to determine excess housing costs, which many government agencies agree is over 30 percent of monthly income. 6 This means that an older adult in Luzerne County, even with their mortgage paid off, must earn at least $1,420 a month (or $17,040 a year) to live in a home without spending excess income on it. This could become a challenge for the over 6,000 older adults who live in poverty in Luzerne County making less than $12,000 a year. The struggle to remain in and maintain their homes could be difficult for those that have paid off their mortgage, and even worse for those who still have mortgage payments to make. Households headed by someone 65 or older have a mean earnings of $39,055 in Lackawanna County and $38,884 in Luzerne County, and these figures represent about one-third of older adults. Over 90 percent of older adults in both counties receive Social Security benefits; the mean income from those benefits are $19,027 in Lackawanna County and $18,604 in Luzerne County. 7 In Pennsylvania as a whole, earnings for older adults have a mean of $48,706 and mean Social Security income of $20,231. Also, it is important to note that the earnings mentioned are not mutually exclusive. Many older adults have a job and collect social security benefits as well. Other forms of income include cash assistance, retirement income, and supplement security income.

<table>
<thead>
<tr>
<th></th>
<th>Lackawanna</th>
<th>Luzerne</th>
<th>Pennsylvania</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approximate Mean Earnings per Month for Adults 65+</td>
<td>$3,255</td>
<td>$3,240</td>
<td>$4,059</td>
</tr>
<tr>
<td>Approximate Mean Social Security Benefits for Adults 65+</td>
<td>$1,586</td>
<td>$1,550</td>
<td>$1,686</td>
</tr>
<tr>
<td>Approximate Median Housing Cost per Month (without Mortgage)</td>
<td>$542</td>
<td>$482</td>
<td>$503</td>
</tr>
<tr>
<td>Approximate Median Housing Cost per Month (with Mortgage)</td>
<td>$1,294</td>
<td>$1,209</td>
<td>$1,426</td>
</tr>
</tbody>
</table>
Renters

The number of households of renters 62 or older who rent a home were estimated for 2015 from the Department of Housing and Urban Development. These estimates also gave the number of rented homes with “conditions.” A household “with conditions” is defined as having at least one of the following: lacking complete plumbing facilities, lacking complete kitchen facilities, with more than 1.01 persons per room, and selected monthly owner costs greater than 30 percent of household income, or gross rent as a percentage of household income greater than 30. The table below shows Lackawanna County’s renters age 62 or over.

<table>
<thead>
<tr>
<th>Lackawanna County: Renters age 62 and over</th>
<th>Household income by persons in the household and percent of homes with a condition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
</tr>
<tr>
<td>Total</td>
<td>7,710</td>
</tr>
<tr>
<td></td>
<td>44.2%</td>
</tr>
<tr>
<td>1-person</td>
<td>5,630</td>
</tr>
<tr>
<td></td>
<td>48.8%</td>
</tr>
<tr>
<td>2-person</td>
<td>1,690</td>
</tr>
<tr>
<td></td>
<td>28.4%</td>
</tr>
<tr>
<td>3-person</td>
<td>220</td>
</tr>
<tr>
<td></td>
<td>38.6%</td>
</tr>
<tr>
<td>4-person</td>
<td>95</td>
</tr>
<tr>
<td></td>
<td>36.8%</td>
</tr>
<tr>
<td>5+ persons</td>
<td>75</td>
</tr>
<tr>
<td></td>
<td>80.0%</td>
</tr>
</tbody>
</table>

Source: HUD

Similar estimates are provided for Luzerne County. The total percent of homes with conditions are similar for the counties, both above 40 percent for all renters 62 and over, but not reaching above 50 percent.
A noticeable decline in the share of homes with conditions is seen as income rises, in both counties. Renters with lower income are at increased risk of renting a home with at least one of the conditions described above.

Lackawanna County has over 7,700 households of renters ages 62 or over, and just under 45 percent of them rent a home with at least one condition. Within the lowest income level, less than $25,000, a disproportionate share of households with conditions are from this income level: nearly 60 percent. In Lackawanna County in 2015, all 4 and 5 person households of renters ages 62 and over with incomes of $25,000 or less rent homes with at least one condition.

For Luzerne County, a similar trend is apparent. Luzerne County has just under 11,000 households of renters ages 62 or over, and just over 41 percent of these rent homes with at least one condition. Similar to Lackawanna County, lower income levels have a disproportionate share of rented homes with a condition.

Disabled Population

While aging in place refers specifically to older populations, many of the same principles can be applied to people of different abilities. Additionally, older adults with various disabilities may have more specific needs than other members of the aging population.

![Graph showing percentage of residents with disability](image-url)

The graph illustrates that a person above the age of 65 is more likely to have a disability, which may be cause for some additional attention when considering aging in place.
Literature Review

The data shows a crossroads: in the near future, the population will be significantly older, many of the homes available are already older and may not be suitable for those with disabilities, and many older adults would prefer to stay in their homes for as long as they can. Many issues arise from this dilemma, with the heart of concern being older adults’ physical ability to complete maintenance in or around their homes, those who are retired or unable to work being able to finance their stay in their homes, and the safety issues that old homes could pose for older adults looking to age in place.

According to Harvard’s Joint Centers for Housing Studies report, Projections and Implications for Housing a Growing Population, demand for accessible housing is sure to rise as the baby boomer generation ages. Only 3.5 percent of American households are equipped with three critical features of accessible homes: single-floor living (having a bedroom, bathroom, and kitchen all on the base floor of a home to eliminate the need for steps), extra-wide hallways (good for wheelchairs and walkers) and zero-step entrances (no outdoor stairs or the presence of a ramp to enter a home.) This is true for the country as a whole, but in regards to Lackawanna and Luzerne Counties, we do not have the specific data.

Many homes will need to be modified to accommodate the needs of aging adults; however, many adults will not have the funds to pay for these changes. In Lackawanna County, 9.1 percent of adults 65 and older live below 100 percent of the poverty level, and in Luzerne County, 9 percent of older adults live below the poverty level. Even if these percentages of the population remain consistent, the rising population will still cause more demand for suitable housing and means for adults to age in place.

The report also mentions that homeowners living alone are expected to be more prevalent in the next twenty or so years. The older the homeowner is, the more likely they are to live alone (being widowed, divorced, having family members move further away, etc.) Single homeowners have less income and higher rates of disabilities when compared to their married/coupled counterparts. They are also more likely to pay for care, adding another necessary yet expensive cost to their daily lives. Currently in Lackawanna and Luzerne Counties, 49.1 percent and 50.2 percent of the 65+ population live alone, respectively.

The study anticipates a slight increase in the amount of older adults who rent. This is cited as being due to lifestyle reasons, affordability reasons, and the ease of rental units to maintain (it is usually the responsibility of the landlord to pay for or complete maintenance). Currently, around a quarter of the 65+ population in the two counties live in a type of rental unit. Those specific estimates are 25.8 percent of older adults in Lackawanna County and 24.5 percent in Luzerne County.

Factors Impacting Aging in Place

Transit

Making an area better suited for aging in place also takes place outside of the home. AARP recommends making neighborhoods suitable for older adults to continue to live independently in. Level and neat sidewalks would make older adults safer and more comfortable walking around outside (this serves to benefit all those who use walkers, wheelchairs, and strollers as well). Good sidewalks also encourage walkability; AARP recommends that essential neighborhood services (laundromats, grocery stores, parks) be within a five minute walk from either homes or public transit, which is essential to neighborhoods with aging populations but can benefit everyone.
Many older adults choose not to drive and feel safer walking or taking public transit; additionally, the extra physical activity can help keep older adults healthy. Safe and reliable public transit can serve to make a neighborhood livable for older adults looking to retain their independence for as long as possible.

Transit can also affect quality of life for older adults. According to an AARP study, “People over 65 that have stopped driving make fewer trips to the doctor (15 percent), to shop or eat out (59 percent), and for social, family and religious activities (65 percent) than drivers in the same age group.” It can be theorized that if there were more transportation options for seniors, especially those who do not live in cities, they may see improvements in their health and mood due to more frequent doctor visits and socialization. This report goes on to suggest policy recommendations to help ensure transit options for older adults, including that funding should not favor highway projects so that transit needs can be met.

In Lackawanna and Luzerne Counties, riding the bus is free for seniors over the age of 65; all that is needed is a state transit ID card that can be obtained from the administrative office of transit in either county. Both counties also offer ride share services for seniors. Though this is certainly a step in the right direction, more needs to be done to make transit accessible.

Quality of Life
A good quality of life for seniors is not only pertinent to their happiness, but also their physical wellbeing. An AARP study of adults over the age of 45 found that one-third of respondents identified as lonely. “Lonely respondents were less likely to be involved in activities that build social networks, such as attending religious services, volunteering, participating in a community organization or spending time on a hobby.” It is reasonable to presume that when older adults socialize or go out more in their communities, they are less likely to feel lonely. This increased socialization does more than ease loneliness. A study by the American Psychological Association found that greater social connections correlated with a 50 percent less risk of an early death. One solution to this may be improved transit for seniors; another may be the addition of more programs geared towards seniors. There are currently ten senior centers in Lackawanna County and seventeen in Luzerne & Wyoming Counties (these counties share an Area Agency on Aging). All of these senior centers offer different meals, services, and activities for their patrons at various (low) costs per year. Some centers, like the Jewish Community Center in Scranton, have exercise programs such as yoga and aerobics, arts and crafts, speakers, book clubs,
and games for seniors to enjoy for a $100 annual fee. These programs can truly impact a senior’s quality of life. However, for those in poverty, the membership fees may not be attainable (though the JCC fee is higher than most other fees.) These programs allow older adults to interact with others and spend their time doing something they like, which can improve their quality of life and in turn their overall health. Emphasis on programs and activities accessible to older adults will be vital in the future to promote independent living and aging in place.

Caregivers

In-home healthcare is an option for older adults who need a bit more help staying in their homes as they age. This type of care is generally cheaper than an assisted living center for older adults, but for some, living at home may just be more comfortable. For older adults with different levels of needs and abilities, discussing options with a doctor may be best for determining if in-home care is a suitable option or if it may be necessary to move to a different type of older adult community.

Despite the demand for in-home care, the industry itself is facing some major challenges. Even as the need for caregivers rises, less people are regarding this career option as plausible. “One in four home care workers lives below the federal poverty line and over half rely on some form of public assistance.” If this doesn’t change, it is expected that there will be a 350,000 to 600,000 shortage of caregivers by 2040, when the number of older adults will peak. If the demand is not met, care will fall on family members, which distracts them from their own jobs and has the potential to lose money for them or their employers. 

Lackawanna and Luzerne Counties both participate in the Pennsylvania Department of Aging’s Waiver Program through the local Area Agencies on Aging. This program allows qualifying adults over the age of 60 to receive in-home care, among other services, for no fee. Applicants must apply and go through a process of in-home visits and medical examinations to ensure that they will truly benefit from this service. Recipients must also meet the levels of need that they would receive at a skilled nursing home facility. Pennsylvania also has an OPTIONs program which is aimed at older adults who may need less care than those applying for the waiver program. The OPTIONs program focuses on adult day services, care management, emergency services, meal services and personal care services. This program also funds home modifications, medical equipment/devices, and home support. Though these programs are helpful, they do have eligibility requirements that can leave those in need without help. Some of these programs also have caps on how much assistance can be provided.

Economic Considerations

It could be speculated that, although caregivers certainly deserve to be compensated fairly for their hard work, that it just isn’t feasible for seniors who live on limited incomes. Assistance from family members could be an option to help pay for services- though in Lackawanna and Luzerne Counties roughly 15 percent of people live in poverty. If family members cannot help pay for services, seniors may not be able to get the professional care they need, or may not know where or how to seek resources to help them pay for services. The challenge here is the balance: how can in-home care be made both economically possibly for seniors as well as for their caregivers?
Assisted Living facilities are another costly place for older adults to spend their days. According to AARP’s Long Term Care Calculator, the median cost for assisted living facilities in the Scranton-Wilkes-Barre-Hazelton Metro Area is $36,000 for a private room per year. Nursing homes are even more expensive, costing over $100,000 a year for a semi-private room and even more for a private room. Fortunately, many of these programs can be covered by health insurance. In Pennsylvania, almost two out of three people in nursing homes rely on Medicaid to pay either partially or totally for the nursing home. However, even if Medicaid insurance continues to cover nursing home costs, the number of older adults is expected to soon exceed the number of beds in these facilities. This shortage will be first seen by those in urban areas or areas with a high rate of poverty – this is where nursing homes are more likely to close as a result of costs. Additionally, people with less income may have trouble affording nursing homes as they increasingly move to more expensive single-room dwellings and other amenities seeking to attract higher-paying clients.

Even though it seems that the demand for nursing homes will be rising soon, the number of nursing homes is decreasing - “from 2000 to 2009 the total number of nursing homes in the U.S. decreased by 9 percent. Additionally, from 2007 to 2011 new construction of nursing-home units decreased by 33 percent.” If this does not change, there will be increased competition over beds in nursing homes, which could also lead to increased costs. An immediate response would be needed to accommodate these older adults who have few options due to limited health care, income-related reasons, and health-related reasons.

Case Studies and Best Practices
Approximately 180 miles south of Wilkes-Barre in Baltimore, Maryland, a broad collaboration of community development and social and health service providers have collaborated to create Housing Upgrades to Benefit Seniors (HUBS). HUBS was created to serve adults aged 65 or older who make less than 80 percent of area median income. In Baltimore, they saw an issue and found that the best way to tackle it was from all perspectives — an effort of many different organizations working together to create the best solution. The group consists of four leaders, all of whom offer housing rehabilitation services: Neighborhood Housing Services of Baltimore (NHSB), Civic Works, Rebuilding Together Baltimore, and Green and Healthy Homes. The local providers are more diverse, consisting of services specifically for the elderly and some more broad health and housing services. Those providers are Banner Neighborhoods, Action in Maturity (AIM), Meals on Wheels of Central Maryland, Sinai Hospital of Baltimore/Comprehensive Housing Assistance, Inc. (CHAI) and Strong City Baltimore. The diversity in these groups serves to benefit those who are being served by ensuring they have an array of knowledge and perspectives when it comes to the best upgrades in their homes, yet this diversity also serves to benefit the program. The different models of success from each group may help to show which parts of the project are working and which are not.
The project aims to help 1,125 beneficiaries in three years with minor repairs like installing grab bars or better lighting to major repairs such as installing ramps or general handyman services. These goals are met with the assistance of social workers who meet face-to-face with older adults in Baltimore to understand what problems they may face and assess their needs. These social workers are funded by a grant from Leonard and Helen R. Stulman Charitable and Hoffberger Foundations, both Baltimore-based philanthropies who seek to serve low-income elderly people in the area.25

In Kansas City, Missouri, organizations are taking on a more health-care oriented approach to Aging in Place. The North Kansas City Hospital has partnered with several other community based organizations, including two senior centers and a home renovation agency, to create a comprehensive program to lower the chances of readmission to the hospital after an older adult has a fall or accident. As a patient gets ready to be discharged from the hospital, a designated RN who serves as the case manager will determine the patient’s eligibility for this program based on factors such as age and income. The case manager will also be responsible for educating the patient on disease management and medications, coordinating care, transitioning them back into home life, and following up with a phone call.

This program also serves safe housing needs, though not as heavily as the programs in Baltimore. A partner of this program, Lifewise Renovations, offers occupational therapists who go into homes and conduct safety assessments and recommend modifications. They can also work with the occupants of the home to make low-cost modifications and oversee the work being done.

Northland Shepard Services, a social services center in North Kansas City, has created wellness classes and workshops and also organizes transportation to these events. A social worker also works to connect older adults with services in their area, conducts needs-assessments and identifies barriers to engagement.26 Though the programs in Baltimore and Kansas City show different leanings, with Baltimore being more focused on safe and affordable housing and Kansas City being more focused on avoiding readmission to hospitals after falls and accidents, they both have a major theme in common: collaboration through several community organizations.
A program in Ithaca, New York, is an aging in place initiative that grew out of The Village Movement. Love Living At Home has the goal of making communities more accessible to the seniors that already live there by improving homes, transit, health care, and overall quality of life. This program works differently than programs in the public and non-profit sectors, as it is funded by the people who live in the “village.” They pool their money and use it to do things like perform maintenance in homes, carpool, and community events like happy hours, concerts, and lectures, among other things. This model is unique in that its members also support it by volunteering their time to helping the program; so that in theory, everyone is contributing what they can and everyone is benefitting. One member of LLH stated that she likes the program because “LLH provides a way of “easing into the changes that are coming.” This program may be good for just that reason. However, no problem members could face is the $450 yearly fee; however, the money seems to be well worth it for all of the services provided. This model may work on a community level, but government and non-profit programs will still prove to be essential when it comes to larger infrastructural issues such as public transportation and health care needs.27,28

In Lackawanna County, the need for aging in place programs is just beginning to be addressed. NeighborWorks Northeastern Pennsylvania, a homeownership center based out of Scranton, is working to create a comprehensive Aging in Place program; however, in the meantime, they have already started putting together a safety kit initiative to add some essential items into homes.

A married couple, 92-year-old World War II veteran Joe and Joan were struggling to make their family home (over 125 years old) more accessible. Installing a bathroom on the first floor increased accessibility and made the home safer for both of them.

Recommendations

The need for older adults to age in place is a multifaceted, complicated issue. According to a recent AARP study, “almost half (45 percent) of those who had lived in their current residence for less than one year reported feeling lonely,” implying that older adults were less likely to feel lonely in a place they have lived in longer. Additionally, AARP found that loneliness was an indicator of poor health.29 Depression has also been found to be a major cause of falls and accidents.30 It seems to be in the best interest for many older adults’ mental and physical health to remain in their homes where they are less likely to be lonely or depressed.

Older adults staying in their communities may also serve to benefit everyone in that community. According to the Corporation for National and Community Service (CNCS), of all adults over the age of 65, 23.5 percent volunteer.31 These older adults contributed 1.9 billion hours of service, which equates to about 45.4 billion dollars. 89.8 percent of older adults participated in “informal volunteering” such as helping a neighbor. When a person feels a connection to their community, they are more likely to serve. This volunteering helps older adults stay active in their
communities, make valuable connections, and ultimately make a difference in the lives of others.

It seems the best way to prepare for the increase of aging adults in Lackawanna and Luzerne Counties is to begin assessing the needs of this population now and develop programs that aim to make their lives safer and easier. The Harvard Joint Center for Housing Studies recommends housing units begin to incorporate a more universal design in new housing constructions—that is, build the houses with these accessibility features in the first place rather than spending time and money later to modify homes to suit accessibility needs. The AARP Government Guide to Aging in Place recommends what they call “Easy Living Standards,” or design that makes a home easier to live in for everyone. Wide hallways and entry ways, bathrooms and bedrooms on the first floor for easy single-floor living, grab bars, levered handles, and looped cabinetry should be fairly simple to incorporate into design of new homes as well. It should be stressed that making a home more accessible does not mean style and aesthetic needs to be sacrificed. There are plenty of ways to make a home look attractive and stay functional.

Modifying a home for older adults can be done on a small scale as well. Research done by occupational therapists Morgan, Lisak, and Gavalas recommends some changes a person could make by themselves or with some assistance in very little time. These changes include increasing lighting, having objects to grab onto in the home when walking or standing, such as grab bars, railings on the stairs, the use of canes and walker, as well as extra precautions to avoid trips or falls such as securing carpets or rugs, applying treads to steps and in the bathtub, and ensuring walkways are clear of clutter or other trip hazards.32

Education is also key when moving towards the future, especially on topics such as home safety and on programs that are available to assist homeowners and older adults financially. It is important to provide resources that educate older adults or those in the 55 to 64 age range about the characteristics of aging in place and how they may want to think about how their homes fit into that concept. Older adults should be encouraged to look toward modifications sooner rather than later, and the issue should be framed as an investment and a preventative measure. The home should be made safer before an accident happens and not after.

Older adults with disabilities, depending on their abilities, may experience more difficulty aging in place, and it should be noted that aging in place is not the best option for everyone. If a person has greater needs than their home can be
accommodated to support, then they may want to seek other options. This is where education becomes a huge part of shaping the lives of older adults—becoming educated on the pros and cons of aging in place, especially in regards to those who are differently abled, can help a person make the decision that best serves to keep them happy and healthy.

Poverty is a known cause of many social ailments, and an aging population is one of the groups affected. Working to eliminate poverty and boost educational resources will help to lessen the need for financial assistance and home modifications for older adults later in life—it will certainly not eliminate these programs, but it will decrease their caseloads and reliance on grants and subsidies. Low-incomes are a huge barrier for people who desire to age in place. Creating more programs to assist older adults financially and with safety concerns will surely make an impact, but it does not tackle the root of the issue. While people of all income levels and ages will benefit from financial education and more information about safety in their homes, it is those with less money who do not have the resources to follow through with these lifestyle changes or home improvements. To really address the problem from all angles, poverty in older adults must be addressed as a root cause of the need for Aging in Place programs. Stressing to younger adults the importance of saving for retirement (providing they make enough to afford to save) may help them later on more than they realize; as well as educating “future seniors” on possible home modifications.

One of the biggest challenges to Lackawanna and Luzerne Counties specifically is modifying aging homes to accommodate aging people. As older homes start to need more maintenance and repair than their elderly occupants can handle, whether it be to lack of finances, lack of physical ability, or both, the homes become less safe for them to occupy and contribute to the increasing blight in neighborhoods. Too much blame cannot be placed on the occupants, who may have no other option than to let their homes go on without maintenance. More programs need to be available to provide these older, lower-income adults with assistance. Programs like these serve to benefit everyone—making homes safer for the occupants, making the neighborhood more attractive for the residents, and making Lackawanna and Luzerne Counties as a whole more appealing. Programs like this do exist in the public and private sectors; however, more coordination between existing organizations, local governments and government agencies may serve to maximize the amount of assistance to people who need to be helped and work to address those in the greatest need first.