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1-1-1977

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I. BACKGROUND

The complexity of the issues involved with providing appropriate health care and social services from the appropriate setting to people over age 65 can hardly be overstated. One of the present debates in the field focuses on the value of institutions as the customary setting for providing health care; the arguments are based on considerations of economic efficiency and the recipient's quality of life. Some of the debators suggest deinstitutionalizing as many of the health care recipients as possible, while simultaneously upgrading the quality and quantity of home based support services. The logic of deinstitutionalization is often buttressed by claims that either a greater level of services can be provided for the same dollar amount or the same level of services can be provided while permitting the expansion of services in other areas. Advocates of deinstitutionalization suggest that the quality of life can be increased for those people who can retain a greater independence over their lives by taking advantage of home based support services, rather than being more dependent in an institution. They suggest that all too often an older person is subjected to greater dependence in many areas solely because the person needs assistance in some specific areas.

From the other perspective those advocating that institutions are the most appropriate setting for providing health care and social services often buttress their logic by emphasizing both the economic efficiency of centralizing the disbursement of services and the improved quality of life people experience once their concern over accomplishing essential functions is alleviated.

Another debate focuses on the appropriate service delivery system for social services for people over age 65. The arguments closely parallel those put forth in the debate over the appropriateness of health care settings - economic efficiency and the recipient's quality of life.

Providing appropriate settings for the delivery of health care and social services in a comprehensive, rational, and systematic fashion requires the antecedent development of an informaton base. The information base must include at a minimum an assessment of the need for services which might exist in the target population, as well as the estimates of the real cost for providing various health care and social services by various service delivery systems. Though needs assessments and cost estimates abound, their validity and reliability are often insufficient as an information base for comprehensive, rational, systematic planning.

The Massachusetts Department of Public Health (MDPH) undertook an innovative approach for establishing a reliable and valid quantitative information base in order to coordinate and maximize the services authorized and partially reimbursed by Title XVIII (Medicare) and Title XIX (Medicaid) of the Social Security Acts. Of course the approach can logically be extended to incorporate the planning of services authorized under the more recent Title XX programs. The MDPH approach had three essential components:

(1) The development of a matrix based on the relationship
between the various services which are offered and the
various settings which offer them. The matrix can be
used to specify the total costs, including overhead
profit margins, and the remaining costs for providing
various services (e.g., meal services, linen services,
skilled nursing services) in a variety of settings
(e.g., three levels of long term care facilities, the
recipient's home, multi-service centers). The costs
could be calculated on the basis of charges submitted
for Medicare and Medicaid reimbursement.

(2) An assessment of the health care and social service
needs of all the patients in the long term care system
to determine appropriateness of placement, thereby
providing a quantitatively precise estimate of the
number of institutionalized people who must remain
in the various long term care institutions as well as
the number of people who could be deinstitutionalized
if the appropriate home based support services were
available.

(3) An assessment of the health care and social service
needs of the noninstitutionalized people, thereby
providing a quantitatively precise estimate of the
number of noninstitutionalized people who should
be institutionalized as well as the number of people
who would take advantage of home based services if
available.

Estimating the costs in Massachusetts in 1974 for the service by
setting matrix proved to be infeasible for a group of economists because
the format for submitting charges under Medicare and Medicaid service con-
tracts was unstandardized. It was not possible to disaggregate the sub-
mitted charges in order to calculate the total costs including overheads
and profit margins for the individual cells in the matrix.

The needs assessment for both the institutionalized and the nonin-
stitutionalized people were accomplished with sufficient quantitative
precision to be used in comprehensive, rational, systematic planning.
The needs assessment for the noninstitutionalized people focused on the
high users of the health care and social service system, namely those
over aged 65 and those chronically disabled aged 18 through 64. The
vehicle for obtaining the need assessment was approximately 2000 personal
interviews based on a statewide probability sample of households. [1,2]

This initial assessment of health care and social service needs of
the noninstitutionalized elderly provided a quantitative information base
for many of the state's social planning questions, while at the same time
raising some new ones.

This initial information base indicated among other things that one
to two percent of the noninstitutionalized elderly were judged to
require either sheltered housing or nursing home care, and up to
seven percent needed some help with the activities which social service

agencies typically provide or facilitate (seven percent in trans-
portation, seven percent in food shopping, six percent in personal
care, five percent in housekeeping, five percent in socializing with
close friends, three percent in emergency assistance, one percent in
food preparation, and one percent in social opportunities).

Overall the initial data indicated that the noninstitutionalized
elderly of Massachusetts were reporting a level of functioning, in-
dependence, and health status that was better than many would have
expected. Two explanations (which are not mutually exclusive or even
antithetical) were suggested.

One explanation was to point out, quite correctly, the inherent
limitations of any study that produces a snapshot in time. In trying
to assess the extent to which certain negative situations exist in a
population, a serious limitation of the snapshot approach is that it
perhaps excludes those with the serious unmet needs who cannot exist for
very long in the noninstitutionalized setting. These people must solve
their problems very quickly. Consequently a snapshot in time will not
identify many people in the process of solving their serious unmet needs.

A straightforward method of addressing this problem was to rein-
terview the respondents at a second point in time, thereby determining how
many of the respondents might have had to solve the problem of serious
unmet needs during the interim time period. The present study provides
the quantitative data base at the second point in time which is necessary
to interpret the level of functioning, independence, and health status
of the Massachusetts elderly.

The second explanation of why the Massachusetts elderly reported a
better health status than many assumed was that many of those making the
assumptions are the service providers who are steeped in a system which
has the problems of trying to stretch insufficient resources to a seemingly
limitless number of recipients. It is easy to understand the origins of
such a misassumption. If there are about 600,000 noninstitutionalized
people over age 65 in Massachusetts, and five percent of these could be
helped by some service from the public sector, then those dealing with
the problems of the 30,000 would be likely to conclude that those 30,000
people are representative of the whole 600,000. Unmistakably 30,000
people in need of services is a lot of people and represents much individual
suffering and hardship. But the astute advocate or service provider must
bear in mind that, to follow through with this example, there are still
570,000 other people over 65 years of age who do not require any help
from the public sector. In a period of scant public resources it is
especially critical to accurately gauge the need for service expenditures.
At a time when nearly everyone will agree that the total public expen-
ditures for services are insufficient, the advocate or provider who
overestimates the constituents' needs and secures a disproportionately
large share of the expenditures does so at the expense of other constit-
uents with more need but less skilled advocates.

The realization of just how deplorable that type of situation would
be serves to reinforce the fundamental need for a reliable and valid
quantitative information base from which comprehensive, rational, and

systematic planning can be accomplished.

The optimal utility of a descriptive report on the status and characteristics of older people is in its repeated application to ad hoc planning issues. In this sense the information base is best used as a quantitative reference for health care and social service planning.

II. METHODS

2.1 Original Time 1 Sample. A statewide area probability sample
of 403 area segments, stratified by eight planning regions and by
central city/other urban/other place within regions, was originally
drawn in late 1974. Each segment was selected by a systematic probability
selection process (proportionate to the expected number of people over
age 65 in each area), and expected to yield on the average 20 occupied
noninstitutional housing units. These units in turn were expected to
contain approximately five elderly persons.

In a very few instances a selected area segment yielded greater than
50 percent more housing units than estimated, necessitating subselection
for interviewing and subsequent adjusting of the interview data to in-
sure the ability of making accurate statewide projections. When the
ratio of counted housing units to estimated housing units from the
1970 Census information was between 1.51 and 2.50, a random half of the
housing units were selected and each of these interviews was entered or
weighted twice in the data processing (double weighting an interview occurred
25 times with the elderly). When the ratio of counted housing units to
estimated units was 2.51 to 3.50, a random third were selected and each
interview weighted three times (this occurred 13 times); when the ratio
was greater than 3.50, a random quarter were selected and each interview
weighted four times (this occurred 3 times).

This original sample contained a total of 8614 addresses of which
803 were vacant and 127 were not dwelling units, leaving 7683 occupied
addresses in the sample with which to make contact and to determine
the potential eligibility of household members.

Between November 1974 and February 1975 personal interviews were
conducted with 1625 elderly respondents, though proxy respondents were
allowed in 41 instances when the elderly target person was unable to
complete the interview. In the majority of these instances the target
person was recuperating at home from an illness. In these instances
the proxy respondents, who were usually other household members who
knew the target person well, were asked to provide factual information,
and were not asked to provide any evaluations. This Time 1 sample was
also used to identify and interview 386 chronically disabled people aged
18 through 64 years.

This was a strict probability sample, with no substitution of
people or housing units once a specific housing unit was selected.
The screening information was provided by any responsible adult for
the related people living in a household or for the unrelated people
if there were fewer than four. In group quarters (any place in which
five or more people unrelated to one another were living, such as
boarding houses), the interviewers were directed to contact all of
the residents for screening. As it turned out, Massachusetts has
relatively few group quarters and this sample did not include any.

The computation of a response rate (the number of elderly
people in the sample for whom an interview was obtained divided by

the total number of eligible respondents) is complicated when the
process involved screening for eligible people, but the most realistic
response rate for the Time 1 sample was 79 percent. Further information
on these procedures has been presented.[2]

2.2 Time 2 Sample. All 1625 elderly respondents from Time 1 were
eligible Time 2 respondents. Personal interviews were conducted between
February and May 1976 (15 month interim between Time 1 and Time 2) with
1317 elderly respondents. A total of 146 people were not eligible
respondents as noninstitutionalized Massachusetts elderly at Time 2:
103 had died during the interim, 26 had entered the long term care
institutional system, and 17 had moved out of the state. The overall
Time 2 response rate then was 89 percent. Seventy-seven of the inter-
views were obtained over the telephone for the convenience of the respon-
dent. Seventy-nine of the respondents refused to be reinterviewed at
the first contact but subsequently consented and were interviewed. In
46 special circumstances a shortened version of the interview was obtained
through a proxy.

The Time 2 sample remains a probability sample, but at this point
a probability sample of the noninstitutionalized residents of Massachusetts
aged 66 or more years, excluding the small number of people (1) who might have
become residents of the state since the Time 1 screening, or (2) who might
have been in a long-term care facility at the Time 1 screening and subsequent-
ly have become noninstitutionalized.

2.3 Questionnaire. The Time 2 questionnaire was designed to replicate
the needs assessment information required at Time 1, plus some additional
information on dietary habits, cigarette and alcohol consumption, and a
few more items relating to morale. The areas of needs assessment which re-
flect the major emphasis of the questionnaire were:

- transportation

- personal care assistance with activities of daily living

- housekeeping

- social activities

- emergency assistance

- food shopping

- food preparation

More than 10 percent of the coded items were checked for accuracy,
the keypunching was 100 percent verified, and numerous computer checks were
performed to eliminate erroneous punches and any internal inconsistencies
before computer processing began.

2.4 Needs Assessment. The operational definitions for needs assessment at Time 1 produced estimates of need for additional assistance which are assailable on the grounds that too much emphasis had been placed on the respondent's degree of perceived difficulty in coping with the problem areas, and too little emphasis had been placed on the behavioral dimension of whether the problem was resolved in a stable fashion or not. This possible deficiency in the original needs assessment operational definitions would have produced inflated estimates of need, notwithstanding the judgments of some advocates that the estimates were too conservative. This suggestion of inflated estimates was supported in an examination of the needs assessment determinations made by the Time 1 operational definitions for self-reported information compared to the needs assessment determinations made by specially trained clinicians on the same people. The clinicians judged considerably less unmet needs among 206 of the respondents. Each of the needs assessment definitions was thoroughly reviewed in light of all the information the respondents provided at Time 1, and revisions were made to more closely mirror the more conservative clinical judgments. The Time 2 questionnaire contained all the information necessary to replicate the original Time 1 needs assessment (which enabled the analysis of change over time to be performed), as well as some additional information which allowed the revised operational definitions of need to be made. A correlation of 0.71 was found for the number of unmet needs each person had at Time 2 based on both the original definitions and the revised definitions. A correlation of this magnitude indicates substantial commonality between the operational definitions while at the same time allowing one instrument (presumably the revised one) to incorporate some additional dimensions.

Each of the Time 2 operational definitions differentiates the respondents into four major categories:

1. Need currently met and no apparent problem

2. Need currently met, but potential problems are apparent

3. Uncertain that need currently met, and potential problems are apparent

4. Need currently unmet, with current problems

Each of these major categories in turn contains several subcategories which basically describe the various response profiles that occurred. The response profiles reflect the specific answers to both behavioral and evaluative items related to each need assessment area.

For example when assessing the need for transportation, several items about the behavioral situation were asked (e.g., what mode of transportation is used most often; who usually drives when an automobile is used) as well as several items about the respondent's eval-

uation of the situation (e.g., how much of a problem is it to go where required; does the person get out as often as he or she would like). All of the response profiles to both the behavioral and the evaluative items were considered and ordered from greater self-sufficiency to lesser self-sufficiency within the four major categories.

It is worth noting that the potential number of response profiles far exceeded the actual number reported. The potential number of profiles reflected all possible permutations, whereas the actual profiles excluded many of the patterns that would appear contradictory (e.g., simultaneously reporting that one is completely free to come and go as desired and that there is serious difficulty in getting to the places one needs to go). The reduced number of actual profiles reflects to some degree the high correlation between certain items. Furthermore, there were instances in which some subcategorizations were made on the basis of the answers to just the key items, not the whole set relating to the topic. The remaining items were incorporated in a step-wise fashion to delineate the degree of self-sufficiency within the major categories. These revised operational definitions generally considered the behavioral component more salient in the determination of need than the evaluative component, but the evaluative component was more important in judging whether a potential problem might become manifest. Neither the behavioral nor the evaluative component alone is sufficient for categorization at the extremes (need currently met and no apparent problem and need currently unmet with current problems apparent).

For the social activities need assessment, the behavioral and the evaluative components were each reduced to a single numerical index by combining the responses from each of the items to form an additive index. The scoring of each index was simple enough; a response suggesting the best possible alternative was scored as one, the worst possible alternative was scored as five, the neutral point or a missing answer was scored as three. The behavioral component of the need assessment for housekeeping assistance was also an additive scale having four points, with the responses between the neutral and the worst possible points scored as four.

From the short term perspective, a needs assessment study can be judged on the adequacy of its operational definitions. The revised operational definitions which parallel clinical judgments in these areas, are presented in Appendix A, along with the number of people in each category and subcategory.

From the long term perspective, a needs assessment study can be judged on its predictive validity, which in this context is the ability to specify in advance which individuals will receive public assistance in the particular areas of need. The process of determining the predictive validity is nearly impossible when the public assistance is not uniformly available. If the assistance is not available to everyone who needs it, then the individuals cannot be clearly classified as to whether or not they are receiving the particular service, assuming the prior need assessment categorization has occurred. In any event,

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a longitudinal study of this nature can address predictive validity
in some fashion at the next wave of interviewing.

III. RESULTS AND DISCUSSION

3.1 Format for Presenting the Information. In addition to des-
cribing how the elderly respondents as a whole replied to the individual
items in the questionnaire and to the various indices which were created,
the response patterns of selected subgroups are presented. The response
patterns at both Time 1 and 15 months later at Time 2 are differentiated
as a function of the respondents' household composition, age, perceived
health, and number of unmet needs (the subgroup analysis based on the
number of unmet needs using the revised definitions was done on the
Time 2 data only).

In defining the first subgroup variable of household composition,
the 1317 respondents were categorized as living alone, living
with their spouse only, living with their spouse and their children
only, living with their children only, or any other combination (which
most often meant that the household included another relative).

In defining the age variable, each respondent was categorized
into one of five subgroups: 65 through 69 years, 70 through 74 years,
75 through 79 years, 80 through 84 years or 85 or more years. At
Time 2 the youngest subgroup was actually aged 66 through 69 years.
The age of six respondents was not obtained, so the maximum number
of respondents differentiated by aged was 1311, not 1317.

In defining perceived health subgroups, the respondents were cate-
gorized as excellent, good, fair, or poor on the basis of their own
answer to the question "In general, how is your health now". The
perceived health was not obtained from five respondents and for the
46 proxy interviews.

In defining the number of unmet needs for the subgroup analysis,
each respondent was categorized on the basis of the revised needs
assessment definitions as having none of the seven need areas* unmet,
any one area unmet, or two or more areas unmet. The number of respon-
dents with two or more unmet needs was 45 which reflects the conserva-
tive approach used in forming these subgroups of counting only those
people with known unmet needs. For these subgroups, individuals with
missing information on a particular need assessment area which pre-
cluded a determination of need unmet were considered as need met for
that area. Of course in the presentation of the distributions in the
specific need areas, individuals with missing information were cate-
gorized as missing data, not as need met.

The response patterns at Time 2 were subjected to a Chi-Square
analysis to determine if the subgroups significantly influenced the
response distributions. In most instances, the level of statistical
significance is indicated by asterisks on the left, but occasionally
the level of significance is indicated within the table itself when
more than one statistical test on the Time 2 data was required.

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*Transportation, personal care, housekeeping, social activities, both
short term and long term emergency assistance, food shopping and
food preparation.

The reader should be aware that the Chi-Square analysis determines whether or not two variables are associated to a degree greater than chance. It does not indicate whether or not there is a consistent linear trend. Moreover, with a large number of cases, it is very possible for a difference to be statistically "significant" (i.e., larger differences within cells than could occur by chance), but be too small to be of practical significance.

A few additional comments concerning the format of the data are in order. The number of cases upon which the percentages are based are presented in parentheses. Any difference between the number reported and the total number of respondents reflects the number of people who did not respond either to the item used to form the subgroups or to the item being presented. The explanations for item nonresponse include such diverse reasons as an interviewer omitting a question or a respondent exercising the informed consent option of refusing a specific item.

In a few instances the items asked at Time 2 were different than at Time 1, in which case the appropriate phrase "not asked" or "not asked in this format" is indicated in the table.

Lastly, the convention of indicating "1/2 percent" is employed when the distribution is greater than zero but less than 0.51 percent.

3.2 An Overview of the Social Service Needs Assessment. A summary of the social service needs assessment information for each of the seven areas is presented in Table 1. In this table the information for each area is presented by the four primary categories (need met and no apparent problem; need met but potential problems are apparent; uncertain need met and potential problems are apparent; need unmet with current problems) and when appropriate by whether the person is self-sufficient in meeting the need, or requires help from within the household support system, or requires help from sources outside the household.

Considering all the areas of potential need for public social services, the transportation need was unmet for the largest percentage of older people (seven percent). Bear in mind that the definition of an unmet need in transportation (refer again to Appendix B) required either that the older person was homebound or that the older person reported getting out of the house only for special occasions and/or basic necessities, reported that getting where one needs to go is a big problem, and reported that he or she is able to go places not nearly as often as desired.

Another four percent might also be candidates for a transportation program for the elderly as indicated by their categorization as uncertain that their transportation need was met but having potential problems which merit monitoring.

Of the 89 percent of the elderly found to be meeting their transportation need (69 percent with no potential problems apparent and 20 percent with potential problems that should be monitored), only 15 percent were meeting their need by relying on the less convenient support system which exists outside of their own household. Generally, one might infer that the people meeting their own needs in a self-sufficient manner have a greater likelihood of continued independence than the people relying on the informal support system of their household to meet their needs, who in turn might have a greater likelihood of continued independence than those relying on a formal, or at least a less convenient, support system which is outside of their household to meet their needs.

The information in Table 1 also indicates that no more than three percent of the elderly were found to have unmet needs in any of the other assessment areas. This finding lends further support to one of the principal conclusions from our original needs assessment study of the Massachusetts elderly that large segments of the noninstitutionalized elderly do not require greatly expanded social services. It bears repeating again though that, while one percent of the state noninstitutionalized elderly is not a large group with an unmet need from the perspective of planning for social services, the problems of these same 6000 to 7000 individuals who are probably experiencing much personal hardship should be addressed with dispatch.

Table 2 presents a summary of the social service needs assessment information at two points in time based on the original operational definitions. Since the two points in time were separated by 15 months, these data enable an evaluation of the short term stability of needs

assessment information about the elderly. Notice first that the original definitions resulted in only three major categories (need met; uncertain; need unmet). Inspecting the percentages of elderly with unmet needs at the two points in time suggests a high degree of stability over time. The Time 1 and Time 2 percentages of older people with unmet needs were within one percent in six areas (transportation, housekeeping, food preparation, socializing with close friends, social opportunity, and emergency assistance). In the areas of food shopping and personal care, the level of unmet need decreased by three percent between Time 1 and Time 2, a decrease which about halved the level of unmet need.

Notwithstanding these two instances of decreased levels of unmet needs over time, the overall pattern which emerges from the data presented in Table 2 is that the two snapshots in time produced highly consistent information, suggesting that an assessment of needs for social services among the elderly remains quite stable over a short term interval such as 15 months.

Table 3 indicates the percentages of older people with varying numbers of unmet needs based on the revised definitions. It can be argued that having one unmet need as defined in this context does not signify a problem for the public social service sector, that having one unmet need is surely a personal problem but not a public problem. Having two or more unmet needs on the other hand might indicate that the public sector must provide assistance or services for an adequate resolution. By extension, the greater the number of unmet needs the more public assistance the individual might be expected to require. In this context it is encouraging to find almost nine out of ten non-institutionalized older people without any unmet needs, and those having two, three, four or five unmet needs were about four percent of the total.

Not surprisingly the household composition, age, and perceived health of the respondents were significantly related to the number of unmet needs found. It appears that those older people who do not have spouses and are either living alone or with their children were more likely to have unmet needs than the other older people, and that those living with their children were even more likely to have unmet needs than those living alone. Perhaps the degree of unmet needs influenced the prior decision to live with their children, though apparently this arrangement does not solve all the problems.

The age of the respondent was also significantly related to unmet needs, with those under 80 years of age appearing quite similar in their number of unmet needs, but with those aged 80 through 84 indicating an increase in unmet needs and those age 85 or more exhibiting a marked increase in unmet needs. The exact forms of the significant age relationship which are reported in subsequent analyses merits close attention in order to ascertain whether there is any critical age among the elderly which signifies a marked increase in problems.

The relationship between perceived health and the number of unmet needs clearly indicates that those reporting poor health are considerably more likely to have more unmet needs.

Table 4 presents a comparison of the number of unmet needs at the two points in time. By necessity the original definitions must be used to assess the stability of the aggregate pattern over time. For the total elderly the two snapshots in time again produced highly consistent information. Even the fluctuations within the various subgroups of the elderly were not very considerable. Bear in mind that the tests of statistical significance to determine whether the subgroup categories were significantly related to any dependent variable were only performed on Time 2 data. In tables like Table 4 which have both Time 1 data and Time 2 data, the statistical significance reported (in this case, in household composition, age, perceived health, and the number of unmet needs) is for the relationship between une subgroup and the Time 2 distribution.

The correlation between the number of unmet needs a person had at Time 1 and the number at Time 2 (both necessarily based on the original definitions) was 0.40, suggesting that the stability of information noted at the aggregate or group level does not imply that the individuals with the unmet needs are the same at the two points in time. Further information about the rate of individual changes over time is addressed in a following section.

A clinical review team which routinely makes judgments about the social service needs of the elderly as well as recommendations about their appropriate living situation (long term care facilities, sheltered housing,* noninstitutional housing) also visited a subsample of the respondents at both points in time. The clinical recommendations supported the general pattern found on the basis of the self-reported information. The clinical team recommended that only about one percent of the respondents should be in institutions at Time 1 and two percent at Time 2. At both points in time about one percent were recommended for the sheltered housing alternative. The vast majority were recommended to remain in their present noninstitutionalized setting. The judgments of specific unmet needs also support the pattern found on the basis of the self-reported information which is presented in the next section. In nearly every instance, both methods produced estimates of older people with unmet needs in the various areas that were within one or two percent of each other.

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*Refers to any of a variety of kinds of housing, usually including at least facilities for common eating and the availability of someone who would be contacted for help or support if needed.

Table 1. Summary of Social Service Needs Assessment for the Elderly at Time 2 Based on the Revised Operational Definitions.

		Summary of Need Assessment with Revised Definitions									
		1. NEED MET, NO APPARENT PROBLEM				2. NEED MET, POTENTIAL PROBLEM				3. UNCERTAIN NEED MET, POTENTIAL PROBLEM	4. NEED UNMET, CURRENT PROBLEM
	(n)	Total	Self Suf-ficient	Within House Sup-port System	Out-side House Sup-port System	Total	Self Suf-ficient	Within House Sup-port System	Out-side House Sup-port System	Total	Total
Transportation	(1290)	69%	51%	11%	7%	20%	5%	7%	8%	4%	7%
Personal Care	(1282)	85	-	-	-	12	-	-	-	-	3
Housekeeping	(1289)	86	50	29	7	3	1	1	1	9	2
Social Activities	(1314)	70	-	-	-	23	-	-	-	4	2
Emergency Assistance	(1299)	78	-	-	-	9	-	-	-.	11	2
Food Shopping	(1302)	86	59	21	6	9	2	5	2	4	1
Food Preparation	(1286)	86	54	30	2	10	7	2	½	3	½

Table 2. Summary of Social Service Needs Assessment for the Elderly at Two Points in Time Based on the Original Operational Definitions.

		Time 1 Summary of Need Assessment										Time 2 Summary of Need Assessment									
		NEED MET				UNCERTAIN				NEED UNMET		NEED MET				UNCERTAIN				NEED UNMET
	(n)	To-tal	Self Suf-fic-ient	With-in House Sup-port Sys-tem	Out-side House Sup-port Sys-tem	To-tal	Self Suf-fic-ient	With-in House Sup-port Sys-tem	Out-side House Sup-port Sys-tem	Total	(n)	To-tal	Self Suf-fic-ient	With-in House Sup-port Sys-tem	Out-side House Sup-port Sys-tem	To-tal	Self Suf-fic-ient	With-in House Sup-port Sys-tem	Out-side House Sup-port Sys-tem	Total
Transportation	(1618)	80%	51%	18%	11%	13%	6%	3%	4%	7%	(1264)	79%	51%	16%	12%	14%	6%	3%	5%	7%
Housekeeping	(1660)	91	54	31	6	4	3	1	½	5	(1299)	92	53	31	8	3	2	1	½	4
Food Shopping	(1604)	83	56	23	4	10	7	2	1	7	(1314)	85	55	24	6	11	6	3	2	4
Food Preparation	(1484)	86	56	28	2	13	10	3	½	1	(1185)	90	56	31	3	10	8	2	½	½
Socializing	(1685)	33	-	-	-	62	-	-	-	5	(1317)	33	-	-	-	61	-	-	-	6
Social Oppor-tunity	(1685)	96	-	-	-	3	-	-	-	1	(1317)	97	-	-	-	3	-	-	-	½
Emergency Assistance	(1685)	95	-	-	-	2	-	-	-	3	(1317)	96	-	-	-	1	-	-	-	3
Personal Care	(1682)	94	83 Support System 11			-	-	-	-	6	(1310)	97	86 Support System 9			-	-	-	-	3
Medical/Para-medical Assistance	60%	reported receiving medical/paramedical assistance									60%	reported receiving medical/paramedical assistanc								

Table 3. The Number of Unmet Needs for Various Subgroups of the Elderly at Time 2 Based on the Revised Operational Definitions.

Filter Variable	(n)	None	One	Two	Three	Four	Five
Total Elderly	(1317)	88%	9%	2%	½%	½%	½%
Household Composition***							
Alone	(396)	83	12	3	1	1	0
With spouse only	(511)	93	6	1	½	0	½
With spouse & children only	(101)	92	7	0	1	0	0
With children only	(107)	78	17	3	2	0	0
Other combinations	(202)	90	5	5	0	0	0
Age***							
65-69	(391)	94	5	1	½	0	0
70-74	(394)	89	7	3	½	½	½
75-79	(275)	87	8	3	1	½	0
80-84	(152)	81	14	2	1	2	0
85+	(99)	72	23	4	1	0	0
Perceived Health***							
Excellent	(216)	97	3	0	0	0	0
Good	(535)	94	4	1	½	½	0
Fair	(399)	86	10	3	½	½	0
Poor	(113)	55	28	10	4	2	1

Table 4. The Number of Unmet Needs for Various Subgroups of the Elderly at Two Points in Time Based on the Original Operational Definitions.

	Time 1 Number of Unmet Needs				Time 2 Number of Unmet Needs			
Filter Variable	(n)	None	One	Two or More	(n)	None	One	Two or More
Total Elderly	(1684)	78%	15%	7%	(1317)	80%	14%	6%
Household Composition***								
Alone	(466)	70	19	11	(396)	73	18	9
With spouse only	(685)	85	11	4	(511)	87	10	3
With spouse & children only	(127)	81	14	5	(101)	81	12	7
With children only	(120)	74	16	10	(107)	71	22	7
Other combinations	(286)	77	16	7	(202)	83	14	3
Age***								
65-69	(595)	86	10	4	(391)	88	10	2
70-74	(450)	80	12	8	(394)	82	12	6
75-79	(323)	73	20	7	(275)	78	15	7
80-84	(201)	70	17	12	(152)	72	20	8
85+	(108)	57	30	13	(99)	65	24	11
Perceived Health***								
Excellent	(297)	92	7	1	(216)	91	8	1
Good	(688)	85	12	3	(535)	88	8	4
Fair	(431)	77	16	7	(399)	78	16	6
Poor	(189)	51	23	26	(113)	53	29	18
Number of Unmet Needs***								
None					(1158)	90	9	1
One					(114)	17	58	25
Two or more					(45)	7	22	61

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.3 Transportation Need Assessment. Tables 5 and 6 present more detailed information about the assessment of need for transportation services. As indicated in Table 5, the household composition of the respondent was significantly related to the need assessment in transportation, with those living with children having twice the rate of unmet need (15 percent). Those living with a spouse had the highest percentage (76 percent) with need met and no potential problems apparent.

The age of the respondent was also significantly related to the transportation need assessment, with those 80 through 84 years showing considerably more unmet needs and problems than those 79 years and younger, and those 85 years or older showing even more unmet needs and problems than those aged 80 through 84.

The perceived health of the respondent was also significantly related to transportation need, with those reporting poor health having a four- to fivefold greater likelihood of an unmet need in transportation.

Lastly, as expected the number of unmet needs a respondent has was significantly related to one's transportation need. In some respects this statistically significant relationship between the number of unmet needs and any particular need assessment is an artifact of the metric. The person's score on the particular need assessment area by definition contributes to his or her classification on the other variable, so it is really no surprise that the two are significantly related. Consequently the discussion about the implications of a statistically significant relationship between the independent variable (number of unmet needs) and the dependent variable (the particular need assessment area) will be minimal because of the artifact.

Table 6 presents further information about the usual means of transportation for the elderly as a function of their need assessment category. Though this information is presented in a collapsed form in Table 5, its implications are easier to comprehend in this form. Of the 69 percent who have met their transportation needs with no apparent problems, over half usually drive a car themselves, another one in five are self-sufficient by using a taxi or public transportation, while only one in ten usually relies on a person outside their household to drive. Considering all those with either potential problems or current problems, less than one in ten reported usually driving a car themselves. The rate of those who usually take a taxi or public transportation was fairly constant regardless of their assessment on transportation need.

It is interesting to note from Table 6 that the rate of homebound elderly people in Massachusetts was two percent (operationally defined as all those reporting that they never or almost never, except for emergencies, get out of their home for any reason).

Tables 7 and 8 provide detailed descriptive information about the transportation patterns, modes and perceived degree of difficulty for the various subgroups of the elderly. Each of these dimensions was, of course, incorporated into the need assessment, but the individual

response distributions are also enlightening. About two out of every three older people reported being completely free to go and return as they like, but one in four reported travel restricted to special occasions and/or for basic necessities. Household composition, age, perceived health and the number of unmet needs were all significantly related to their transportation pattern, with a larger percentage of restricted respondents found among those living with children only, among those aged 85 or more, and to a slightly lesser degree, those aged 80 through 84, among those reporting poor health and to a lesser degree those reporting fair health, and among those with any unmet needs.

Of the one in three who reported not being completely free to go and return as they would like, approximately half (52 percent) also reported that they did not get places nearly as often as they wanted. This one half of one third means about 15 percent have indicated, on the basis of two judgmental or evaluative items, that they are in effect quite restricted in transportation. Without incorporating any of the more behavioral dimensions, about 15 percent of the elderly could be classified as homebound. Nevertheless, it seems more appropriate to incorporate the more behavioral dimensions as discussed previously and thereby classify only two percent as functionally homebound.

The subgroup variables were significantly related both to the usual mode of transportation (except perceived health was not related) and the respondents' perceived degree of problem getting where they need to go. Those living alone use public transportation and taxis more often than others; those over age 80 use taxis more than those under 80 years of age. Those with poor perceived health or with unmet needs report significantly more problems with transportation in general.

Table 5. Assessment of Need for Transportation Services at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	1. NEED MET, NO APPARENT PROBLEM Total	Self Suf- ficient	Within House Sup- port System	Out- side House Sup- port System	2. NEED MET, POTENTIAL PROBLEM Total	Self Suf- ficient	Within House Sup- port System	Out- side House Sup- port System	3. UNCERTAIN NEED MET, POTENTIAL PROBLEM Total	4. NEED UNMET, CURRENT PROBLEM Total
Total Elderly	(1290)	69%	51%	11%	7%	20%	5%	7%	8%	4%	7%
Household Composition***											
Alone	(390)	70	53	0	17	17	5	0	12	6	7
With spouse only	(503)	76	58	16	2	15	4	5	6	4	5
With spouse & children only	(100)	71	53	16	2	21	3	14	4	2	6
With children only	(102)	47	29	13	5	34	7	21	6	4	15
Other combinations	(195)	65	41	19	5	23	3	15	5	4	7
Age***											
65-69	(385)	81	64	14	3	14	4	5	5	2	4
70-74	(391)	74	58	10	6	17	5	6	6	3	5
75-79	(268)	67	45	10	12	18	4	6	8	5	8
80-84	(147)	53	31	11	11	29	6	11	12	7	12
85+	(91)	30	19	6	6	38	6	16	16	11	21
Perceived Health***											
Excellent	(213)	87	70	10	7	11	2	4	5	1	2
Good	(525)	79	56	14	9	16	4	6	6	3	2
Fair	(389)	60	45	9	6	27	8	9	10	6	7
Poor	(111)	31	22	6	3	24	3	7	14	13	32
Number of Unmet Needs***											
None	(1136)	77	56	13	8	19	4	7	8	4	0
One	(90)	18	13	0	5	24	9	5	10	10	47
Two or more	(34)	12	12	0	0	20	8	3	9	9	59

Table 6. Assessment of Needs for Transportation Services at Time 2 by the Usual Means of Transportation.

	Total (n)	Usual Means of Transportation Drives Car	Uses Taxi, Public Trans- portation	Household Member Drives Car	Person Outside Household Drives Car	Homebound
1. Need met, no apparent problem	69% (898)	54%	20%	16%	10%	-
2. Need met, potential problem	20% (245)	8	16	36	40	-
3. Uncertain need met, potential problem	4% (54)	9	21	22	48	-
4. Need unmet, current problem	7% (93)	2	24	13	29	32
TOTAL	100% (1290)	40% (512)	19% (247)	20% (259)	19% (242)	2% (30)

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 7. Transportation Patterns for Various Subgroups of the Elderly.

Filter Variable	Time 1 Transportation Pattern	Time 2 Transportation Pattern			
		(n)	Completely Free to Go And Return As Want	Goes Out For Most Things	Goes Out For Special Occasions or Basic Necessities Only
Total Elderly		(1282)	68%	10%	22%
Household Composition***					
Alone		(387)	68	8	24
With spouse only		(502)	72	11	17
With spouse & children only		(100)	66	14	20
With children only		(98)	50	9	41
Other combinations		(195)	64	12	24
Age***					
65-69		(387)	78	11	11
70-74		(390)	72	9	19
75-79	NOT	(265)	66	12	22
80-84		(145)	50	13	37
85+	ASKED	(89)	33	7	60
Perceived Health***					
Excellent		(216)	85	7	8
Good		(530)	78	7	15
Fair		(390)	54	16	30
Poor		(102)	32	11	57
Number of Unmet Needs***					
None		(1154)	73	11	16
One		(93)	17	8	75
Two or more		(35)	11	9	80

Filter Variable	Time 1 Transportation Pattern	Time 2 Transportation Pattern			
		OF THOSE WHO ARE NOT COMPLETELY FREE HOW OFTEN THEY GET PLACES			
		(n)	As Often As Would Like	Most of Time	Not Nearly As Often
Total Elderly		(388)	22%	26%	52%
Household Composition					
Alone		(117)	20	24	56
With spouse only		(127)	20	27	53
With spouse & children only		(31)^A	29	23	48
With children only		(46)	30	26	44
Other combinations		(67)	19	27	54
Age**					
65-69		(83)	18	42	40
70-74		(100)	20	28	52
75-79	NOT	(85)	25	22	53
80-84		(66)	26	15	59
85+	ASKED	(54)	22	13	65
Perceived Health***					
Excellent		(29)^A	34	21	45
Good		(119)	23	37	40
Fair		(175)	23	24	53
Poor		(64)	11	11	78
Number of Unmet Needs***					
None		(286)	28	31	41
One		(72)	6	15	79
Two or more		(30)^A	0	0	100

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

^A The number of cases is too small to provide reliable percentage estimates.

Table 8. Transportation Modes and Perceived Problems for Various Subgroups of the Elderly.

Filter Variable	Time 1 Usual Mode of Transportation					Time 2 Usual Mode of Transportation				
	(n)	Car	Public Transportation	Taxi	Other	(n)	Car	Public Transportation	Taxi	Other
Total Elderly	(1661)	82%	11%	6%	1%	(1279)	80%	12%	6%	2%
Household Composition[**]										
Alone	(459)	69	20	10	1	(386)	72	18	8	2
With spouse only	(678)	88	6	4	2	(501)	85	9	5	1
With spouse & children only	(127)	89	6	5	0	(99)	86	8	6	0
With children only	(117)	81	11	7	1	(99)	82	11	7	0
Other combinations	(280)	83	11	4	2	(194)	82	11	5	2
Age[*]										
65-69	(588)	82	11	5	2	(386)	82	12	5	1
70-74	(446)	83	11	5	1	(389)	81	14	5	½
75-79	(319)	78	14	6	2	(264)	79	12	7	2
80-84	(196)	77	9	11	3	(144)	78	10	10	2
85+	(105)	84	6	8	2	(90)	80	9	10	1
Perceived Health										
Excellent	(294)	87	10	1	2	(214)	85	11	3	1
Good	(683)	81	12	5	2	(529)	83	11	5	1
Fair	(424)	77	12	9	2	(391)	75	15	8	2
Poor	(183)	79	7	13	1	(101)	79	10	11	0
Number of Unmet Needs[***]										
None						(1150)	82	12	5	1
One						(94)	67	17	12	4
Two or more						(35)	6G	11	20	9

Filter Variable	Time 1 Transportation Problem				Time 2 Transportation Problem			
	(n)	No Problem At All	Little Problem	Big Problem	(n)	No Problem At All	Little Problem	Big Problem
Total Elderly	(1664)	80%	13%	7%	(1278)	79%	14%	7%
Household Composition[*]								
Alone	(459)	77	14	9	(385)	76	16	8
With spouse only	(679)	82	13	5	(502)	84	11	5
With spouse & children only	(126)	78	17	5	(100)	81	14	5
With children only	(119)	80	10	10	(98)	74	15	11
Other combinations	(281)	78	11	11	(193)	76	18	6
Age[***]								
65-69	(591)	84	13	3	(389)	85	10	5
70-74	(446)	83	11	6	(388)	81	13	6
75-79	(318)	80	11	9	(266)	75	18	7
80-84	(198)	68	19	13	(143)	70	17	13
85+	(104)	63	18	19	(86)	68	16	16
Perceived Health[***]								
Excellent	(297)	93	5	2	(216)	93	5	2
Good	(685)	87	10	3	(530)	86	11	3
Fair	(419)	71	21	8	(388)	71	21	8
Poor	(184)	51	22	27	(101)	48	24	28
Number of Unmet Needs[***]								
None					(1152)	85	14	1
One					(91)	33	15	52
Two or more					(35)	17	20	63

[*] Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

[**] Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

[***] Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.4 Personal Care Need Assessment. The information in Table 9 indicates that, again, each of the subgroup differentiations (by household composition, age, perceived health and number of unmet needs) was significantly related to the need assessment in personal care. Bear in mind that the revised operational definition of need for personal care services categorized people with no need for personal care assistance on any of the five activities (bathing, dressing, eating, grooming and ambulation) as need met with no apparent problems, while people with an unmet need on any one of the five activities were categorized as having an unmet need. Anyone who was receiving help from another person to accomplish any of the activities was considered as meeting their need but with a potential problem. The elderly with the greatest likelihood of having an unmet need and current problems with personal care activities were those with an unmet need in any other social service area (55 percent), those rating their own health as poor (14 percent), those aged 80 through 84 years (nine percent), and those living with children only (eight percent). Those aged 85 or more were the least likely to have no potential proglems, but rather were meeting their personal care needs by means of help from other people. Apparently, the need for assistance in this area begins at 80 years of age, and many people aged 80 through 84 were still trying to solve the problem, but the problems are fairly well taken care of by age 85.

More specific information about the individual personal care areas is presented in Table 10. Considering the three areas which Katz incorporates into his traditional activities of daily living (ADL) index[3] for assessing differential functional abilities among those quite severely limited (bathing, dressing, and eating), more than nine out of ten respondents reported no need for assistance with bathing (91 percent), dressing (95 percent), or eating (98 percent). This order of increasing independence from bathing to dressing to eating is consistent with the Katz ADL Index. Two additional areas of personal care activities were also addressed, namely personal grooming and ambulation such as walking across a small room. Ninety-one percent reported no need for assistance with grooming, which is comparable to the level of independence found with bathing. Ninety-five percent reported no need for assistance with ambulation, comparable to the independence associated with dressing. Assistance with grooming was more often found outside the household than inside, probably reflecting the elderly's use of podiatrists to help with trimming toenails. There was about one percent who needed more help than they were receiving in bathing, grooming, and walking, as well as another one percent who need some initial help with bathing, dressing, grooming, and walking. This finding that some of those receiving help or assistance could still possibly benefit from additional assistance should be incorporated into other planning studies which typically assume that a person reporting assistance with a specific activity does not require additional help.

Table 9. Assessment of Need for Personal Care Services at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	Combined Personal Care			
		1. Need Met, No Apparent Problem	2. Need Met, Potential Problem	3. Uncertain Need Met, Potential Problem	4. Need Unmet, Current Problem
Total Elderly	(1282)	85%	12%	-	3%
Household Composition***					
Alone	(381)	88	7	-	5
With spouse only	(501)	88	10	-	2
With spouse & children only	(98)	92	5	-	3
With children only	(103)	67	25	-	8
Other combinations	(199)	78	19	-	3
Age***					
65-69	(377)	92	7	-	1
70-74	(386)	90	8	-	2
75-79	(267)	88	8	-	4
80-84	(148)	72	19	-	9
85+	(98)	51	43	-	6
Perceived Health***					
Excellent	(205)	97	3	-	0
Good	(521)	91	7	-	2
Fair	(392)	83	13	-	4
Poor	(112)	53	33	-	14
Number of Unmet Needs***					
None	(1130)	90	10	-	0
One	(108)	51	31	-	18
Two or more	(44)	34	11	-	55

Table 10. Assessment of Need for Personal Care Services at Time 2 by the Individual Care Activities for the Elderly.

	(n)	Individual Personal Care Areas				
		NO NEED	NEED MET		UNMET WITH HELP	UNMET NO HELP
			Total	Within House Support System	Outside House Support System	
Bathing	(1314)	91%	7%	5%	2%	1%	1%
Dressing	(1309)	95	4	3	1	½	1
Eating	(1306)	98	2	1	½	0	½
Grooming	(1303)	91	7	3	4	1	1
Ambulation	(1307)	95	3	2	1	1	1

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.5 Housekeeping Need Assessment. As indicated in Table 11, neither the household composition nor the age of the respondent was significantly related to the assessment of need for housekeeping services, though those aged 80 or more reported assistance from outside their households more often than others. Perceived health was again significantly related to the housekeeping need assessment, with those reporting poor health being much more likely to have an unmet need for housekeeping services (nine percent) than the total sample of elderly (two percent). Again the number of unmet needs was significantly related to this need assessment.

Table 12 indicates a fairly consistent pattern of who usually does the housekeeping, regardless of the categorization of need assessment. Housekeeping was reported done by someone outside of the household in about eight percent of the cases.

Table 13 demonstrates that those reporting poor perceived health and those with two or more unmet needs are most likely to report very serious housekeeping problems. Nearly one in four reported that their housekeeping situation was not satisfactory. In general, problems of difficulty in getting housekeeping done were more prevalent than problems of how well it was done, which in turn were more prevalent than problems of how often it was done. Poor perceived health and the number of unmet needs exacerbated these problems.

Table 11. Assessment of Need for Housekeeping Services at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	1. NEED MET, NO APPARENT PROBLEM				2. NEED MET, POTENTIAL PROBLEM				3. UNCERTAIN NEED MET, POTENTIAL PROBLEM	4. NEED UNMET, CURRENT PROBLEM
		Total	Self Sufficient	Within House Support System	Outside House Support System	Total	Self Sufficient	Within House Support System	Outside House Support System	Total	Total
Total Elderly	(1290)	86%	49%	30%	7%	4%	2%	1%	1%	8%	2%
Household Composition											
Alone	(388)	84	73	0	11	4	2	0	2	9	3
With spouse only	(502)	86	41	41	4	4	2	1	1	9	1
With spouse & children only	(99)	86	32	48	6	1	0	1	0	12	0
With children only	(103)	84	39	42	3	5	1	4	0	7	4
Other combinations	(198)	90	40	42	8	2	½	1	½	5	2
Age											
65-69	(382)	90	58	29	3	1	1	½	0	7	1
70-74	(389)	84	54	25	5	6	3	1	2	8	3
75-79	(271)	85	51	28	6	2	1	1	½	10	3
80-84	(148)	83	30	37	16	6	1	2	3	9	1
85+	(95)	81	27	38	16	5	0	3	2	12	2
Perceived Health***											
Excellent	(214)	96	63	27	6	1	1	0	0	2	0
Good	(527)	90	59	26	5	2	1	½	½	6	1
Fair	(391)	81	42	31	6	5	2	1	2	13	2
Poor	(108)	63	14	34	15	5	2	1	2	23	9
Number of Unmet Needs***											
None	(1142)	89	53	30	6	3	2	1	½	8	0
One	(105)	66	27	26	13	9	2	3	4	20	6
Two or more	(43)	34	9	9	16	9	0	0	9	9	47

Table 12. Assessment of Need for Housekeeping Services at Time 2 by Who Usually Does the Housekeeping.

	Total (n)	Who Usually Does Housekeeping					
		Self	Self and Other	Spouse	Other Household Member	Friend or Relative	Other
1. Need met, no apparent problem	86% (1108)	51%	7%	23%	11%	3%	5%
2. Need met, potential problem	3% (44)	46	0	11	16	7	20
3. Uncertain need met, potential problem	9% (111)	67	8	17	4	2	2
4. Need unmet, current problem	2% (26)	50	11	4	15	8	11
TOTAL	100% (1289)	52% (668)	7% (92)	22% (286)	11% (134)	3% (41)	5% (68)

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 13. Housekeeping Problems for Various Subgroups of the Elderly.

| | Time 1 Housekeeping Problem | | | | | Time 2 Housekeeping Problem | | | | |
| | | | | | | | | | | |
Filter Variable	(n)	Not a Problem	Not Too Serious Problem	Some-what Serious Problem	Very Serious Problem	(n)	Not a Problem	Not Too Serious Problem	Some-what Serious Problem	Very Serious Problem
Total Elderly	(1678)	92%	4%	3%	1%	(1310)	92%	4%	3%	1%
Household Composition*										
Alone	(463)	89	5	3	3	(393)	90	4	4	2
With spouse only	(683)	91	4	4	1	(510)	93	5	1	1
With spouse & children only	(127)	95	2	2	1	(100)	91	0	8	1
With children only	(120)	93	3	3	1	(106)	91	4	3	2
Other combinations	(285)	94	4	2	½	(201)	95	2	2	1
Age										
65-69	(593)	94	3	2	1	(391)	95	2	2	1
70-74	(450)	90	4	4	2	(392)	90	4	4	2
75-79	(321)	88	6	4	2	(273)	92	3	3	2
80-84	(200)	91	4	4	1	(151)	90	6	3	1
85+	(107)	92	2	3	3	(97)	90	4	5	1
Perceived Health***										
Excellent	(297)	98	1	1	½	(216)	98	2	0	0
Good	(687)	95	3	1	1	(534)	95	2	2	1
Fair	(430)	88	6	5	1	(396)	87	7	5	1
Poor	(186)	75	9	9	7	(112)	82	5	5	8
Number of Unmet Needs***										
None						(1154)	95	3	2	½
One						(111)	80	8	10	2
Two or more						(43)	44	7	19	30

| | Time 1 Housekeeping Problems | | Time 2 Housekeeping Problems | | | | | |
| | | | | OF THOSE WHO FEEL HOUSEKEEPING SITUATION NOT SATISFACTORY | | | | |
Filter Variable[A]			% House-keeping Situation Not Satis-factory (n)		(n)	% With Problem in How Often Housekeep-ing Done	% With Problem in How Well Housekeep-ing Done	% With Problem in How Difficult Housekeeping is to Do	% With Other Problem With House-keeping
Total Elderly			(1305)	23%	(288)	59%	69%	75%	15%
Household Composition									
Alone			(391)	30*	(114)	54	66	74	18
With spouse only			(510)	22	(105)[B]	62	71	78	16
With spouse & children only			(99)	18	(18)[B]	56	88	82	0
With children only			(105)	21	(19)[B]	68	79	33	9
Other combinations			(200)	17	(32)[B]	59	56	59	12
Age									
65-69			(386)	17	(64)	61	70	74	14
70-74			(392)	26	(101)	57	67	75	20
75-79			(272)	25	(66)	62	70	76	14
80-84			(151)	26	(35)[B]	59	68	82	6
85+			(96)	30	(25)[B]	50	71	63	14
Perceived Health									
Excellent	NOT		(216)	10***	(21)[B]	36*	50*	55***	20
Good			(531)	16	(87)	55	65	65	12
Fair	ASKED		(394)	34	(127)	60	70	80	15
Poor			(110)	45	(49)	72	84	90	17
Number of Unmet Needs									
None			(1150)	19***	(207)	52***	64*	72*	12*
One			(111)	.52	(51)[B]	72	78	76	16
Two or more			(43)	74	(31)[B]	84	84	93	36

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A]Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

[B]The number of cases is too small to provide reliable percentage estimates.

3.6 Social Activities Need Assessment. The concept of a need
assessment in social activities is slightly different from the other
need assessment areas. Clearly a public social service system cannot
provide close friends the way it can provide housekeepers, though an
agency could provide the opportunity for social interaction. Never-
theless, the revised operational definition for the assessment of
social activities incorporated both the dimension of opportunity for
social interaction no matter how casual and the dimension of having
close friends or confidants. Both dimensions were incorporated into
the behavioral component as outlined in Appendix B, with more social
activities being associated with the higher score on the additive
index. The evaluative component incorporated the elements of whether
the respondents saw as much of other people, relatives, close friends,
and confidants as each would want and of whether the respondents were
satisfied with their lives and the way they spend their time.

Table 14 presents the specific subgroup information relating to
the social activities need assessment. The distinction of being self-
sufficient or relying on support systems from either within or outside
the household which has been made for the previous need assessment area
is not germaine in this instance. Again, all four subgroup variables
were significantly related to this need assessment. Those living with-
out a spouse and/or children were twice as likely to have an unmet need
in social activities than the total sample of elderly (four percent
versus two percent).

Reaching age 80 did not have the dramatic increased association
with unmet need as has been noted in all the previous needs assessment
areas, but rather the relationship appears very stable and linear -
the older the respondent, the more likely he or she was to have potential
or current problems with social activities.

Those who report poor health again were more than five times as
likely to have an unmet need for socialization than the total elderly
sample.

Table 14. Assessment of Need for Additional Social Activities at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	Social Activities			
		1. Need Met, No Apparent Problem	2. Need Met, Potential Problem	3. Uncertain Need Met, Potential Problem	4. Need Unmet, Current Problem
Total Elderly	(1314)	70%	23%	4%	2%
Household Composition ***					
Alone	(396)	65	27	4	4
With spouse only	(510)	77	20	3	½
With spouse & children only	(101)	74	22	3	1
With children only	(105)	55	33	10	2
Other combinations	(202)	68	21	6	4
Age ***					
65-69	(391)	78	18	3	1
70-74	(393)	74	20	3	3
75-79	(274)	68	25	4	3
80-84	(151)	61	29	7	3
85+	(99)	42	44	9	4
Perceived Health ***					
Excellent	(215)	83	16	½	½
Good	(535)	79	18	2	1
Fair	(399)	68	26	3	3
Poor	(112)	39	34	16	11
Number of Unmet Needs ***					
None	(1155)	76	21	3	0
One	(113)	27	47	19	7
Two or more	(45)	9	31	11	49

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.7 Emergency Assistance Need Assessment. The concept of emergency assistance has both short term and long term dimensions. Short term emergency assistance is concerned with having someone to help or to call on the telephone if an accident occurred. Long term emergency assistance is concerned with having help available during times of illness. A respondent had to have an unmet need in both the short term and the long term emergency assistance dimensions in order to be categorized as having an unmet need in the combined emergency assistance area. The assignment of a respondent to one of the three remaining categories (of need met either with or without potential problems apparent, or uncertain need met) for combined emergency assistance was determined on the basis of the respondent's less positive categorization on either the long term or short term dimension.

Table 15 presents the specific subgroup information pertaining to the emergency assistance need assessment. As expected, household composition was significantly related to the combined, the short term, and the long term emergency assistance assessments, with those living alone being about three times more likely to have an unmet need than the total elderly. Age was not related to any of the emergency assistance assessments, and perceived health was related only to the combined assessment in the familiar pattern of those reporting poor health being twice as likely to have an unmet need than the total elderly. The number of unmet needs was significantly related to all emergency assistance assessments.

Table 16 presents more detailed information about who the respondents would call on to help if they were sick, and how available that person would be to help. Those with poorer perceived health and more unmet needs were significantly less likely to have someone to call. For the total elderly, 37 percent would rely on their spouse, another 19 percent would rely on another household member, with 41 percent or two out of five relying on friends and relatives outside the household. The reliance to this degree on the less convenient support network outside of the household is noteworthy. It bears mentioning also that the consistency of information from Time 1 to Time 2 in Table 16 should not be as stable as the preceding data because of several variations in data processing.*

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*In Time 1 the respondent's first mention was coded; at Time 2 multiple mentions were processed hierarchically (in order of spouse, other household member, friend or relative outside house, other) independent of the order of mention. That is, if a spouse was mentioned at all, not necessarily first, then the respondent's source was processed as spouse in Table 16.

Table 15. Assessment of Need for Both Short Term and Long Term Emergency Assistance Services at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	Combined Emergency Assistance			
		1. Need Met, No Apparent Problem	2. Need Met, Potential Problem	3. Uncertain Need Met, Potential Problem	4. Need Unmet, Current Problem
Total Elderly	(1299)	78%	9%	11%	2%
Household Composition***					
Alone	(385)	59	16	0	5
With spouse only	(508)	86	7	7	0
With spouse & children only	(101)	95	2	3	0
With children only	(105)	83	6	11	0
Other combinations	(200)	87	6	7	0
Age					
65-69	(387)	83	9	8	½
70-74	(390)	77	9	12	2
75-79	(273)	76	9	13	2
80-84	(148)	79	9	9	3
85+	(95)	73	10	13	4
Perceived Health*					
Excellent	(213)	80	8	11	1
Good	(532)	81	9	9	1
Fair	(398)	74	11	13	2
Poor	(111)	74	7	14	5
Number of Unmet Needs***					
None	(1144)	82	9	9	0
One	(110)	56	12	18	14
Two or more	(45)	44	9	36	11

Filter Variable A	Short Term Emergency Assistance					Long Term Emergency Assistance				
	1. Need Met, No Apparent Problem	2. Need Met, Potential Problem	3. Uncertain Need Met, Potential Problem	4. Need Unmet, Current Problem		1. Need Met, No Apparent Problem	2. Need Met, Potential Problem	3. Uncertain Need Met, Potential Problem	4. Need Unmet, Current Problem	
	(n)					(n)				
Total Elderly	(1299)	97%	1%	1%	1%	(1308)	79%	9%	11%	1%
Household Composition			***					***		
Alone	(383)	93	2	1	4	(391)	62	16	20	2
With spouse only	(511)	99	½	0	0	(508)	86	7	7	0
With spouse & children only	(101)	100	0	0	0	(101)	95	2	3	0
With children only	(104)	97	1	2	0	(106)	84	6	10	0
Other combinations	(200)	99	0	1	0	(202)	88	5	7	0
Age										
65-69	(386)	98	1	1	½	(390)	84	8	8	0
70-74	(390)	97	1	1	1	(392)	78	9	12	1
75-59	(274)	97	1	1	1	(273)	78	9	13	0
80-84	(149)	97	1	1	1	(149)	81	10	8	1
85+	(94)	96	0	1	3	(98)	74	11	14	1
Perceived Health								***		
Excellent	(216)	98	1	½	1	(213)	81	8	11	0
Good	(530)	98	1	½	1	(532)	82	9	9	0
Fair	(398)	97	1	1	1	(398)	75	11	14	0
Poor	(111)	95	0	3	2	(113)	76	7	12	5
Number of Unmet Needs			***					***		
None	(1147)	99	1	½	0	(1150)	83	8	9	0
One	(108)	86	0	2	12	(113)	62	14	22	2
Two or more	(44)	86	0	7	7	(45)	47	9	35	9

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

A Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 16. Emergency Assistance Arrangements for Various Subgroups of the Elderly.

Filter Variable[A]	Time 1 Someone to Call if Sick						Time 2 Someone to Call if Sick					
		% Having Someone to Call	OF THOSE HAVING SOMEONE TO CALL, PERSON IS					% Having Someone to Call	OF THOSE HAVING SOMEONE TO CALL, PERSON IS			
	(n)		(n)	Spouse[B]	House-hold Member	Friend or Relative	Other	(n)		(n)	Spouse[B]	House-hold Member	Friend or Relative	Other
Total Elderly	(1680)	88%	(1476)	–	37%	60%	3%	(1314)	91%	(1194)	37%	19%	41%	3%
Household Composition									***	----------***----------			
Alone	(463)	80	(364)	–	0	96	4	(394)	82	(324)	0	0	95	5
With spouse only	(685)	90	(617)	–	36	61	3	(511)	95	(484)	72	0	26	2
With spouse & children only	(127)	93	(118)	–	64	34	2	(101)	97	(98)	80	17	3	0
With children only	(120)	92	(109)	–	70	29	1	(106)	91	(97)	0	82	16	2
Other combinations	(285)	93	(262)	–	66	32	2	(202)	95	(192)	9	71	19	1
Age										----------***----------			
65-69	(594)	90	(536)	–	39	60	1	(391)	93	(365)	51	12	36	1
70-74	(449)	89	(398)	–	38	59	3	(394)	91	(357)	39	17	41	3
75-79	(323)	85	(272)	–	33	65	2	(275)	88	(243)	33	17	47	3
80-84	(200)	89	(174)	–	38	56	6	(150)	93	(140)	21	33	44	2
85+	(107)	84	(90)	–	40	53	7	(98)	87	(85)	12	46	40	2
Perceived Health									**	----------***----------			
Excellent	(296)	89	(259)	–	30	63	7	(216)	92	(199)	38	14	41	7
Good	(686)	93	(636)	–	37	61	2	(534)	93	(497)	38	17	44	1
Fair	(430)	84	(362)	–	37	61	2	(398)	89	(354)	36	22	41	1
Poor	(189)	80	(151)	–	52	47	1	(113)	83	(94)	36	30	34	0
Number of Unmet Needs									***	----------***----------			
None								(1155)	93	(1075)	39	18	41	2
One								(114)	80	(91)C	25	30	45	0
Two or more								(45)	62	(28)C	14	36	46	4

Filter Variable	Time 1 Someone to Call if Sick					Time 2 Someone to Call if Sick				
	OF THOSE HAVING SOMEONE TO CALL, HOW AVAILABLE PERSON IS					OF THOSE HAVING SOMEONE TO CALL, HOW AVAILABLE PERSON IS				
	(n)	Always Available	Often Available	Sometimes Available	Available on Emergency Basis Only	(n)	Always Available	Often Available	Sometimes Available	Available on Emergency Basis Only
Total Elderly	(1459)	74%	11%	9%	6%	(1189)	85%	9%	4%	2%
Household Composition ***										
Alone	(363)	70	14	10	6	(322)	76	11	8	5
With spouse only	(610)	71	12	10	7	(481)	90	7	2	1
With spouse & children only	(115)	78	8	11	3	(98)	92	7	1	0
With children only	(108)	78	7	9	6	(96)	80	16	3	1
Other combinations	(263)	80	10	7	3	(192)	89	6	3	2
Age										
65-69	(531)	73	13	9	5	(365)	88	8	2	2
70-74	(394)	75	11	8	6	(355)	84	9	3	4
75-79	(268)	73	11	9	7	(241)	85	9	4	2
80-84	(171)	74	11	9	6	(139)	83	6	9	2
85+	(90)	76	8	13	3	(85)	80	12	6	2
Perceived Health										
Excellent	(257)	73	14	9	4	(196)	86	8	3	3
Good	(629)	74	12	8	6	(495)	86	9	3	2
Fair	(356)	73	9	9	9	(354)	82	10	5	3
Poor	(150)	72	10	15	3	(94)	87	8	5	0
Number of Unmet Needs **										
None						(1071)	87	8	3	2
One						(90)C	73	13	9	4
Two or more						(28)C	68	11	11	11

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

A Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

B The Time 1 response categories for this item combined "Spouse" with "Household member".

C The number of cases is too small to provide reliable percentage estimates.

Table 16. Emergency Assistance Arrangements for Various Subgroups of the Elderly (continued).

Filter Variable	Time 1 Someone to Call in Emergency			Time 2 Someone to Call in Emergency		
	(n)	Yes	No	(n)	Yes	No
Total Elderly	(1622)	97%	3%	(1263)	97%	3%
Household Composition						
Alone	(455)	95	5	(385)	96	4
With spouse only	(662)	97	3	(492)	99	1
With spouse & children only	(125)	97	3	(96)	98	2
With children only	(112)	96	4	(97)	94	6
Other combinations	(268)	98	2	(193)	97	3
Age						
65-69	(577)	97	3	(382)	98	2
70-74	(442)	97	3	(381)	98	2
75-79	(309)	95	5	(262)	98	2
80-84	(192)	97	3	(143)	96	4
85+	(95)	96	4	(90)	93	7
Perceived Health***						
Excellent	(297)	97	3	(216)	98	2
Good	(683)	98	2	(531)	98	2
Fair	(425)	96	4	(397)	97	3
Poor	(187)	94	6	(111)	91	9
Number of Unmet Needs***						
None				(1120)	99	1
One				(100)	84	16
Two or More				(43)	81	19

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.8 Food Shopping Need Assessment. The assessment of need for food
shopping services (Table 17) was significantly related to the age, per-
ceived health, and number of unmet needs of the respondents, but not to
their household composition. When discussing subgroup variations, it is
helpful to keep the overall magnitude of the problem in perspective; the
level of unmet need for the total elderly sample was only one percent.
Nevertheless, the problems with food shopping that are attributable to
age appeared to gradually increase with increasing age, not to dramatically
excalate at any point such as over age 85 which we noted in several other
needs assessment areas. And as we have seen before, it is only when the
respondents report poor health that there is any association with potential
problems in meeting a need.

Table 18 provides more detailed information about who usually
does the food shopping in relation to the major need assessment categories.
There is considerable variability in who usually does the shopping within
the categories of need assessment, which precludes making any summary
generalizations. For the Time 2 responses, the "other" category in who
usually does the food shopping includes the 12 older people who reported
shopping by the telephone, though these people can quite logically be
considered self-sufficient in this area.

Reporting big problems with food shopping did not occur very often
(four percent), but those with poor health or any unmet needs were more
likely to have such problems (Table 19).

Table 17. Assessment of Need for Food Shopping Services at Time 2 by Various Subgroups of the Elderly.

| Filter Variable | (n) | 1. NEED MET, NO APPARENT PROBLEM | | | | 2. NEED MET, POTENTIAL PROBLEM | | | | 3. UNCERTAIN NEED MET, POTENTIAL PROBLEM | 4. NEED UNMET, CURRENT PROBLEM |
		Total	Self Sufficient	Within House Support System	Outside House Support System	Total	Self Sufficient	Within House Support System	Outside House Support System	Total	Total
Total Elderly	(1303)	86%	59%	21%	6%	9%	2%	5%	2%	4%	1%
Household Composition											
Alone	(391)	86	74	0	12	8	4	0	4	4	1
With spouse only	(508)	87	58	26	3	9	2	6	1	4	0
With spouse & children only	(100)	89	46	39	4	10	3	7	0	1	0
With children only	(106)	79	40	33	6	15	6	8	1	6	0
Other combinations	(198)	85	46	38	1	10	0	8	2	5	0
Age***											
65-69	(389)	90	64	23	3	5	2	3	½	4	1
70-74	(392)	88	63	20	5	8	3	4	1	3	1
75-79	(269)	84	61	16	7	10	3	5	2	5	1
80-84	(151)	83	46	24	13	11	1	7	3	5	1
85+	(95)	76	34	33	9	19	1	9	9	5	0
Perceived Health***											
Excellent	(216)	94	72	19	4	2	1	1	0	4	0
Good	(531)	93	67	21	5	5	2	1	2	1	1
Fair	(397)	86	55	24	7	7	3	2	2	6	1
Poor	(107)	72	26	34	12	17	3	9	5	11	0
Number of Unmet Needs***											
None	(1148)	90	63	22	5	8	2	4	2	2	0
One	(110)	59	29	19	11	25	5	15	5	15	1
Two or more	(44)	46	14	23	9	18	2	5	11	20	16

Table 18. Assessment of Need for Food Shopping Services at Time 2 By Who Usually Does the Food Shopping.

| | Total (n) | Who Usually Does Food Shopping | | | | | |
		Self	Self and Other	Spouse	Other Household Member	Friend or Relative	Other
1. Need met, no apparent problem	86% (1121)	49%	19%	15%	10%	4%	3%
2. Need met, potential problem	9% (121)	18	7	31	21	15	8
3. Uncertain need met, potential problem	4% (52)	37	10	15	11	15	11
4. Need unmet, current problem	1% (8)	75	0	0	0	12	12
TOTAL	100% (1302)	46% (602)	17% (223)	16% (210)	11% (147)	6% (74)	4% (46)

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 19. Food Shopping Problems for Various Subgroups of the Elderly.

| | Time 1 Food Shopping Problem | | | | Time 2 Food Shopping Problem | | | |
Filter Variable	(n)	No Problem At All	Some Problem	Big Problem	(n)	No Problem At All	Some Problem	Big Problem
Total Elderly	(1608)	83%	10%	7%	(1311)	85%	11%	4%
Household Composition								
Alone	(454)	78	14	8	(393)	81	14	5
With spouse only	(662)	85	9	6	(510)	87	9	4
With spouse & children only	(123)	84	10	6	(100)	92	7	1
With children only	(110)	83	8	9	(107)	87	8	5
Other combinations	(259)	84	9	7	(201)	86	11	3
Age								
65-69	(577)	86	9	5	(390)	90	6	4
70-74	(437)	86	8	6	(394)	85	12	3
75-79	(305)	78	15	7	(273)	81	15	4
80-84	(190)	78	12	10	(151)	83	12	5
85+	(92)	76	10	14	(97)	80	15	5
Perceived Health***								
Excellent	(295)	94	5	1	(216)	94	3	3
Good	(682)	88	7	5	(532)	89	9	2
Fair	(422)	77	15	8	(398)	80	14	6
Poor	(182)	60	20	20	(112)	67	25	8
Number of Unmet Needs***								
None					(1154)	89	9	2
One					(112)	62	25	13
Two or more					(45)	51	18	31

| | Time 1 Frequency of Food Shopping | | | | Time 2 Frequency of Food Shopping | | | |
Filter Variable					(n)	As Often As Would Like	Not Quite As Often	Not Nearly As Often
Total Elderly					(1260)	95%	4%	1%
Household Composition								
Alone					(387)	92	6	2
With spouse only					(490)	96	3	1
With spouse & children only					(95)	98	2	0
With children only					(97)	94	5	1
Other combinations					(191)	97	2	1
Age								
65-69					(383)	96	3	1
70-74					(381)	96	3	1
75-79					(259)	92	5	3
80-84		NOT			(144)	94	4	2
85+					(88)	94	6	0
Perceived Health*		ASKED						
Excellent					(216)	98	1	1
Good					(533)	96	3	1
Fair					(398)	93	5	2
Poor					(106)	91	6	3
Number of Unmet Needs***								
None					(1120)	97	3	½
One					(96)	80	16	4
Two or more					(44)	68	11	21

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.9 Food Preparation Need Assessment. Table 20 presents information
indicating that the food preparation need assessment was significantly
influenced by the household composition, perceived health, and number
of unmet needs of the respondents, but not by their age. Though the
overall rate of unmet need in the area of food preparation was very
low (one half percent), those living with their children were particularly
vulnerable, as were those who reported poor health. Relying on friends
or relatives for preparing one's food was accomplished without apparent
problem for the few respondents (n=17) who required it (Table 21).
Addressing only the evaluative dimension, three percent of all the elderly
reported a big problem with food preparation (Table 22).

Table 20. Assessment of Need for Food Preparation Services at Time 2 for Various Subgroups of the Elderly.

Filter Variable	(n)	1. NEED MET, NO APPARENT PROBLEM				2. NEED MET, POTENTIAL PROBLEM				3. UNCERTAIN NEED MET, POTENTIAL PROBLEM	4. NEED UNMET, CURRENT PROBLEM
		Total	Self Suf- ficient	Within House Sup- port System	Out- side House Sup- port System	Total	Self Suf- ficient	Within House Sup- port System	Out- side House Sup- port System	Total	Total
Total Elderly	(1286)	87%	54%	30%	3%	9%	7%	2%	½%	3%	½%
Household Composition***											
Alone	(383)	81	76	0	5	13	12	0	1	6	1
With spouse only	(503)	90	45	44	1	7	4	3	½	2	½
With spouse & children only	(100)	90	31	57	2	9	5	4	0	1	0
With children only	(103)	76	50	23	3	13	9	4	0	10	1
Other combinations	(198)	89	46	40	3	8	3	4	1	2	0
Age											
65-69	(386)	83	53	29	1	12	8	3	1	3	0
70-74	(388)	86	57	27	2	9	7	2	½	4	1
75-79	(266)	89	56	31	2	6	5	1	0	4	1
80-84	(150)	88	51	33	4	9	6	2	1	3	0
85+	(92)	84	35	40	9	12	7	4	1	4	0
Perceived Health***											
Excellent	(210)	90	55	29	5	7	5	2	½	2	0
Good	(526)	88	58	28	2	8	6	2	0	3	1
Fair	(392)	85	56	27	2	11	8	3	½	4	0
Poor	(108)	74	35	37	2	18	9	6	3	6	2
Number of Unmet Needs***											
None	(1137)	89	56	31	2	8	6	2	½	3	0
One	(107)	70	41	24	5	22	12	7	3	6	2
Two or more	(42)	51	26	19	5	27	21	2	5	14	7

Table 21. Assessment of Need for Food Preparation Services at Time 2 By Who Usually Prepares the Food.

		Who Usually Prepares Food					
	Total (n)	Self	Self and Other	Spouse	Other Household Member	Friend or Relative	Other
1. Need met, no apparent problem	87% (1110)	58%	4%	26%	8%	2%	2%
2. Need met, potential problem	9% (125)	63	6	17	9	0	5
3. Uncertain need met, potential problem	3% (46)	76	4	4	9	0	7
4. Need unmet, current problem	½% (5)	80	0	0	0	0	20
TOTAL	100% (1286)	60% (764)	4% (55)	25% (314)	8% (109)	1% (17)	2% (27)

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 22. Food Preparation Problems for Various Subgroups of the Elderly.

Filter Variable	Time 1 Food Preparation Problem	Time 2 Food Preparation Problem			
		(n)	No Problem	Little Problem	Big Problem
Total Elderly		(1313)	89%	8%	3%
Household Composition					
Alone		(393)	87	9	4
With spouse only		(510)	92	6	2
With spouse & children only		(101)	89	9	2
With children only		(107)	86	10	4
Other combinations		(202)	91	6	3
Age*					
65-69		(391)	93	5	2
70-74		(392)	89	8	3
75-79	NOT	(275)	90	8	2
80-84		(152)	84	10	6
85+	ASKED	(97)	85	11	4
Perceived Health***					
Excellent		(216)	96	2	2
Good		(534)	93	5	2
Fair		(399)	87	11	2
Poor		(112)	70	19	11
Number of Unmet Needs***					
None		(1156)	93	6	1
One		(112)	70	17	13
Two or more		(45)	51	29	20

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

3.10 Gender Differences in the Needs Assessment. A subsequent
statistical analysis was performed to determine whether men or women
showed any consistently different patterns in each area of need
assessment. Gender was associated with significant differences in
categorizations in seven areas (transportation, emergency assistance,
overall personal care, specific personal care of bathing, specific
personal care of grooming, housekeeping, and food preparation).
Gender was not significantly related to needs assessment in five other
areas (specific personal care of ambulation, specific personal care of
dressing, specific personal care of eating, social activities, and
food shopping). In every instance in which a significant difference
attributable to gender was found, females had greater problems or higher
levels of unmet needs than males, including the areas of such gender-
stereotyped activities as housekeeping and food preparation. Several
explanations of this information are possible. One is that the in-
creased longevity of women over men might possibly be due in part to
an increased number of women who are surviving with unmet needs in any
one of several social service areas. In other words, perhaps the men
with unmet needs are not surviving to the degree that women with unmet
needs are.

3.11 Additional Information on Activities of Daily Living. The utility of large scale quantitative studies like this is enhanced when the data collected is compatible to other data sources and thereby facilitates comparisons among different populations. To that end detailed information about the type of assistance the respondents reported receiving for each of the traditional activities of daily living areas[3] as well as for grooming is presented in Table 23*.

Table 23 indicates that 92 percent of the elderly were independent in bathing as defined by the ADL Index and eight percent required others to be involved, usually quite extensively. Two percent felt a need for additional help. The ADL definitions of independence reflect the more traditional measurement technique of simply determining who is getting what kind of help, but not addressing the corollary dimension of whether there is a perceived need for more help, either from those currently not receiving any assistance or from those currently receiving some help. Consequently, the ADL definition categorizes 92 percent of the total elderly as independent in bathing (Table 23), while my definition, which incorporates the dimension of perceived need for additional help into a single continuum, categorizes slightly less (91 percent) as having no need (Table 10).

The information on bathing at Time 2 in Table 23 also indicates that the household composition, age, perceived health, and number of unmet needs were significantly related to the independence of the respondents, and all but household composition were significantly related to their perceived need for additional help. Living with children only, being 85 years of age or older, and reporting poor health are the specific subgroups with much less independence in bathing at Time 2.

The subgroup analyses on bathing during the interim in Table 23 indicated a very similar pattern. The information on the situation during the interim suggests for bathing that the number of people who were dependent for any amount of time during the interim was not all that much greater than the number at either point in time. This relationship between the problems reported for any time during the interim and the problems reported at a specific point in time should be attended to closely as an indicator of the scope of the social service network that might be required to meet the needs of the elderly. If the data indicate that the number of people who require a service during a short term of 15 months greatly exceeds (for instance consider exceeding by a factor of ten) the number who require a service at any specific point in time, then the service network must have a considerable outreach component to

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*Notice that Table 23 provides descriptive information not only for the two points in time, but also for the interim between the two points. The interview schedule elicited responses about the practices and events which occurred between the interviews whenever appropriate.

identify the needy recipients and be administratively organized to
process many people quickly through the network. Alternatively,
if the data indicate that the number of people requiring a service
during the interim is not too many more (for instance twice as many)
than the number requiring a service at a specific point in time, the
service network can concentrate on a longer period of service pro-
vision for those eligible and concomitantly reduce the outreach
component.

The information concerning the ADL activity of dressing (Table 23)
suggests much the same pattern, except there was slightly less
dependence (two to four percent) with dressing at both points in
time and during the interim than was found with bathing. The subgroup
analyses again found all variables significantly related to independence
in dressing. Living alone, being 85 years old or more (and to some
degree just in the 80 through 84 years old category also), and reporting
poor health greatly increase the likelihood of needing another person's
help in dressing. The percentage reporting that they needed help during
the interim was again only slightly more than the percentage needing
help at either point in time, suggesting that needing help with this
ADL activity implies a fairly stable state of need.

The information on transferring from a bed to a chair is also
presented in Table 23, though the dimension was not incorporated in
the previous needs assessment definitions. As Katz has reported,
there is even less dependence in transferring than with bathing or
dressing. The pattern is stable over time, and showed only about
twice as many people needing help during the interim as needing help
at any point in time. Each of the subgroup analyses showed a sig-
nificant relationship with independence in transferring, with those
living with children only, those aged 80 through 84 or even more
when aged 85 or older, and those reporting poor health being much
more likely to be dependent in this area.

The dependence found in eating followed the expected pattern --
less dependence than the three previous activities; age, perceived
health, and number of unmet needs were significantly related to
dependence, though household composition was not; the percentage
getting help during the interim was about twice as large as the
percentage getting help at either point in time.

Information is also presented in Table 23 concerning the
dependence on others in the activities of grooming and walking
across a small room, activities which are not incorporated in
Katz's ADL index but were incorporated in these needs assessment
definitions. Independence in grooming is on a par with independence
with bathing at Time 2 (91 percent), while independence in walking
across a small room is on a par with independence in dressing at Time
2 (nearly 97 percent). Each of the subgroup analyses produced a
significant relationship both at Time 2 and during the interim between
the independent or filter variable and the dependent variables of
independence-dependence and the perceived need for additional help.

The percentage of people needing help with grooming during the interim was nearly equal to the percentage at either point in time which suggests remarkable stability within the group having needs. The percentage needing help walking across a small room during the interim was about three to four times as large as the percentage at either point in time.

When considering the independence reported overall for all the various activities of daily living, the pattern which emerged is one of remarkable stability over the short term. Likewise, household composition, age, perceived health, and the number of unmet needs were all significantly related both to independence-dependence and to the percent perceiving a need for additional help at both Time 2 and during the interim. Specifically, those living alone, those aged 80 through 84 to some degree but those aged 85 or older even more, and those reporting poor health were especially likely to be dependent in any of these activities. Lastly, the percentage who needed help with an activity during the interim was about twice as large as at any point in time, implying that the target population needing public support services is fairly stable.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time.

| | | | | Time 1 Bathing | | | | |
| | | INDEPENDENT[A] | | OTHERS INVOLVED | | | | Percent Feeling Need For Additional Help |
Filter Variable	(n)		Total	Stays in Room, Does Not Help[B]	Washes One Part of Body[B]	Washes More Than One Part of Body[B]	Completely Washes Respondent[B]	
Total Elderly	(1609)	94%	6%	(7)	(22)	(25)	(37)	3%
Household Composition								
Alone	(434)	98	2	(0)	(3)	(3)	(2)	4
With spouse only	(659)	94	6	(5)	(9)	(11)	(13)	2
With spouse & children only	(121)	97	3	(0)	(1)	(0)	(2)	4
With children only	(116)	85	14	(1)	(3)	(5)	(7)	4
Other combinations	(279)	90	10	(1)	(6)	(6)	(13)	1
Age								
65-69	(566)	97	3	(2)	(3)	(6)	(3)	1
70-74	(433)	95	5	(3)	(4)	(5)	(8)	3
75-79	(305)	97	3	(1)	(3)	(2)	(2)	3
80-84	(246)	87	13	(1)	(10)	(4)	(10)	5
85+	(146)	77	23	(0)	(2)	(8)	(14)	5
Perceived Health								
Excellent	(280)	100	½	(1)	(0)	(0)	(0)	1
Good	(656)	98	2	(1)	(3)	(3)	(9)	2
Fair	(414)	94	6	(3)	(7)	(7)	(8)	1
Poor	(182)	80	20	(1)	(10)	(12)	(11)	10
Number of Unmet Needs								
None								
One								
Two or more								

| | | | | Time 2 Bathing | | | | |
| | | INDEPENDENT[A] | | OTHERS INVOLVED | | | | Percent Feeling Need For Additional Help |
Filter Variable[C]	(n)		Total	Stays in Room, Does Not Help[B]	Washes One Part of Body[B]	Washes More Than One Part of Body[B]	Completely Washes Respondent[B]	
Total Elderly	(1310)	92%	8%	(15)	(25)	(21)	(39)	2%
Household Composition		-----***-----						
Alone	(393)	96	4	(2)	(4)	(2)	(8)	3
With spouse only	(509)	93	7	(8)	(9)	(7)	(10)	1
With spouse & children only	(101)	96	4	(0)	(2)	(1)	(1)	2
With children only	(106)	80	20	(2)	(6)	(6)	(7)	3
Other combinations	(201)	87	13	(3)	(4)	(5)	(13)	1
Age		-----***-----						**
65-69	(387)	96	4	(3)	(4)	(3)	(2)	½
70-74	(393)	96	4	(1)	(4)	(5)	(6)	1
75-79	(273)	95	5	(3)	(4)	(2)	(5)	2
80-84	(151)	84	16	(3)	(5)	(5)	(12)	5
85+	(99)	67	33	(5)	(8)	(6)	(14)	3
Perceived Health		-----***-----						***
Excellent	(215)	99	1	(0)	(1)	(1)	(1)	0
Good	(533)	97	3	(4)	(2)	(4)	(5)	1
Fair	(399)	91	9	(7)	(10)	(8)	(9)	2
Poor	(112)	70	30	(2)	(10)	(4)	(16)	7
Number of Unmet Needs		-----***-----						***
None	(1157)	95	5	(9)	(15)	(14)	(19)	0
One	(111)	70	30	(5)	(8)	(7)	(12)	6
Two or more	(45)	76	24	(1)	(2)	(0)	(8)	31

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

A Includes those who reported taking sponge baths only. This was 6 percent of total elderly at Time 1.

B These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim and unadjusted for Time 2.

C Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Time 2 Filter Variable[C]	INDEPENDENT[A] (n)	INDEPENDENT[A]	OTHERS INVOLVED Total	Stays in Room, Does Not Help[B]	Washes One Part of Body[B]	Washes More Than One Part of Body[B]	Completely Washes Respondent[B]	Percer Feelin Need F Additi al Hel
Total Elderly	(1308)	89%	11%	(19)	(34)	(37)	(53)	2%
Household Composition		-----***-----						*
Alone	(392)	92	8	(5)	(7)	(7)	(13)	3
With spouse only	(509)	90	10	(9)	(13)	(12)	(18)	1
With spouse & children only	(101)	93	7	(0)	(2)	(3)	(1)	2
With children only	(105)	79	21	(2)	(7)	(6)	(7)	6
Other combinations	(201)	84	16	(3)	(5)	(9)	(14)	1
Age		-----***-----						***
65-69	(387)	94	6	(4)	(6)	(6)	(4)	1
70-74	(391)	92	8	(3)	(6)	(11)	(12)	1
75-79	(273)	91	9	(4)	(7)	(5)	(8)	2
80-84	(151)	79	21	(3)	(6)	(8)	(15)	6
85+	(99)	65	35	(5)	(9)	(7)	(14)	4
Perceived Health		-----***-----						***
Excellent	(215)	97	2	(0)	(1)	(1)	(3)	0
Good	(533)	95	5	(5)	(7)	(7)	(5)	1
Fair	(399)	86	14	(9)	(13)	(15)	(16)	3
Poor	(111)	61	39	(3)	(11)	(9)	(20)	8
Number of Unmet Needs		-----***-----						***
None	(1156)	92	8	(13)	(22)	(25)	(26)	½
One	(111)	64	36	(5)	(8)	(8)	(18)	9
Two or more	(45)	60	40	(1)	(4)	(4)	(9)	31

* Interim distribution significantly influenced by this filter variable at .05 level (chi square).

** Interim distribution significantly influenced by this filter variable at .01 level (chi square).

*** Interim distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Includes those who reported taking sponge baths only.

[B] These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim and unadjusted for Time 2.

[C] Notice that the chi square significance level (.05, .01, .001) of the Interim distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

			Time 1 Dressing					
	INDEPENDENT[A]		OTHERS INVOLVED					Percent Feeling Need for Additional Help
Filter Variable	(n)	Total	Stays in Room, Does Not Help[B]	Helps By Tying Shoes Only[B]	Helps With More Than Tying Shoes[B]	Completely Dresses Respondent[B]	
Total Elderly	(1645)	96%	4%	(3)	(3)	(33)	(19)	2%
Household Composition								
Alone	(453)	99	1	(1)	(0)	(2)	(1)	3
With spouse only	(669)	96	4	(0)	(2)	(13)	(8)	1
With spouse & children only	(125)	97	3	(0)	(0)	(2)	(1)	2
With children only	(119)	92	8	(0)	(0)	(3)	(6)	3
Other combinations	(279)	93	7	(2)	(1)	(13)	(3)	2
Age								
65-69	(581)	98	2	(0)	(0)	(9)	(2)	2
70-74	(445)	97	3	(0)	(1)	(7)	(5)	2
75-79	(314)	97	1	(0)	(0)	(1)	(1)	1
80-84	(195)	91	9	(2)	(2)	(8)	(6)	3
85+	(107)	86	14	(1)	(0)	(8)	(5)	3
Perceived Health								
Excellent	(291)	99	1	(0)	(0)	(1)	(1)	1
Good	(673)	98	2	(1)	(1)	(6)	(4)	1
Fair	(421)	97	3	(0)	(1)	(8)	(2)	1
Poor	(185)	87	12	(1)	(1)	(15)	(6)	5
Number of Unmet Needs								
None								
One								
Two or more								

			Time 2 Dressing					
	INDEPENDENT[A]		OTHERS INVOLVED					Percent Feeling Need for Additional Help
Filter Variable[C]	(n)	Total	Stays in Room, Does Not Help[B]	Helps By Tying Shoes Only[B]	Helps With More Than Tying Shoes[B]	Completely Dresses Respondent[B]	
Total Elderly	(1313)	96%	4%	(2)	(7)	(26)	(21)	1%
Household Composition	-----***-----							**
Alone	(394)	99	1	(0)	(1)	(1)	(1)	2
With spouse only	(510)	95	5	(1)	(5)	(14)	(3)	½
With spouse & children only	(101)	98	2	(0)	(0)	(0)	(2)	0
With children only	(107)	87	13	(0)	(0)	(6)	(7)	1
Other combinations	(201)	92	8	(1)	(1)	(5)	(8)	1
Age	-----***-----							
65-69	(389)	97	3	(1)	(1)	(6)	(1)	½
70-74	(393)	97	3	(0)	(3)	(7)	(1)	½
75-79	(274)	97	3	(0)	(0)	(3)	(4)	·1
80-84	(151)	90	10	(1)	(2)	(5)	(7)	1
85+	(99)	86	14	(0)	(1)	(5)	(8)	3
Perceived Health	-----***-----							***
Excellent	(215)	99	1	(0)	(1)	(0)	(0)	0
Good	(533)	99	1	(1)	(2)	(5)	(0)	½
Fair	(397)	95	5	(1)	(2)	(8)	(5)	1
Poor	(112)	82	18	(0)	(2)	(7)	(11)	5
Number of Unmet Needs	-----***-----							***
None	(1157)	97	3	(2)	(6)	(13)	(9)	0
One	(113)	81	19	(0)	(1)	(11)	(9)	2
Two or more	(45)	89	11	(0)	(0)	(2)	(3)	18

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Includes those who reported using special devices but not other people. This was 2 percent of total elderly at Time 1.

[B] These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim and unadjusted for Time 2.

[C] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Time 2 Filter Variable[C]	(n)	INDEPENDENT[A]	Interim Dressing Total	Stays in Room, Does Not Help[B]	Helps by Tying Shoes Only[B]	Helps With More Than Tying Shoes[B]	Completely Dresses Respondent[B]	Percent Feeling Need For Additional Help
Total Elderly	(1312)	93%	7%	(6)	(11)	(42)	(32)	1%
Household Composition		-----***----						
Alone	(394)	97	3	(3)	(1)	(4)	(4)	2
With spouse only	(509)	93	7	(1)	(7)	(19)	(8)	1
With spouse & children only	(101)	96	4	(0)	(1)	(0)	(3)	2
With children only	(107)	83	17	(0)	(0)	(8)	(9)	4
Other combinations	(201)	88	12	(2)	(2)	(11)	(8)	1
Age		-----***----						*
65-69	(389)	96	4	(2)	(2)	(8)	(2)	1
70-74	(394)	94	6	(2)	(4)	(12)	(5)	½
75-79	(273)	95	5	(0)	(2)	(6)	(6)	2
80-84	(151)	85	15	(2)	(2)	(9)	(10)	1
85+	(99)	83	17	(0)	(1)	(7)	(9)	4
Perceived Health		-----***----						***
Excellent	(215)	99	1	(0)	(1)	(1)	(0)	0
Good	(533)	97	3	(3)	(3)	(11)	(1)	1
Fair	(398)	92	8	(2)	(3)	(13)	(10)	1
Poor	(111)	74	26	(0)	(3)	(11)	(15)	7
Number of Unmet Needs		-----***----						***
None	(1158)	95	5	(4)	(10)	(25)	(15)	½
One	(113)	74	26	(2)	(1)	(14)	(12)	6
Two or more	(45)	82	18	(0)	(0)	(3)	(5)	20

* Interim distribution significantly influenced by this filter variable at .05 level (chi square).

** Interim distribution significantly influenced by this filter variable at .01 level (chi square).

*** Interim distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Includes those who reported using special devices but not other people.

[B] These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim and unadjusted for Time 2.

[C] Notice that the chi square significance level (.05, .01, .001) of the Interim distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Filter Variable	Time 1 Transferring			Time 2 Transferring		
	(n)	Independent	Others Involved	(n)	Independent	Others Involved
Total Elderly	(1683)	97%	3%	(1269)	98%	2%
Household Composition***						
Alone	(466)	99	1	(379)	99	1
With spouse only	(685)	97	3	(497)	99	1
With spouse & children only	(127)	98	2	(96)	98	2
With children only	(119)	93	7	(103)	91	9
Other combinations	(286)	96	4	(194)	96	4
Age***						
65-69	(595)	99	1	(384)	99	1
70-74	(450)	97	3	(379)	98	2
75-79	(323)	99	1	(260)	98	2
80-84	(200)	93	6	(146)	95	5
85+	(108)	92	8	(95)	93	7
Perceived Health***						
Excellent	(297)	99	1	(212)	99	1
Good	(688)	99	1	(521)	100	½
Fair	(431)	98	2	(378)	98	2
Poor	(189)	92	8	(108)	91	9
Number of Unmet Needs***						
None				(1127)	99	1
One				(100)	87	13
Two or more				(42)	86	14

Time 2 Filter Variable	Interim Transferring		
	(n)	Independent	Others Involved
Total Elderly	(1267)	95%	5%
Household Composition**			
Alone	(379)	96	4
With spouse only	(496)	96	4
With spouse & children only	(96)	97	3
With children only	(103)	88	12
Other combinations	(193)	92	8
Age***			
65-69	(384)	98	2
70-74	(377)	95	5
75-79	(260)	95	5
80-84	(146)	92	8
85+	(95)	85	15
Perceived Health***			
Excellent	(212)	98	2
Good	(520)	98	2
Fair	(378)	95	5
Poor	(108)	81	19
Number of Unmet Needs***			
None	(1126)	97	3
One	(99)	82	18
Two or more	(42)	67	33

* Time 2 and/or Interim distribution significantly influenced by this filter variable at .05 level (chi square).
** Time 2 and/or Interim distribution significantly influenced by this filter variable at .01 level (chi square).
*** Time 2 and/or Interim distribution significantly influenced by this filter variable at .001 level (chi square).

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Filter Variable	INDEPENDENT[A] (n)	%	OTHERS INVOLVED Total	Stays in Room, Does Not Help[B]	Helps by Cutting Meats or Buttering Bread[B]	Helps With More Than Cutting Meats or Buttering Bread[B]	Completely Feeds Respondent[B]	Percent Feeling Need For Additional Help
Time 1 Eating								
Total Elderly	(1679)	99%	1%	(2)	(9)	(7)	(2)	1%
Household Composition								
Alone	(469)	100	½	(0)	(0)	(0)	(1)	2
With spouse only	(681)	99	1	(0)	(4)	(2)	(1)	1
With spouse & children only	(127)	99	1	(0)	(1)	(0)	(0)	1
With children only	(119)	96	4	(0)	(1)	(3)	(1)	0
Other combinations	(283)	98	2	(2)	(3)	(2)	(0)	2
Age								
65-69	(591)	99	1	(0)	(2)	(0)	(1)	1
70-74	(447)	99	1	(0)	(1)	(3)	(0)	2
75-79	(319)	100	0	(0)	(0)	(0)	(0)	1
80-84	(199)	97	4	(1)	(2)	(3)	(1)	1
85+	(107)	94	7	(1)	(4)	(1)	(1)	3
Perceived Health								
Excellent	(295)	100	0	(0)	(0)	(0)	(0)	½
Good	(683)	99	1	(0)	(5)	(1)	(0)	1
Fair	(427)	99	1	(2)	(1)	(1)	(0)	2
Poor	(187)	97	3	(0)	(1)	(4)	(1)	3
Number of Unmet Needs								
None								
One								
Two or more								

Filter Variable[C]	INDEPENDENT[A] (n)	%	OTHERS INVOLVED Total	Stays in Room, Does Not Help[B]	Helps by Cutting Meats or Buttering Bread[B]	Helps With More Than Cutting Meats or Buttering Bread[B]	Completely Feeds Respondent[B]	Percent Feeling Need For Additional Help
Time 2 Eating								
Total Elderly	(1310)	99%	1%	(0)	(7)	(4)	(7)	½%
Household Composition								
Alone	(393)	99	1	(0)	(0)	(1)	(1)	½
With spouse only	(509)	98	2	(0)	(4)	(2)	(2)	0
With spouse & children only	(101)	99		(0)	(0)	(0)	(1)	0
With children only	(106)	97	3	(0)	(1)	(0)	(2)	0
Other combinations	(201)	98	2	(0)	(2)	(1)	(1)	0
Age -----***-----								
65-69	(387)	99	1	(0)	(1)	(1)	(0)	0
70-74	(393)	99	1	(0)	(3)	(1)	(1)	0
75-79	(273)	100	0	(0)	(0)	(0)	(0)	0
80-84	(151)	97	3	(0)	(2)	(0)	(3)	1
85+	(99)	94	6	(0)	(1)	(2)	(3)	0
Perceived Health -----***-----								*
Excellent	(215)	99	1	(0)	(1)	(0)	(0)	0
Good	(531)	100	0	(0)	(0)	(0)	(0)	½
Fair	(399)	99	1	(0)	(3)	(0)	(1)	0
Poor	(112)	96	4	(0)	(1)	(2)	(1)	0
Number of Unmet Needs -----***-----								***
None	(1157)	99	1	(0)	(4)	(2)	(4)	0
One	(112)	94	6	(0)	(3)	(2)	(2)	1
Two or more	(45)	98	2	(0)	(0)	(0)	(1)	0

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

A Includes those who reported using special devices but not other people. This was 2 percent of total elderly at Time 1.

B These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim, and unadjusted for Time 2.

C Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Time 2 Filter Variable[C]	INDEPENDENT[A]		Interim Eating					Percent Feeling Need For Additional Help
				OTHERS INVOLVED				
	(n)	%	Total	Stays in Room, Does Not Help[B]	Helps by Cutting Meats or Buttering Bread[B]	Helps With More Than Cutting Meats or Buttering read[B]	Completely Feeds Respondent[B]	
Total Elderly	(1308)	97%	3%	(1)	(12)	(6)	(14)	1%
Household Composition								
Alone	(393)	98	2	(1)	(1)	(1)	(3)	½
With spouse only	(509)	97	3	(0)	(5)	(4)	(4)	½
With spouse & children only	(100)	99	1	(0)	(0)	(0)	(1)	0
With children only	(105)	94	6	(0)	(3)	(0)	(3)	2
Other combinations	(201)	96	4	(0)	(3)	(1)	(3)	1
Age		----***----						
65-69	(387)	99	1	(1)	(1)	(1)	(1)	1
70-74	(393)	97	3	(0)	(5)	(3)	(3)	½
75-79	(273)	99	1	(0)	(2)	(0)	(1)	0
80-84	(151)	95	5	(0)	(2)	(0)	(5)	1
85+	(99)	92	8	(0)	(2)	(2)	(4)	1
Perceived Health		----***----						*
Excellent	(215)	99	1	(0)	(2)	(0)	(0)	0
Good	(531)	99	1	(0)	(1)	(0)	(1)	½
Fair	(399)	97	3	(1)	(5)	(2)	(4)	½
Poor	(112)	93	7	(0)	(2)	(2)	(4)	2
Number of Unmet Needs		----***----						***
None	(1157)	98	2	(0)	(8)	(4)	(9)	½
One	(112)	92	8	(1)	(3)	(2)	(3)	3
Two or more	(45)	93	7	(0)	(1)	(0)	(2)	4

*
 Interim distribution significantly influenced by this filter variable at .05 level (chi square).

**
 Interim distribution significantly influenced by this filter variable at .01 level (chi square).

***
 Interim distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Includes those who reported using special devices but not other people.

[B] These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim, and unadjusted for Time 2.

[C] Notice that the chi square significance level (.05, .01, .001) of the Interim distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Filter Variable	(n)	INDEPENDENT	OTHERS INVOLVED Total	Helps Every Day[A]	Helps Few Times A Week[A]	Helps Once A Week[A]	Helps Less Often[A]	Percent Feeling Need For Additional Help
			Time 1 Grooming					
Total Elderly	(1684)	89%	11%	(39)	(15)	(17)	(103)	2%
Household Composition								
Alone	(466)	91	9	(2)	(1)	(4)	(34)	3
With spouse only	(685)	92	8	(13)	(4)	(5)	(31)	1
With spouse & children only	(127)	93	7	(2)	(2)	(1)	(3)	1
With children only	(120)	79	21	(7)	(4)	(4)	(10)	3
Other combinations	(286)	83	17	(15)	(4)	(3)	(25)	2
Age								
65-69	(595)	95	5	(5)	(1)	(1)	(24)	1
70-74	(450)	90	10	(11)	(4)	(7)	(20)	1
75-79	(323)	93	7	(0)	(1)	(2)	(19)	2
80-84	(201)	79	21	(10)	(7)	(4)	(21)	3
85+	(108)	66	34	(13)	(2)	(3)	(19)	4
Perceived Health								
Excellent	(297)	96	4	(0)	(0)	(0)	(12)	0
Good	(688)	92	8	(6)	(4)	(7)	(35)	1
Fair	(431)	90	10	(8)	(1)	(6)	(26)	3
Poor	(189)	73	27	(12)	(9)	(4)	(23)	4
Number of Unmet Needs								
None								
One								
Two or more								

Filter Variable[B]	(n)	INDEPENDENT	OTHERS INVOLVED Total	Helps Every Day[A]	Helps Few Times a Week[A]	Helps Once A Week[A]	Helps Less Often[A]	Percent Feeling Need For Additional Help
			Time 2 Grooming					
Total Elderly	(1312)	91%	9%	(32)	(12)	(13)	(56)	1%
Household Composition		-------***-------						*
Alone	(393)	93	7	(5)	(2)	(5)	(17)	2
With spouse only	(511)	95	5	(6)	(5)	(1)	(16)	1
With spouse & children only	(101)	94	6	(1)	(1)	(1)	(3)	1
With children only	(106)	79	21	(9)	(3)	(5)	(5)	3
Other combinations	(201)	86	14	(11)	(1)	(1)	(15)	1
Age		-------***-------						*
65-69	(389)	96	4	(2)	(1)	(0)	(11)	½
70-74	(392)	93	7	(4)	(3)	(3)	(17)	1
75-79	(275)	93	7	(4)	(5)	(3)	(7)	2
80-84	(152)	84	16	(9)	(1)	(4)	(10)	4
85+	(98)	70	30	(13)	(2)	(3)	(11)	1
Perceived Health		-------***-------						**
Excellent	(216)	98	2	(0)	(1)	(0)	(4)	0
Good	(532)	94	6	(5)	(3)	(2)	(22)	1
Fair	(398)	93	7	(4)	(2)	(6)	(18)	1
Poor	(112)	71	29	(15)	(3)	(4)	(11)	5
Number of Unmet Needs		-------***-------						***
None	(1157)	94	6	(13)	(8)	(7)	(44)	0
One	(111)	76	24	(14)	(3)	(4)	(6)	5
Two or more	(44)	68	32	(5)	(1)	(2)	(6)	27

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] These are the actual number of respondents who require specific kinds of assistance from other people, adjusted for Time 1, unadjusted for Interim and unadjusted for Time 2.

[B] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Time 2 Filter Variable[A]	(n)	Interim Grooming		Percent Feeling Need For Additional Help
		Independent	Others Involved	
Total Elderly	(1311)	90%	10%	2%
Household Composition		----------------***---------------		***
Alone	(393)	91	9	3
With spouse only	(510)	93	7	1
With spouse & children only	(101)	92	8	1
With children only	(106)	78	22	8
Other combinations	(201)	84	16	1
Age		----------------***--------------		***
65-69	(388)	95	5	1
70-74	(391)	92	8	1
75-79	(275)	92	8	3
80-84	(152)	84	16	7
85+	(99)	67	33	2
Perceived Health		---------------***------------—		***
Excellent	(216)	98	2	0
Good	(531)	94	6	1
Fair	(398)	90	10	3
Poor	(112)	67	33	7
Number of Unmet Needs		------------***----------—		***
None	(1155)	93	7	½
One	(111)	73	27	10
Two or more	(45)	62	38	29

* Interim distribution significantly influenced by this filter variable at .05 level (chi square).

** Interim distribution significantly influenced by this filter variable at .01 level (chi square).

*** Interim distribution.significantly influenced by this filter variable at .001 level (chi square).

A Notice that the chi square significance level (.05, .01, .001) of the Interim distribution by each filter variable is included in the table itself.

Table 23. Activities of Daily Living Information for Various Subgroups of the Elderly at Two Points in Time (continued).

Filter Variable[B]	Time 1 Walking Across A Small Room				Time 2 Walking Across A Small Room			
	(n)	Independent[A]	Others Involved	Percent Feeling Need For Additional Help	(n)	Independent[A]	Others Involved	Percent Feeling Need For Additional Help
Total Elderly	(1668)	99%	1%	5%	(1311)	97%	3%	2%
Household Composition						------**------		*
Alone	(461)	100	½	7	(392)	98	2	3
With spouse only	(680)	99	1	4	(510)	98	2	1
With spouse & children only	(126)	99	1	4	(101)	97	3	2
With children only	(119)	95	5	2	(107)	91	9	5
Other combinations	(282)	99	1	5	(202)	95	5	1
Age						------***------		**
65-69	(591)	100	½	4	(389)	99	1	1
70-74	(448)	99	1	6	(392)	99	1	1
75-79	(321)	100	½	5	(273)	96	4	2
80-84	(198)	96	4	6	(152)	91	9	6
85+	(105)	98	2	6	(99)	88	12	3
Perceived Health						------***-----		***
Excellent	(297)	100	0	2	(215)	99	1	½
Good	(685)	100	½	4	(532)	99	1	1
Fair	(427)	99	1	6	(397)	97	3	3
Poor	(185)	96	4	14	(113)	87	13	11
Number of Unmet Needs						------***-----		***
None					(1157)	98	2	0
One					(114)	86	14	10
Two or more					(45)	78	22	31

Time 2 Filter Variable[B]	Interim Walking Across A Small Room		
	(n)	Independent[A]	Others Involved	Percent Feeling Need For Additional Help
Total Elderly	(1310)	91%	9%	3%
Household Composition		------***-----		**
Alone	(391)	94	6	4
With spouse only	(510)	92	8	2
With spouse & children only	(101)	92	8	4
With children only	(106)	84	16	9
Other combinations	(201)	87	13	1
Age		------***-----		*
65-69	(389)	96	4	2
70-74	(392)	92	8	3
75-79	(273)	91	9	3
80-84	(151)	85	15	7
85+	(98)	81	19	3
Perceived Health		------***-----		***
Excellent	(215)	97	3	1
Good	(535)	96	4	1
Fair	(397)	89	11	4
Poor	(113)	74	26	12
Number of Unmet Needs		------***-----		***
None	(1157)	94	6	½
One	(114)	77	23	18
Two or more	(45)	58	42	33

* Time 2 and/or Interim distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 and/or Interim distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 and/or Interim distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Includes those who reported using special devices but not other people. This was 7 percent of total elderly at Time 1.

[B] Notice that the chi square significance level (.05, .01, .001) of the Time 2 and/or Interim distribution by each filter variable is included in the table itself.

3.12 Health Status. Many items in the questionnaire addressed the respondents' current health status. One item, perceived health (excellent, good, fair or poor), has been used in the subgroup analyses and has been found to be significantly related to most of the needs assessment information. Nearly 60 percent of all the elderly reported their perceived health as excellent or good, and only nine percent perceived their health as poor (Table 24); the category of poor health has been associated with unmet needs and problems in the previous needs assessment analyses. The significant relationship between age and perceived health is generally linear - the older the respondent, the poorer the self-perception of health. The household composition had no significant relationship with perceived health.

The distribution percentages for perceived health is quite stable over the two points in time. The stability of the basic information is a factor to carefully address in the forthcoming sections.

Nearly 60 percent of the elderly reported their health as better than other people their age; only nine percent thought their health was worse (Table 24). The significant relationship of these Time 2 answers with the age, perceived health, and number of unmet needs of the respondents (not household composition though) was likewise generally linear, but the direction of the linearity in age is very interesting - the older the age group, the more likely the respondents perceived their health as better than others their own age. The stability over time across all subgroups was again considerable.

The lack of a statistically significant relationship between the household composition and both self-perceptions of health merits attention. The frequent assumption that the family of an older person might provide informal support when the older person's health fails is apparently unsupported for these two items, though we previously have seen that those living with their children were nearly always more likely to have problems meeting their needs. More elderly with poorer perceived health were found in the households with children, but not statistically significantly so. As we will note in later sections, this assumption of a reliance on the family does again receive support with some other items.

The four items that comprise Rosow's Functional Health Scale[4] provide information about the current functional abilities of the respondents. One assumption of the Rosow Functional Health Scale is that the items are Guttmanized; the loss of ability would occur in a specific order. The four items are presented in this assumed order in Table 25. The person with the best functional health would have an affirmative response to each of the four items. The loss of functioning would begin with an inability to do heavy work, then the existence of a current illness or health problem that bothers the person, then the inability to walk a half mile, and finally the inability to walk up and down stairs.

However, the data obtained from the elderly sample are not in accordance with that Guttmanized order. At the aggregate level, the percentage of respondents with a current illness or health problem is greater than the percentage who are unable to do heavy work. On the individual level, the coefficient of reproducibility was .75 for that order of the items. The coefficient of reproducibility increases to .82 when the order of items correctly reflects the elderly's reported levels of functional abilities.

Three of the individual items were significantly related to household composition in support of the assumption of a reliance on the family, while without current illness or health problem was not. All four of the items were significantly related to age with the level of functioning decreasing sharply for the 80 through 84 and 85 or more age groups. As would be expected, the response pattern was significantly influenced by perceived health with those respondents who reported poor health indicating a lower level of functioning. Those people with one or more unmet needs maintained a significantly lower level of functioning.

The stability of the data over time is uncharacteristically lower for the item concerning whether a current illness or health problem is bothering the respondent than we have seen for all the previous items. It is quite possible that a procedural change in the manner of getting this specific information altered the distribution. The Time 2 interview schedule contained a sequence of three questions to ascertain whether or not the respondent was bothered by a current illness or health problem. Each person was first asked if there had been a physical condition, illness or health problem that had bothered him/her at any time during the 15 month interval between the Time 1 and Time 2 interviews. The ensuing question asked for a specification of the health problem; then for each problem mentioned, the respondent was asked whether or not it still bothered the respondent at the present time.

Notwithstanding that this procedural change might have influenced the response distribution over time, the information on a bothersome health condition during the interim (though not presented in the table) was worth noting. A greater percentage of the elderly were bothered by a health condition during the interim period than at Time 2 (58 percent as opposed to 45 percent). Again, household composition did not have a significant affect on an interim health condition but age was a significant influence with the older age groups being more likely to have been bothered by a health condition. Perceived health also had a significant affect on the distribution of the interim health condition, with those reporting poor health being two to three times as likely to have had a problem during the interim. The number of unmet needs also had a significant effect on the likelihood of an interim health condition.

The specific health conditions mentioned were widely distributed. The most common health problem reported was arthritis (12 percent of the total number of health conditions mentioned). The other frequently

reported health problems were as follows: problems of the digestive tract (nine percent), high blood pressure (eight percent), acute conditions (seven percent), heart conditions (seven percent) and other problems of the circulatory system (seven percent).

Combining the four items of the Rosow Functional Health Scale into an overall score of functional ability reveals that 41 percent of the respondents had affirmative responses to all four questions; 28 percent had a negative response to any one, 14 percent to any two, ten percent to any three, and seven percent to all four.

The analytic utility of the Rosow Functional Health Scale as a whole and of the individual items at this stage of our research, has been considerable. The correlation coefficients between these items and other indicators of health or need have generally been high, suggesting that this concept of functional health has some commonality with the other analytic variables frequently used in this type of health research. In one particular analysis in which the Time 1 response patterns of those who had died during the ensuing 15 months were compared to those who remained alive, the reported inability to do heavy work around the house was the most useful discriminator between these two groups.[5]

Table 25 also presents the data on the number of bed days the elderly reported during the previous 15 months. The concept of bed days has frequently been used as an indicator of general disability. A total of 70 percent of the elderly reported no days in the preceding 15 months in which they were in bed for all or most of the day due to a health condition (days spent in bed as a patient in a hospital or nursing home were excluded from this item). Only five percent reported a month or more of bed days, and only one percent reported 4 months or more of bed days. Neither household composition nor age had a significant affect on the number of bed days. Perceived health was significantly related with those people reporting their health as fair or poor being more likely to have spent a week or more in bed. In contrast those people reporting their health as excellent or good were more likely to have had no bed days. The presence of an unmet need greatly increased the chances that a person had spent a week or more in bed.

The overall pattern is beginning to suggest again at Time 2 that the vast majority of the elderly were basically quite healthy and independent. There was a small percentage who undeniably require outside support services, but the overall pattern is one of a few needing a lot, not a lot needing a little. The emerging pattern of a few elderly needing a lot of services actually should be easier for state and local agencies to provide for administratively. Nevertheless, this emerging pattern is contrary to one notion prevalent among some advocates, specifically the notion that just about every older person needs some kind of assistance from the formal support system.

Table 26 presents information on the respondents perception of their own hearing and vision. The response distribution for the total elderly was very stable over time for hearing and quite similar for hearing and vision at Time 2. About a fifth reported excellent hearing and vision, about a half reported good hearing and vision, another fifth reported fair, and slightly less than one in ten (eight percent) reported poor hearing and vision.

Both the self ratings of hearing and vision were significantly related to all four of the subgroup variables. Those people in living situations with spouse and children or with children only were more likely to rate their hearing as poor, whereas those people living alone, living with children or in other combinations more often rated their vision as poor. As would be expected the older the person the more likely the self perception of vision and hearing was poor and the poorer the self reported assessment of overall health, the more likely the rating of poor hearing and poor vision. Also, the presence of an unmet need increases the likelihood of a perception of poor hearing and poor vision.

Table 27 indicates that nearly all (97 percent) of the elderly reported using eyeglasses (or a magnifying glass), though the number of people who used prescription glasses or hearing aids did not vary significantly as a function of household composition, of perceived health, or of the number of unmet needs. However, age did significantly influence their responses, with the 85 or more age group being less likely to use glasses and the 80 through 84 and the 85 or more age groups being more likely to use a hearing aid. In addition, the ability to hear on the telephone is significantly related to age, with the older age group less able to hear on the telephone.

The reported usual use of wheelchairs and walkers was minimal; one percent of the total elderly reported using a wheelchair and three percent a walker. Each of the subgroup variables had a significant affect on the reported use of wheelchairs and walkers. A significantly greater number of people living with children or in other combinations reported using a walker, again supporting the notion that the families of the elderly do provide informal support for those who have slight problems. The older the age group, the more likely the reported use of either a wheelchair or walker, with the dramatic increase in use beginning in the 80 through 84 age group. Those people whose perceived health was poor were more likely to have reported using a wheelchair or walker. The presence of an unmet need sharply increased the likelihood that the respondent reported using a wheelchair or walker.

Slightly less than one third (32 percent) of the elderly reported sleeping through the night as the usual night's sleep (Table 28). An additional 42 percent reported waking up but having no trouble falling back to sleep, leaving a sizable 26 percent reporting sleep difficulties. The mean number of hours of sleep for the total elderly was 7.3.

The sleep patterns reported by the respondent were significantly influenced by their self perception of health and their number of unmet needs. Those people who rated their health as poor were more likely to wake up in the night and find it hard to fall back to sleep. Also, the mean number of hours of sleep decreased with the poorer perception of health. Respondents with an unmet need were also more likely to wake during the night and find it hard to fall back to sleep.

Table 24. Self-Perceptions of Health for Various Subgroups of the Elderly.

Filter Variable	Time 1 Perceived Health					Time 2 Perceived Health				
	(n)	Excel-lent	Good	Fair	Poor	(n)	Excel-lent	Good	Fair	Poor
Total Elderly	(1604)	18%	43%	27%	12%	(1263)	17%	42%	32%	9%
Household Composition										
Alone	(450)	19	42	29	10	(385)	20	41	32	7
With spouse only	(660)	20	42	26	12	(491)	17	44	31	8
With spouse & children only	(123)	21	37	26	16	(95)	18	44	28	10
With children only	(107)	10	52	24	14	(98)	11	39	35	15
Other combinations	(264)	14	45	28	13	(194)	14	42	33	10
Age***										
65-69	(576)	22	43	26	9	(380)	20	45	29	6
70-74	(434)	18	47	25	10	(381)	18	45	29	8
75-79	(306)	16	40	29	15	(263)	15	41	35	9
80-84	(186)	12	43	27	18	(144)	10	36	43	11
85+	(95)	20	30	33	17	(90)	20	34	26	20
Perceived Health										
Excellent										
Good										
Fair										
Poor										
Number of Unmet Needs***										
None						(1119)	19	45	31	5
One						(99)	6	22	40	32
Two or more						(45)	0	22	36	42

Filter Variable	Time 1 Perceived Health in Relation to Others			Time 2 Perceived Health in Relation to Others		
	(n)	Better	Same	Worse	(n)	Better	Same	Worse
Total Elderly	(1512)	58%	34%	8%	(1207)	57%	34%	9%
Household Composition							
Alone	(423)	61	30	9	(361)	60	32	8
With spouse only	(622)	59	33	8	(478)	57	36	7
With spouse & children only	(116)	52	40	8	(91)	48	43	9
With children only	(101)	55	39	6	(90)	56	32	12
Other combinations	(250)	55	35	10	(187)	55	33	12
Age***							
65-69	(546)	55	37	8	(371)	54	39	7
70-74	(411)	58	32	10	(364)	55	38	7
75-79	(288)	59	33	8	(252)	60	32	8
80-84	(172)	61	30	9	(137)	60	28	12
85+	(89)	66	32	2	(78)	65	22	13
Perceived Health***							
Excellent	(288)	86	14	½	(213)	86	14	0
Good	(648)	69	30	1	(519)	67	31	2
Fair	(388)	39	51	10	(376)	39	50	11
Poor	(172)	14	38	48	(96)	10	37	33
Number of Unmet Needs***							
None					(1082)	60	34	6
One					(87)	30	42	28
Two or more					(38)	18	40	42

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 25. Functional Health for Various Subgroups of the Elderly.

Filter Variable[A]	Time 1 Rosow's Functional Health Items					Time 2 Rosow's Functional Health Items				
	(n)	Ability To Do Heavy Work	Without Current Illness or Health Problem	Ability To Walk A Half Mile	Ability To Walk Up and Down Stairs	(n)	Ability To Do Heavy Work	Without Current Illness or Health Problem	Ability To Walk A Half Mile	Ability To Walk Up and Down Stairs
Total Elderly	(1681)	57%	40%	75%	90%	(1309)	62%	55%	76%	91%
Household Composition							***		***	***
Alone	(465)	60	40	77	92	(393)	65	53	78	93
With spouse only	(684)	61	43	80	93	(507)	68	57	81	94
With spouse & children only	(127)	54	40	80	95	(101)	65	62	86	96
With children only	(120)	40	40	34	78	(106)	40	48	55	75
Other combinations	(285)	50	36	70	85	(202)	51	56	67	84
Age							***	***	***	***
65-69	(594)	67	44	88	95	(390)	74	62	88	95
70-74	(450)	60	44	79	92	(392)	68	56	82	95
75-79	(323)	55	38	74	91	(274)	55	55	73	92
80-84	(200)	37	29	54	81	(152)	50	45	60	82
85+	(107)	30	27	39	72	(96)	25	42	35	66
Perceived Health							***	***	***	***
Excellent	(297)	84	71	93	98	(215)	87	88	96	98
Good	(687)	69	52	87	96	(533)	76	68	87	96
Fair	(431)	40	17	70	91	(395)	45	36	70	89
Poor	(189)	13	6	27	60	(112)	14	10	22	63
Number of Unmet Needs							***	***	***	***
None						(1152)	67	60	82	95
One						(113)	26	26	40	63
Two or more						(45)	16	9	24	49

Filter Variable	Time 1 Number of Bed Days in Last 15 Months	Time 2 Number of Bed Days in Last 15 Months				
		(n)	None	A Week or Less	More Than A Week Less Than A Month	One To Three Months	Four Months or More
Total Elderly		(1313)	70%	16%	9%	4%	1%
Household Composition							
Alone		(394)	74	14	8	4	½
With spouse only		(510)	70	17	8	4	1
With spouse & children only		(100)	67	20	6	5	2
With children only		(107)	75	11	6	5	3
Other combinations		(202)	62	19	13	3	3
Age							
65-69		(391)	71	17	8	3	1
70-74		(393)	71	16	9	3	1
75-79	NOT ASKED	(273)	69	17	9	4	1
80-84		(151)	70	13	11	4	2
85+		(99)	70	16	6	4	3
Perceived Health ***							
Excellent		(216)	81	14	4	1	0
Good		(534)	80	14	4	2	½
Fair		(399)	58	23	14	4	1
Poor		(111)	45	9	20	18	8
Number of Unmet Needs***							
None		(1156)	73	16	7	3	1
One		(112)	51	19	16	10	4
Two or more		(45)	53	4	22	11	10

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

A Notice that the chi-square significance level (.05, .01, .001) of the the Time 2 distribution by each filter variable is included in the table itself.

Table 26. Perceived Hearing and Vision for Various Subgroups of the Elderly.

Filter Variable	Time 1 Perceived Hearing					Time 2 Perceived Hearing				
	(n)	Excellent	Good	Fair	Poor	(n)	Excellent	Good	Fair	Poor
Total Elderly	(1657)	24%	48%	22%	6%	(1313)	23%	48%	21%	8%
Household Composition*										
Alone	(461)	24	48	24	4	(394)	25	46	22	7
With spouse only	(672)	25	48	21	6	(510)	24	51	19	6
With spouse & children only	(125)	22	48	22	8	(101)	24	52	14	10
With children only	(117)	16	47	28	9	(107)	13	42	34	11
Other combinations	(282)	24	50	18	8	(201)	25	46	20	9
Age***										
65-69	(591)	29	52	15	4	(389)	32	48	14	6
70-74	(445)	25	47	25	3	(393)	25	50	21	4
75-79	(311)	19	52	24	5	(274)	15	50	27	8
80-84	(198)	15	41	31	13	(152)	16	50	23	11
85+	(105)	12	36	29	23	(99)	16	33	30	21
Perceived Health***										
Excellent	(292)	42	43	13	2	(214)	40	42	16	2
Good	(682)	23	53	20	4	(534)	23	54	16	7
Fair	(424)	16	49	28	7	(399)	17	49	26	8
Poor	(185)	15	39	31	15	(113)	20	32	34	14
Number of Unmet Needs***										
None						(1154)	25	49	20	6
One						(114)	17	44	25	14
Two or more						(45)	11	33	38	13

Filter Variable	Time 1 Perceived Vision					Time 2 Perceived Vision				
						(n)	Excellent	Good	Fair	Poor
Total Elderly						(1310)	21%	50%	21%	8%
Household Composition***										
Alone						(393)	19	48	22	11
With spouse only						(508)	24	52	19	5
With spouse & children only						(100)	22	57	14	7
With children only						(107)	15	40	35	10
Other combinations						(202)	21	48	19	12
Age***										
65-69						(388)	23	57	16	4
70-74						(391)	22	53	20	5
75-79						(274)	21	46	25	8
80-84		NOT ASKED				(152)	20	41	22	17
85+						(99)	16	28	34	22
Perceived Health***										
Excellent						(215)	41	48	10	1
Good						(532)	21	58	15	6
Fair						(399)	14	46	29	11
Poor						(112)	13	27	38	22
Number of Unmet Needs***										
None						(1152)	23	51	19	7
One						(113)	12	33	36	19
Two or more						(45)	11	31	38	20

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 27. Use of Hearing, Vision, and Ambulation Aids for Various Subgroups of the Elderly.

| | Time 1 Health Status Indicators | | | | | Time 2 Health Status Indicators | | | | |
| | PERCENT WHO USE | | | | | PERCENT WHO USE | | | | |
Filter Variable[A]	(n)	Prescrip-tion or Magnifying Glasses	Hearing Aid	(n)	Percent Able To Hear on Telephone	(n)	Prescrip-tion or Magnifying Glasses	Hearing Aid	(n)	Percent Able To Hear on Telephone
Total Elderly	(1681)	96%	7%	(1658)	97%	(1315)	97%	7%	(1311)	97%
Household Composition										
Alone	(465)	98	7	(460)	98	(395)	97	9	(394)	97
With spouse only	(684)	97	6	(677)	97	(510)	98	5	(509)	98
With spouse & children only	(127)	97	7	(124)	96	(101)	98	7	(100)	99
With children only	(120)	92	8	(116)	97	(107)	93	8	(107)	96
Other combinations	(285)	94	8	(281)	95	(202)	95	7	(201)	95
Age							**	***		***
65-69	(595)	98	4	(590)	98	(391)	98	6	(391)	98
70-74	(450)	95	7	(441)	98	(393)	97	4	(392)	98
75-79	(321)	95	7	(319)	97	(274)	98	8	(274)	98
80-84	(201)	97	12	(197)	95	(151)	97	12	(151)	97
85+	(108)	92	16	(104)	89	(99)	90	15	(97)	91
Perceived Health										
Excellent	(297)	97	7	(296)	98	(216)	97	6	(216)	97
Good	(686)	97	7	(680)	98	(535)	97	8	(534)	99
Fair	(431)	97	9	(426)	96	(397)	98	7	(399)	97
Poor	(189)	92	6	(182)	96	(113)	96	6	(109)	95
Number of Unmet Needs										
None						(1156)	97	7	(1156)	98
One						(114)	94	8	(111)	95
Two or more						(45)	98	9	(44)	98

| | Time 1 Percent Who Usually Use | | | Time 2 Percent Who Usually Use | | |
Filter Variable[A]	(n)	Wheelchair	Walker	(n)	Wheelchair	Walker
Total Elderly	(1682)	1%	3%	(1313)	1%	3%
Household Composition					***	***
Alone	(466)	½	2	(394)	1	3
With spouse only	(685)	½	1	(509)	1	2
With spouse & children only	(126)	0	0	(101)	2	1
With children only	(120)	2	6	(107)	3	8
Other combinations	(285)	2	7	(202)	2	5
Age					***	***
65-69	(594)	½	1	(391)	0	1
70-74	(449)	½	1	(393)	1	1
75-79	(323)	0	2	(274)	1	3
80-84	(201)	2	9	(151)	3	7
85+	(107)	3	10	(98)	5	15
Perceived Health					***	***
Excellent	(297)	0	1	(215)	1	1
Good	(688)	½	1	(535)	1	1
Fair	(431)	1	2	(397)	1	4
Poor	(187)	2	11	(112)	2	10
Number of Unmet Needs					***	***
None				(1155)	½	1
One				(113)	8	14
Two or more				(45)	7	20

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 28. Usual Sleep Patterns for Various Subgroups of the Elderly.

| Filter Variable[A] | Time 1 Usual Night's Sleep | | | | | Time 2 Usual Night's Sleep | | | | |
| | | HOW DESCRIBE | | | | | HOW DESCRIBE | | | |
	(n)	Usually Sleep Through the Night	Wake Up, Have No Trouble Falling Asleep	Wake Up, Find It Hard To Fall Asleep	Mean Number of Hours Sleep	(n)	Usually Sleep Through the Night	Wake Up, Have No Trouble Falling Asleep	Wake Up, Find It Hard To Fall Asleep	Mean Number of Hours Sleep
Total Elderly	(1634)	28%	45%	27%		(1298)	32%	42%	26%	7.3
Household Composition										**
Alone	(446)	27	42	31		(387)	30	41	29	7.1
With spouse only	(673)	29	45	26		(506)	35	40	25	7.3
With spouse & children only	(125)	24	54	22		(101)	30	53	17	7.4
With children only	(113)	29	45	26		(104)	30	35	35	7.2
Other combinations	(277)	30	44	26		(200)	33	44	23	7.5
Age							---------***---------			
65-69	(581)	35	43	22		(390)	40	41	19	7.3
70-74	(435)	26	49	25		(388)	32	40	28	7.2
75-79	(312)	26	42	32		(272)	26	45	29	7.3
80-84	(197)	20	47	33	NOT	(147)	23	41	36	7.4
85+	(102)	21	41	38	ASKED	(95)	34	41	25	7.5
Perceived Health							--------- ***--------			**
Excellent	(287)	44	46	10		(215)	47	41	12	7.4
Good	(675)	31	52	17		(531)	38	42	20	7.4
Fair	(418)	22	41	37		(396)	19	45	36	7.2
Poor	(181)	11	27	62		(111)	19	34	47	7.0
Number of Unmet Needs							---------***---------			***
None						(1143)	34	43	23	7.3
One						(110)	21	34	45	6.9
Two or more						(45)	13	29	58	6.6

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A] Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

3.13 Health Care Utilization. The health care utilization pattern
of the elderly has considerable implication for planning the health care
system of the next decade. The frequency and location of physician
contact, the use of prescription medicines, the need for special services,
the average out-of-pocket expenses and the type of coverage for medical
expenditures, hospital and nursing home admissions and length of stay,
and dentist contact are all elements of health care utilization patterns
which must be incorporated into the reliable and valid quantitative
information base before comprehensive health care planning can occur.

The vast majority (87 percent) of the elderly have a particular
doctor to see (Table 29). The subgroup analyses indicated that household
composition, age, and the number of unmet needs did not significantly
influence this response pattern. Perceived health did have a significant
affect, with those who reported fair or poor health more often reporting
they have a particular doctor.

The mean number of doctor visits within the last fifteen months
for the total elderly was 4.54, though almost one in five of the elderly
did not visit a physician on at least an annual basis. The subgroup
variables of household composition and age did not significantly affect
the number of doctor visits. Perceived health significantly influenced
the number of doctor visits, with those who reported their health as
excellent having a mean of two visits in 15 months and those who reported
their health as poor having a mean of nine visits. In addition, the
responses were significantly influenced by the number of unmet needs.

When seeking medical care, the vast majority (84 percent) of
the elderly go to the doctor's office. Household composition had
no significant affect on where the doctor is seen. Age was signifi-
cantly related, with the older group being less likely to see the
doctor at the doctor's office and more likely to have the doctor
come to the patient's home. Perceived health was also significantly
related to where the doctor is seen, with those reporting excellent
health more likely to use a hospital for medical care. Those who
reported poor health were less likely to go to the doctor's office
and somewhat more likely to go to the hospital or have the doctor
come to the home. The presence of an unmet need also increased the
likelihood of a doctor coming to the home. Nevertheless, even in
the specific subgroups in which an increased likelihood of seeing
a physician in a hospital or home setting occurred, three out of
four of these elderly were still seeing the physician in his or her
office.

About one third (35 percent) of the elderly reported taking
two or more prescription medicines on a regular basis at Time 2
(Table 30). The mean number of prescription drugs for the total
elderly was 1.29, while the mean number for those who are taking
prescription medicines on a regular basis was 2.21. Both the sub-
group variables of perceived health and the number of unmet needs
had a significant affect on the number of prescription medicines
taken regularly. Following a generally linear pattern, those report-
ing excellent health more often reported taking no prescription

medicines whereas those reporting fair or poor health were more likely to be taking prescription medicines.

There was a slightly larger number of prescription medicines reported taken regularly during the interim than there was reported at Time 2 (1.39 versus 1.29 for all the elderly; 2.28 versus 2.21 for those taking medicines), but the magnitude of the difference does not approximate the two to one ratio repeatedly encountered in the data concerning activities of daily living. The implication of these data is that the users of prescription medicines are a fairly stable group, as are the number of prescriptions that any individual might have at a point in time.

Once again, the subgroup variables of household composition and age had no significant affect on the number of prescription medicines taken during the interim. Perceived health did significantly influence whether or not the respondent had taken any prescription medicines, with those reporting excellent health having a much greater likelihood of not having taken any prescription medicines. In addition, the number of prescription medicines taken significantly increased with the poorer the self-perception of health. The respondent with an unmet need was more likely to report taking two or more prescription medicines.

Very few of the elderly reported receiving any of the various kinds of professional health care services (Table 31). The number of people receiving any one of these specialized services is sufficiently small to suggest that the statistically significant differences found within the subgroup analyses are not practically meaningful. However, in general, those people who reported poor health and those people with any unmet needs were more likely to be receiving a particular health care service.

More specifically, nursing services at home were reported by two percent of the older people, but this rate was at least doubled when the respondents were over age 80, perceived their health as poor, or had at least one unmet need.

The stability over time is very great as we now expect, except for the reported use of homemaker or home health aid services, which was taken advantage of by many more people over age 85, who perceive their health as poor, or who have an unmet need. These are the target groups for whom this recently expanded and emphasized public support service were intended in Massachusetts.

For the total elderly, the percentage who reported receiving regular injections was five percent. A significantly greater number of respondents who live with children reported receiving regular injections. As might be expected, those who reported their health as fair or poor and those with an unmet need were more likely to be receiving regular injections.

The respondents were also asked whether or not they had received any of the specialized health care services or had received regular

injections during the months between the Time 1 and the Time 2 inter-
views. The reported use of each of the services was greater for the
interim than for either the first or second point in time, with the
percentage receiving speech therapy, rehabilitation therapy, nursing
services at home, and other special care during the interim period
being double the percentage found for any point in time. This
pattern of twice as many during the course of fifteen months compared
to any point in time has applied in every instance except for users of
prescription medicines.

The percentage of elderly who reported receiving regular inject-
ions during the interim was also nearly double the percent at a specific
point in time (seven percent as opposed to five percent). Once again,
the respondents living with children more often reported receiving
regular injections; the data here seems to uphold the assumption
that the family provides an informal support system for the elderly
person. Perceived health had a significant affect on the likelihood
of receiving regular injections during the interim as did the presence
of an unmet need.

Tables 32 and 33 introduce information on another element essential
for comprehensive health care planning, namely the type of third party
coverage older people have for meeting medical expenses and an estimate
of the out-of-pocket amounts the elderly must spend.

Medicare coverage for medical expenses was reported for 93 percent
of the total elderly (Table 32). As might be expected age, perceived
health and the number of unmet needs did not significantly affect the
Medicare coverage. However, those people in the other household combin-
ations group were less likely to report having Medicare coverage.

For the total elderly, the percentage reporting Medicaid coverage
was 14 percent (Table 32). Those respondents living with spouse or with
spouse and children were less likely to have Medicaid coverage. In
addition, a considerably greater percentage of those who perceived their
health as fair or poor have Medicaid or public assistance coverage. The
respondents with an unmet need were more likely to have Medicaid cover-
age for medical expenses.

Sixty-two percent of the elderly reported having private health
insurance plans. There were numerous specific health insurance plans
mentioned but the majority of those with private health insurance
named Medex (46 percent) or another Blue Cross/Blue Shield policy
(31 percent). Those elderly living with children or in other combinations
reported having a private health insurance plan at a considerably lower
rate than the other household compositions. The likelihood of having
private health insurance decreased significantly and linearily with
increasing age. Those people who reported fair or poor health or who
had an unmet need are notably less likely to have a private health
insurance plan.

The average monthly out-of-pocket expenses for injections,
medicines, and medical equipment for two out of three older people was

under $10.00; 22 percent reported having no medical expenses while an additional 44 percent reported having expenses that were less than $10.00 for the average month (Table 33).

Only two percent reported monthly expenses of $50.00 or more. As the data have suggested previously, addressing problems of the few older people who need a lot of public assistance would be more effective than the untargeted approach of trying to provide a little assistance to many people. The mean monthly cost* for all the elderly was $10.33 and the mean monthly cost for those having medical expenses was $13.35. Those people living alone were likely to have less medical expenses than the other household compositions. Age did not have a significant affect on the average monthly medical costs. As might be expected, the average monthly medical cost increased significantly with a declining perceived health. In addition, the mean monthly medical cost of those with no unmet needs was significantly lower than the mean cost for those with one or more unmet needs.

Table 34 presents information on the elderly's use of long term care and acute care facilities. The rate of admission to nursing homes among the elderly over the last 15 months was one percent. Of the fifteen people who had nursing home stays, ten of them had entered the nursing home for a recuperation period following a hospital stay. Those people who reported poor health were admitted to the nursing homes at the considerably higher rate of five percent. In addition, those with an unmet need were at least six times more likely to have been in a nursing home.

The one percent who reported being patients in nursing homes during the interim can be used as a conservative estimate of the rate of what has been called the revolving bed syndrome; that is the degree to which older people might be inappropriately using long term bed care. The reasons underlying the inappropriate use in the revolving bed syndrome are varied, some of which are in the patient's best interests and some of which are not. One reason for the syndrome is that some older people want to try independent living for as long as they can; another is that the third party reimbursement guidelines for some older people specify a maximum number of reimbursement days per admission for the more medically intensive long term care beds, and the revolving bed pattern obviates the intent of these guidelines. Obviating the intent of the guidelines can sometimes be done to ensure the most medically

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*The mean, median and mode as measures of central tendency for categorized economic data each have some deficiencies. Since the category of the median and the mode is apparent from the response distribution (under $10.00), the information on the mean is presented. Midpoints of the categories plus $62.50 for the upper limit category, were used in the calculations. Midpoints probably overestimate the dollar values for the four closed categories since the distribution is clearly skewed to the low-end of the continuum, but $62.50 probably underestimates the open-ended category. The biases probably cancel each other.

intensive care for a person who needs the care and could not otherwise afford it; it can also sometimes be done to ensure maximum reimbursement to the facility when the person does not require the medically intensive care.

This one percent might underestimate the revolving bed syndrome, because it excludes those who might have been in the process of a short term stay in a nursing home at the time of the first interview (they would have been defined out of the population because they were institutionalized at the time).

Alternatively, this one percent is an overestimate because there certainly are legitimate reasons for short term nursing home stays also. Nevertheless, the one percent estimate does suggest an order of magnitude which is probably accurate.

Table 34 also indicates that the majority of elderly (78 percent) reported no hospital admissions within the last 15 months. Only 15 percent reported one hospital admission and seven percent reported two or more admissions; the mean number of admissions for the total elderly was 0.35. There were many reasons mentioned for each of the hospital admissions. The reasons given for the first hospital stay by the 286 respondents who had been hospitalized were classified as surgical procedures for 52 percent, diagnostic tests for 26 percent, heart conditions for 11 percent, and for other sicknesses and health problems for 11 percent. The majority of reasons for the second hospital stay were also surgical procedures (47 percent of the 121 respondents).

Neither household composition nor age had a significant affect on the number of hospital admissions. As might be expected, the group who reported poor health had a mean of 1.06 hospital admissions in contrast to the group who reported excellent health with a mean of 0.10. In addition, those with an unmet need had twice the rate of hospital admissions than those with no unmet needs.

The mean number of days hospitalized for those who were hospitalized was 17.1. The number of people hospitalized was too small for stable subgroup analyses, though the numbers are presented for the sake of generating hypotheses.

Contact with a dentist and denture use is presented in Table 35. About a third of the elderly had contact with their dentists during the 15 month span. Whether or not the respondent had seen a dentist in the last 15 months was not significantly related to household composition or the number of unmet needs. However, age and perceived health were significantly related. The older the person and the poorer his or her perceived health, the less likely he or she had contact with the dentist during the interim. But the older respondents also reported a greater likelihood of having dentures (slightly, but significantly greater, than the 76 percent average of all the elderly). Of those respondents who reported wearing dentures, 85 percent found them very or somewhat comfortable.

The general pattern of this health care utilization data is that the elderly closely parallel a pattern generally found for the nation as a whole, that approximately five to 15 percent of the population accounts for about half of the health care utilization. [6,7] A separate analysis was designed to determine if any of the Time 1 social service needs assessment or health care utilization information could be used to predict the high users of the health care system as identified at Time 2. The results indicated that being a high user at one point in time in any one of the following six areas - (1) the number of hospital admissions; (2) the use of special services such as speech or rehabilitation therapy, counseling, home nursing services, home meal service, home health aid services, or short term nursing home admission; (3) the need for regular injections; (4) the number of prescription drugs taken regularly; (5) the average monthly cost of medicines and medical supplies; (6) the frequency of physician contact - was significantly related to being a high user in all of these specific areas 15 months later. Some of the social service needs indicators were also predictors of high health care utilization at a later point. Having two or more unmet social service needs was significantly related to being a high user in all of the specific areas. Having an unmet need in transportation or food shopping was significantly related to being a high user in all the specific areas except hospital admissions.

Table 29. Physician Contact for Various Subgroups of the Elderly.

Filter Variable	(n)	Percent Having a Particular Doctor	(n)	Less Than Six Months	Six Months to One Year	One to Two Years	Two or More Years	(n)	Percent Having a Particular Doctor[A]	LAST TIME SAW OR TALKED TO A DOCTOR
						Time 1 Physician Contact				Time 2 Physician Contact
					LAST TIME SAW OR TALKED TO A DOCTOR					
Total Elderly	(1672)	86%	(1674)	68%	13%	6%	13%	(1309)	87%	
Household Composition										
Alone	(459)	84	(463)	67	12	7	14	(391)	85	
With spouse only	(683)	87	(682)	68	14	6	12	(509)	87	
With spouse & children only	(127)	89	(127)	68	11	7	14	(101)	88	
With children only	(118)	86	(119)	72	10	6	12	(107)	85	
Other combinations	(285)	87	(283)	70	12	6	12	(201)	90	
Age										
65-69	(591)	86	(593)	67	12	7	14	(389)	86	NOT ASKED
70-74	(448)	84	(447)	67	13	6	14	(392)	85	
75-79	(320)	87	(321)	70	13	5	12	(273)	87	IN THIS
80-84	(199)	87	(200)	73	11	6	10	(151)	90	
85+	(107)	92	(106)	66	13	9	12	(98)	89	FORMAT
Perceived Health									*	
Excellent	(296)	80	(292)	53	18	8	21	(214)	85	
Good	(683)	85	(686)	62	15	8	15	(532)	84	
Fair	(427)	91	(430)	82	8	3	7	(397)	90	
Poor	(188)	90	(188)	84	7	5	4	(112)	95	
Number of Unmet Needs										
None								(1151)	86	
One								(113)	88	
Two or more								(44)	91	

Filter Variable[B]	Time 1 Number of Times Saw or Talked to Doctor in Last 15 Months	(n)	None	One	Two	Three	Four	Five	6-10	11-15	16 or More	Mean
						Time 2 Number of Times Saw or Talked to Doctor in Last 15 Months						
Total Elderly		(1305)	18%	17%	15%	11%	9%	5%	13%	7%	5%	4.54
Household Composition												
Alone		(392)	20	16	14	13	10	6	12	5	4	4.03
With spouse only		(509)	16	17	16	12	9	6	13	6	5	4.56
With spouse & children only		(100)	19	20	15	10	5	3	14	7	7	4.67
With children only		(104)	20	15	13	10	13	3	13	9	4	4.55
Other combinations		(200)	15	18	17	7	10	7	12	10	4	4.86
Age												
65-69		(391)	21	16	16	10	10	5	10	6	6	4.36
70-74	NOT ASKED	(393)	16	20	13	12	9	6	12	8	4	4.28
75-79		(270)	14	16	17	12	8	6	15	6	6	4.65
80-84	IN THIS	(147)	15	13	14	14	9	5	20	8	2	4.98
85+		(98)	20	13	17	8	11	7	6	7	6	4.35
Perceived Health	FORMAT						***					***
Excellent		(215)	27	29	19	6	8	2	7	1	1	2.01
Good		(532)	20	19	16	13	10	5	11	3	3	3.47
Fair		(398)	13	11	13	11	8	8	17	13	6	5.81
Poor		(110)	7	5	9	12	12	5	18	16	16	9.01
Number of Unmet Needs							***					***
None		(1148)	19	17	16	11	10	5	12	6	4	4.13
One		(113)	14	10	14	14	9	5	16	10	8	6.29
Two or more		(44)	0	11	9	9	2	11	28	23	7	8.16

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

A The responses to this question were obtained in the Time 1 interview.

B Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 29. Physician Contact for Various Subgroups of the Elderly (continued).

Filter Variable	(n)	Time 1 Where the Doctor Is Seen					(n)	Time 2 Where the Doctor Is Seen			
		Doctor's Office	Hospital Out-Pa-tient or Emergency Room	Patient's Home	Clinics or Others	No Usual Place		Doctor's Office	Hospital Out-Pa-tient or Emergency Room	Patient's Home	Clinics or Others
Total Elderly	(1631)	84%	8%	4%	3%	1%	(1292)	84%	8%	4%	2%
Household Composition											
Alone	(451)	85	7	3	3	2	(386)	84	8	4	1
With spouse only	(666)	85	8	2	4	1	(500)	87	7	2	3
With spouse & children only	(122)	89	6	2	2	1	(98)	88	8	2	1
With children only	(117)	81	6	6	4	3	(107)	76	7	8	4
Other combinations	(275)	81	9	9	½	1	(201)	81	10	5	3
Age ***											
65-69	(578)	88	7	1	3	1	(384)	88	8	1	2
70-74	(435)	85	8	3	2	2	(384)	86	7	2	2
75-79	(311)	84	8	3	4	1	(269)	86	9	2	2
80-84	(196)	79	8	10	2	1	(152)	77	9	11	1
85+	(104)	74	4	15	3	4	(97)	71	9	13	3
Perceived Health ***											
Excellent	(291)	84	7	3	4	2	(210)	83	11	1	1
Good	(671)	88	6	2	3	1	(525)	89	6	1	2
Fair	(417)	83	7	5	4	1	(395)	83	8	5	3
Poor	(175)	77	11	11	1	0	(112)	74	12	11	1
Number of Unmet Needs ***											
None							(1134)	87	7	2	2
One							(113)	65	13	16	3
Two or more							(45)	76	9	13	2

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 30. The Use of Prescription Medicines for Various Subgroups of the Elderly.

Filter Variable[A]	(n)	Time 1 Number of Prescription Medicines Taken Regularly None	One	Two or Three	Four or More	Mean of Those Taking Medicines	Mean of All	(n)	Time 2 Number of Prescription Medicines Taken Regularly None	One	Two or Three	Four or More	Mean of Those Taking Medicines	Mean of All
Total Elderly	(1681)	43%	24%	24%	9%	2.23	1.26	(1315)	42%	23%	26%	9%	2.21	1.29
Household Composition														
Alone	(466)	43	24	26	7	2.16	1.21	(396)	42	23	27	8	2.15	1.24
With spouse only	(684)	48	24	19	9	2.21	1.17	(509)	42	24	26	8	2.12	1.24
With spouse & children only	(126)	47	19	24	10	2.58	1.37	(101)	48	20	18	14	2.64	1.37
With children only	(120)	33	23	33	11	2.36	1.58	(107)	34	23	32	11	2.37	1.57
Other combinations	(285)	39	29	24	8	2.18	1.33	(202)	43	23	23	11	2.30	1.32
Age														*
65-69	(594)	49	23	21	7	2.10	1.08	(390)	47	22	24	7	2.05	1.08
70-74	(449)	47	24	20	9	2.24	1.18	(393)	44	23	23	10	2.26	1.27
75-79	(323)	36	27	28	9	2.30	1.46	(275)	36	25	29	10	2.24	1.42
80-84	(200)	32	26	29	13	2.50	1.69	(152)	36	23	29	12	2.38	1.52
85+	(108)	44	24	25	7	2.05	1.14	(99)	34	26	30	10	2.28	1.50
Perceived Health									------- *** ---------				***	***
Excellent	(297)	68	23	8	1	1.45	0.46	(216)	71	20	7	2	1.48	0.43
Good	(687)	51	25	21	3	1.82	0.89	(534)	47	25	24	4	1.86	0.99
Fair	(430)	28	27	32	13	2.31	1.67	(398)	27	24	35	14	2.42	1.77
Poor	(188)	17	14	38	30	3.54	2.95	(113)	15	15	41	29	3.24	2.75
Number of Unmet Needs									---------- * ---------				**	***
None								(1151)	44	24	24	8	2.13	1.18
One								(114)	24	22	37	17	2.65	2.00
Two or more								(45)	13	22	45	20	2.61	2.27

Time 2 Filter Variable	(n)	Interim Number of Prescription Medicines Taken Regularly During The 15 Months None	One	Two or Three	Four or More	Mean of Those Taking Medicines	Mean of All
Total Elderly	(1317)	39%	23%	27%	11%	2.28	1.39
Household Composition							
Alone	(396)	39	24	28	9	2.17	1.32
With spouse only	(511)	40	25	24	11	2.22	1.34
With spouse & children only	(101)	47	20	17	16	2.70	1.43
With children only	(107)	31	22	32	15	2.49	1.72
Other combinations	(201)	39	22	37	12	2.35	1.43
Age							
65-69	(391)	45	22	23	10	2.19	1.20
70-74	(394)	41	24	26	9	2.33	1.37
75-79	(275)	34	25	29	12	2.23	1.47
80-84	(151)	32	26	29	13	2.33	1.58
85+	(99)	31	26	29	14	2.44	1.69
Perceived Health		-------*** -----------				***	***
Excellent	(216)	69	21	8	2	1.47	0.45
Good	(534)	43	26	25	6	1.90	1.07
Fair	(399)	24	24	36	16	2.52	1.92
Poor	(113)	14	14	37	35	3.41	2.92
Number of Unmet Needs		------- ** -----------				***	***
None	(1154)	42	24	25	9	2.18	1.27
One	(113)	22	20	36	22	2.82	2.19
Two or more	(44)	14	20	43	23	2.74	2.36

* Time 2 and/or Interim distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).
** Time 2 and/or Interim distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).
*** Time 2 and/or Interim distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A] Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 and/or Interim distribution by each filter variable is included in the table itself.

Table 31. The Use of Special Services Among Various Subgroups of the Elderly.

Filter Variable	(n)	Speech Therapy	Rehabili-itation Therapy	Profes-sional Coun-seling	Nursing Services At Home	Hot Meal Services At Home	Homemaker or Home Health Aid Services	Other Special Care	Regula Injecti
					Time 1 Percent Receiving Special Services				
Total Elderly	(1678)	½%	1%	1%	2%	1%	1%	2%	5%
Household Composition									
Alone	(464)	½	1	1	1	0	1	1	6
With spouse only	(683)	½	2	1	2	1	0	2	4
With spouse & children only	(127)	0	0	1	0	0	0	3	6
With children only	(119)	0	0	0	3	0	2	3	5
Other combinations	(285)	0	1	1	3	1	1	2	8
Age									
65-69	(594)	½	1	1	1	½	½	2	7
70-74	(449)	½	1	1	2	½	½	2	5
75-79	(323)	½	1	0	½	1	½	2	4
80-84	(200)	0	2	1	5	1	2	3	5
85+	(106)	0	0	1	6	1	2	3	7
Perceived Health									
Excellent	(296)	½	1	1	½	½	½	½	2
Good	(687)	0	½	½	1	½	½	1	3
Fair	(429)	0	1	1	2	1	½	2	9
Poor	(188)	1	2	2	9	2	2	9	13
Number of Unmet Needs									
None									
One									
Two or more									

Filter Variable [A]	(n)	Speech Therapy	Rehabili-itation Therapy	Profes-sional Coun-seling	Nursing Services At Home	Hot Meal Services At Home	Homemaker or Home Health Aid Services	Other Special Care	Regular Injecti
					Time 2 Percent Receiving Special Services				
Total Elderly	(1316)	½%	1%	1%	2%	1%	2%	2%	5%
Household Composition									*
Alone	(395)	½	1	1	2	1	3	2	4
With spouse only	(511)	0	1	1	2	½	1	1	4
With spouse & children only	(101)	0	0	0	0	0	0	2	4
With children only	(107)	0	2	0	2	0	2	3	9
Other combinations	(202)	0	1	0	4	1	4	3	7
Age					***		***		
65-69	(390)	0	1	1	1	½	1	1	5
70-74	(394)	0	1	½	1	1	1	1	5
75-79	(275)	0	2	1	1	½	3	3	5
80-84	(152)	1	1	1	5	1	3	3	5
85+	(99)	0	2	0	8	2	10	4	7
Perceived Health		***	***	***	***	*	***	*	***
Excellent	(216)	0	0	0	1	1	1	0	2
Good	(534)	0	1	½	1	1	1	2	2
Fair	(399)	0	1	1	3	½	2	3	7
Poor	(113)	1	4	1	5	2	10	5	14
Number of Unmet Needs		***	***	*	***	***	***	**	***
None	(1157)	0	1	½	1	½	1	1	4
One	(113)	1	3	1	7	2	8	5	10
Two or more	(45)	0	7	0	11	4	20	4	13

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 31. The Use of Special Services Among Various Subgroups of the Elderly (continued).

Time 2 Filter Variable[A]	(n)	Speech Therapy	Rehabilitation Therapy	Professional Counseling	Nursing Services At Home	Hot Meals Services at Home	Homemaker or Home Health Aid Services	Other Special Care	Regular Injections
		Interim Percent Receiving Special Services During the 15 Months							
Total Elderly	(1316)	1%	3%	1%	4%	1%	2%	4%	7%
Household Composition					*				**
Alone	(395)	½	4	1	3	2	3	3	6
With spouse only	(511)	1	2	1	3	1	2	4	6
With spouse & children only	(101)	0	2	1	1	0	0	3	6
With children only	(107)	1	7	1	6	2	2	5	16
Other combinations	(202)	1	3	1	8	1	4	6	9
Age					***		***		
65-69	(390)	1	2	1	2	1	1	3	7
70-74	(394)	1	3	½	3	1	2	4	8
75-79	(275)	0	3	2	4	1	1	6	7
80-84	(152)	1	4	1	7	2	4	5	6
85+	(99)	1	5	0	10	3	10	4	7
Perceived Health		***	***	***	***	***	***	*	***
Excellent	(216)	0	1	0	1	1	1	1	3
Good	(534)	0	1	½	2	1	2	4	4
Fair	(399)	1	3	1	5	1	2	5	12
Poor	(113)	4	10	5	12	5	12	8	16
Number of Unmet Needs		***	***	*	***	***	***	**	***
None	(1157)	½	2	1	3	1	1	3	6
One	(114)	1	10	3	10	4	11	10	15
Two or more	(45)	4	9	2	24	9	24	9	16

* Interim distribution significantly influenced by this filter variable at .05 level (chi square).

** Interim distribution significantly influenced by this filter variable at .01 levle (chi square).

*** Interim distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi-square significance level (.05, .01, .001) of the Interim distribution by each filter variable is included in the table itself.

Table 32. Coverage of Medical Expenditures for Various Subgroups of the Elderly.

Filter Variable[A]	Time 1 Medical Expenses Covered By				Time 2 Medical Expenses Covered By			
	(n)	Medicare	Medicaid Or Public Assistance	Private Health Insurance	(n)	Medicare	Medicaid Or Public Assistance	Priva Healt Insura
Total Elderly	(1668)	91%	14%	58%	(1306)	93%	14%	62%
Household Composition						*	***	***
Alone	(462)	92	17	56	(389)	92	19	60
With spouse only	(681)	92	10	64	(508)	95	9	69
With spouse & children only	(125)	95	12	62	(100)	94	5	70
With children only	(120)	87	17	35	(107)	92	23	50
Other combinations	(283)	87	15	53	(202)	88	19	53
Age								***
65-69	(593)	90	12	64	(389)	94	12	67
70-74	(448)	93	16	58	(392)	90	17	62
75-79	(321)	91	12	58	(272)	95	13	63
80-84	(200)	92	19	45	(149)	95	14	56
85+	(107)	89	8	47	(98)	90	19	47
Perceived Health							***	***
Excellent	(295)	93	8	71	(216)	91	10	72
Good	(686)	90	12	61	(527)	93	11	69
Fair	(429)	91	17	53	(396)	93	19	54
Poor	(189)	92	22	39	(111)	93	23	47
Number of Unmet Needs							***	***
None					(1145)	93	13	64
One					(112)	94	25	50
Two or more					(45)	89	36	42

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A]Notice that the chi-square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 33. Individual Costs of Medical Expenditures for Various Subgroups of the Elderly.

Filter Variable	(n)	Time 1 Average Monthly Out-of-Pocket Expenses for Injections, Medicines, Equipment[A]						
		None	Under $10.00	$10.00-24.99	$25.00-49.99	$50.00 Or More	Mean of Those with Medical Costs	Mean of All
Total Elderly	(1642)	---	69%	22%	7%	2%	$ ---	$ ---
Household Composition								
Alone	(451)	---	75	19	5	1	---	---
With spouse only	(674)	---	67	22	9	2	---	---
With spouse & children only	(126)	---	65	23	9	3	---	---
With children only	(114)	---	63	26	11	0	---	---
Other combinations	(277)	---	66	24	8	2	---	---
Age								
65-69	(585)	---	70	21	8	1	---	---
70-74	(435)	---	71	20	7	2	---	---
75-79	(316)	---	64	26	9	1	---	---
80-84	(196)	---	65	25	8	2	---	---
85+	(103)	---	71	25	2	2	---	---
Perceived Health								
Excellent	(289)	---	89	8	3	0	---	---
Good	(675)	---	75	19	5	1	---	---
Fair	(421)	---	57	31	11	1	---	---
Poor	(182)	---	42	31	21	6	---	---
Number of Unmet Needs								
None								
One								
Two or more								

Filter Variable[B]	(n)	Time 2 Average Monthly Out-of-Pocket Expenses for Injections, Medicines, Equipment						
		None	Under $10.00	$10.00-24.99	$25.00-49.99	$50.00 Or More	Mean of Those with Medical Costs	Mean of All
Total Elderly	(1297)	22%	44%	24%	8%	2%	$13.35	$10.33
Household Composition				--*--			***	**
Alone	(387)	22	50	23	4	1	10.86	8.48
With spouse only	(503)	21	40	28	9	2	14.87	11.72
With spouse & children only	(99)	23	46	19	9	3	14.24	10.93
With children only	(106)	24	40	24	10	2	14.81	11.18
Other combinations	(202)	26	45	19	9	1	13.05	9.69
Age								
65-69	(388)	24	43	24	7	2	13.63	10.36
70-74	(388)	23	48	21	7	1	12.07	9.24
75-79	(272)	21	38	29	10	2	15.12	11.89
80-84	(148)	20	45	28	5	2	13.05	10.49
85+	(95)	22	48	18	10	2	13.38	10.42
Perceived Health				--***--			***	***
Excellent	(213)	44	45	10	1	½	8.23	4.60
Good	(532)	22	49	22	6	1	11.66	9.12
Fair	(393)	12	44	32	11	1	14.11	12.35
Poor	(108)	17	19	37	18	9	23.81	19.84
Number of Unmet Needs				--***--			***	***
None	(1141)	23	45	23	8	1	12.75	9.78
One	(111)	14	35	35	10	6	17.99	15.56
Two or more	(45)	27	35	31	4	4	15.76	11.56

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A] The Time 1 response categories for this item combined "None" with "Under $10.00"; Time 1 means are therefore not presented.

[B] Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 34. Short Term Nursing Home Care and Hospitalizations for Various Subgroups of the Elderly.

| Filter Variable[A] | Time 1 Nursing Home and Hospital Care | | | | | | | Time 2 Nursing Home and Hospital Care | | | | | |
| | % Patients in Nursing Home Over-Night or Longer | DIFFERENT NUMBER OF HOSPITAL ADMISSIONS | | | | | % Patients in Nursing Home Over-Night or Longer | DIFFERENT NUMBER OF HOSPITAL ADMISSIONS | | | | |
	(n)	(n)	None	One	Two or More	Mean	(n)	(n)	None	One	Two or More	Me
Total Elderly	(1681) 1%	(1680)	81%	14%	6%	0.28	(1315) 1%	(1317)	78%	15%	7%	0.
Household Composition												
Alone	(464) 1	(466)	84	13	3	0.23	(395) 2	(396)	82	13	5	0.
With spouse only	(685) 1	(682)	81	13	6	0.29	(511) ½	(511)	77	16	7	0.
With spouse & children only	(127) 0	(127)	78	18	4	0.27	(101) 1	(101)	75	16	9	0.
With children only	(119) 2	(120)	78	17	5	0.30	(106) 3	(107)	70	19	11	0.
Other combinations	(286) 3	(285)	78	16	6	0.33	(202) 2	(202)	78	13	9	0.
Age												
65-69	(595) 1	(593)	81	13	6	0.30	(390) ½	(391)	80	14	6	0
70-74	(449) 1	(449)	83	15	2	0.21	(394) 1	(394)	79	14	7	0.
75-79	(322) 1	(323)	80	15	5	0.29	(275) 2	(275)	76	16	8	0.
80-84	(200) 4	(200)	77	16	7	0.36	(152) 2	(152)	72	19	9	0.
85+	(108) 5	(108)	79	16	5	0.27	(98) 3	(99)	82	12	6	0.
Perceived Health							***	------*-----				
Excellent	(296) ½	(297)	95	4	1	0.05	(216) 0	(216)	91	8	1	0.
Good	(686) 1	(687)	86	12	2	0.18	(534) ½	(535)	84	12	4	0.
Fair	(431) 2	(431)	75	18	7	0.35	(399) 1	(399)	71	18	11	0.
Poor	(189) 4	(186)	57	26	17	0.79	(113) 5	(113)	55	22	23	1.0
Number of Unmet Needs							***	------***-----				*
None							(1156) ½	(1157)	80	14	6	0.
One							(114) 5	(114)	66	22	12	0.
Two or more							(45) 9	(45)	56	24	20	0.6

| Filter Variable[A] | Time 1 Number of Days in Hospital For Those Hospitalized | | | | | | | Time 2 Number of Days in Hospital For Those Hospitalized | | | | | | |
	(n)	1-2 Days	3-7 Days	8-15 Days	16-30 Days	31 or More Days	Mean	(n)	1-2 Days	3-7 Days	8-15 Days	16-30 Days	31 or More Days	Mea
Total Elderly	(320)	5%	27%	32%	19%	17%	18.9	(286)	7%	25%	30%	25%	13%	17.
Household Composition														
Alone	(76)	7	26	37	22	8	15.3	(69)	6	26	32	23	13	16.9
With spouse only	(130)	3	28	31	20	18	20.8	(117)B	5	29	28	25	13	17.1
With spouse & children only	(28)B	4	32	43	14	7	15.4	(25)B	4	28	32	28	8	15.2
With children only	(26)B	15	27	23	12	23	18.0	(31)	10	23	32	19	16	17.0
Other combinations	(60)	3	27	25	22	23	21.0	(44)	14	14	29	27	16	18.5
Age														
65-69	(111)	5	23	32	18	22	20.7	(77)	5	34	26	22	13	16.2
70-74	(78)	4	36	31	18	11	15.9	(81)	10	23	27	26	14	17.8
75-79	(62)	6	23	43	17	11	16.8	(66)	4	23	38	28	7	16.2
80-84	(45)B	4	27	20	27	22	24.7	(41)	12	12	34	24	17	18.5
85+	(23)B	4	35	26	26	9	15.5	(18)B	0	28	22	28	22	19.4
Perceived Health														
Excellent	(13)B	8	39	15	23	15	19.2	(20)B	30	30	15	10	15	12.1
Good	(98)	9	29	36	17	9	14.4	(83)	7	30	34	17	12	15.7
Fair	(104)	3	30	29	23	15	19.8	(115)	3	27	29	32	9	16.8
Poor	(80)	4	20	31	20	25	22.9	(49)	8	10	28	31	23	21.7
Number of Unmet Needs														
None								(230)	7	28	31	24	10	15.3
One								(36)	3	17	20	30	30	25.8
Two or more								(20)B	11	11	36	31	11	21.9

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A]Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

[B]The number of cases is too small to provide reliable percentage estimates.

Table 35. Contact with Dentist and Denture Use for Various Subgroups of the Elderly.

| Filter Variable | Time 1 Contact With Dentist | | | | | | Time 2 Contact With Dentist | | |
| | LAST TIME SAW OR TALKED TO DENTIST | | | | | Percent Who Saw or Talked to a Dentist in The Last 15 Months | LAST TIME SAW OR TALKED TO DENTIST | Percent Who Saw or Talked to a Dentist In The Last 15 Months | |
	(n)	Less Than Six Months	Six Months To One Year	One To Two Years	Two Years or More			(n)	
Total Elderly	(1579)	23%	11%	7%	59%			(1313)	32%
Household Composition									
Alone	(436)	25	10	5	60			(395)	32
With spouse only	(649)	24	12	8	56			(510)	35
With spouse & children only	(117)	25	13	6	56			(100)	29
With children only	(110)	16	9	9	66			(106)	25
Other combinations	(267)	21	8	8	63	NOT	NOT	(202)	29
Age***									
65-69	(573)	27	14	7	52	ASKED	ASKED	(390)	40
70-74	(420)	21	10	9	60			(393)	32
75-79	(300)	25	10	5	60	IN	IN	(274)	27
80-84	(186)	17	5	7	71			(151)	25
85+	(94)	18	7	7	68	THIS	THIS	(99)	22
Perceived Health***									
Excellent	(286)	35	13	8	44	FORMAT	FORMAT	(215)	48
Good	(655)	24	11	7	58			(535)	30
Fair	(401)	20	13	5	62			(397)	27
Poor	(170)	16	3	8	73			(113)	27
Number of Unmet Needs									
None								(1154)	32
One								(114)	28
Two or More								(45)	36

| Filter Variable[A] | Time 1 Dentures | Time 2 Dentures | | | | |
| | | | Percent Having Dentures | PERCEIVED COMFORT FOR DENTURE WEARERS | | |
		(n)		(n)	Very Comfortable	Somewhat Comfortable	Not Too Comfortable
Total Elderly		(1316)	76%	(962)	67%	18%	15%
Household Composition							
Alone		(396)	77	(301)	65	19	16
With spouse only		(510)	73	(360)	67	17	16
With spouse & children only		(101)	74	(70)	70	20	10
With children only		(107)	82	(81)	61	21	18
Other combinations		(202)	78	(150)	70	19	11
Age			*				
65-69		(391)	72	(277)	68	18	14
70-74		(394)	78	(303)	65	19	16
75-79	NOT	(274)	72	(187)	66	18	16
80-84		(152)	83	(117)	68	20	12
85+	ASKED	(99)	78	(73)	69	16	15
Perceived Health				-------***--------			
Excellent		(216)	75	(161)	77	14	9
Good		(535)	77	(408)	72	17	11
Fair		(399)	77	(308)	59	22	19
Poor	.	(113)	72	(79)	50	20	30
Number of Unmet Needs				-------**--------			
None		(1157)	76	(856)	68	18	14
One		(114)	75	(73)	59	19	23
Two or more		(45)	69	(31)[B]	42	26	32

** Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
*** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.
[B] The number of cases is too small to provide reliable percentage estimates.

3.14 Morale. The high intercorrelations among measures of morale, economic conditions, and health status have frequently been demonstrated. [9,10,] The concept of morale has been a central component in much of the gerontological theorizing. Several of the items commonly used to assess morale* were asked of these respondents, facilitating comparisons among data sets and thereby increasing the utility of all the data.

As might be expected, all five of the items were significantly influenced in the subgroup analyses by perceived health and the number of unmet needs. Perceived health had a dramatic linear affect on the response patterns of each of the morale items, with a three- to four-fold larger percentage with excellent health on the positive side of the morale items compared to the percentage with poor health. In about as dramatic a fashion the presence of just one unmet need was also associated with a three- to fourfold reduction in the percentage responding to the positive side of the items.

Household composition also significantly influenced the distributions of two of the morale items - respondents' satisfaction with how they spend their time and satisfaction with life in general. Those people living with a spouse or with a spouse and children were likely to report more satisfaction than those without a spouse.

The age of the respondents significantly influenced two of the items also - satisfaction with the way time is spent and the perception of things as better, about the same, or worse than expected. The older respondents reported considerably less satisfaction and that things are worse than they thought they would be.

The stability of the aggregate response distributions on all five items is again notable for its consistency. An additional analysis was performed which involved converting each of the five morale items into three point scales of high, medium and low morale in order to obtain a summary score of overall morale for each respondent. The three points were given values of 1, 2, and 3 respectively; therefore, the potential range of overall scores was from 3 (highest possible morale) to 15 (lowest possible morale). For the total elderly 14 percent had summary scores of 5 or less, 66 percent had scores from 6 through 10, and 20 percent had scores of 11 or more. The mean for all the elderly was 8.17. In general, the older people were normally distributed across the morale continuum, not clustered toward the positive side of the measurement scale as we have seen in most of the preceding dimensions. The overall morale score was significantly related to perceived health and to the number of unmet needs.

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*Three items were from M.P. Lawton's Morale Scale (satisfaction with the way time is spent; little things bother the respondent more; as respondent gets older, things are better, about the same, or worse than expected). One item has often been used by S. Sherwood and her colleagues (how satisfied with your life today). One item has been used in the Heartbeat Coronary Risk Evaluation program of the Loma Linda University of Health (great amount of nervous strain connected with daily activities).

Table 36. Morale for Various Subgroups of the Elderly.

Filter Variable	Time 1 Satisfaction with the Way Time is Spent				Time 2 Satisfaction with the Way Time is Spent			
	(n)	Very Satis-fied	Some-what Satis-fied	Not at all Sat-isfied	(n)	Very Satis-fied	Some-what Satis-fied	Not at all Sat-isfied
Total Elderly	(1574)	60%	34%	6%	(1253)	59%	33%	8%
Household Composition*								
Alone	(451)	55	39	6	(384)	58	34	8
With spouse only	(644)	61	32	7	(490)	61	34	5
With spouse & children only	(121)	58	38	4	(93)	65	32	3
With children only	(104)	69	24	7	(95)	48	41	11
Other combinations	(254)	62	30	8	(191)	60	28	12
Age*								
65-69	(570)	60	35	5	(379)	61	33	6
70-74	(430)	63	31	6	(381)	62	31	7
75-79	(294)	61	31	8	(261)	56	37	7
80-84	(183)	53	40	7	(140)	56	36	8
85+	(91)	57	33	10	(37)	55	33	12
Perceived Health***								
Excellent	(293)	77	21	2	(214)	81	17	2
Good	(668)	65	33	2	(532)	65	31	4
Fair	(417)	53	42	5	(394)	47	44	9
Poor	(179)	30	41	29	(107)	26	44	30
Number of Unmet Needs ***								
None					(1111)	64	32	4
One					(98)	22	51	27
Two or more					(44)	9	25	66

Filter Variable	Time 1 "How Satisfied With Your Life Today"					Time 2 "How Satisfied With Your Life Today"				
	(n)	Very Satis-fied	Fairly Satis-fied	Satis-fied	Not Satis-fied	(n)	Very Satis-fied	Fairly Satis-fied	Satis-fied	Not Satis-fied
Total Elderly	(1605)	44%	23%	27%	6%	(1258)	43%	23%	26%	8%
Household Composition*										
Alone	(451)	37	24	31	8	(381)	38	25	27	10
With spouse only	(659)	50	22	23	5	(491)	49	22	24	5
With spouse & children only	(125)	48	21	29	2	(95)	48	23	23	6
With children only·	(109)	38	21	35	6	(98)	36	25	27	12
Other combinations	(261)	42	24	28	6	(193)	44	18	26	12
Age										
65-69	(576)	45	25	26	4	(379)	48	20	24	8
70-74	(435)	46	23	26	5	(380)	45	25	22	8
75-79	(310)	42	23	28	7	(263)	39	24	29	8
80-84	(184)	44	19	27	10	(143)	44	22	27	7
85+	(93)	35	22	35	8	(88)	36	23	33	8
Perceived Health***										
Excellent	(293)	68	14	17	1	(215)	66	18	15	1
Good	(684)	48	22	27	3	(533)	50	22	24	4
Fair	(423)	34	29	31	6	(395)	31	27	33	9
Poor	(183)	14	28	32	26	(110)	18	19	27	36
Number of Unmet Needs ***										
None						(1117)	48	23	25	4
One						(96)	13	26	31	30
Two or more						(45)	11	13	18	58

*   Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 36. Morale for Various Subgroups of the Elderly (continued).

Filter Variable[A]	Time 1 Morale Factors		"AS I GET OLDER THINGS ARE"			Time 2 Morale Factors		"AS I GET OLDER THINGS AR		
	(n)	% Agree Little Things Bother Me More This Year	Better Than I Thought They Would Be	About the Same	Worse	(n)	% Agree Little Things Bother Me More This Year	Better Than I Thought They Would Be	About the Same	Wo
Total Elderly	(1577)	35%	26%	55%	19%	(1244)	34%	26%	57%	1
Household Composition										
Alone	(441)	31	26	53	21	(379)	32	28	58	1
With spouse only	(650)	37	26	57	17	(485)	33	28	57	1
With spouse & children only	(121)	39	19	66	15	(94)	38	25	50	2
With children only	(105)	35	25	59	16	(96)	40	23	60	1
Other combinations	(260)	35	28	49	23	(189)	34	23	57	2
Age								----------**---------		
65-69	(571)	33	29	53	18	(374)	32	34	53	1
70-74	(430)	38	22	60	18	(377)	30	23	60	1
75-79	(301)	35	23	57	20	(259)	41	20	61	1
80-84	(181)	36	27	53	20	(141)	37	26	57	1
85+	(89)	32	38	50	22	(87)	33	28	51	2
Perceived Health							***	----------***---------		
Excellent	(291)	18	38	55	10	(211)	15	40	53	
Good	(681)	31	31	57	12	(529)	28	31	60	
Fair	(413)	45	20	58	12	(393)	46	17	60	2
Poor	(181)	57	6	41	53	(107)	57	11	45	4
Number of Unmet Needs							***	----------***---------		
None						(1104)	30	28	60	
One						(96)	54	15	38	
Two or more						(44)	79	9	29	

Filter Variable	Time 1 "Great Amount of Nervous Strain Connected With My Daily Activities"	Time 2 "Great Amount of Nervous Strain Connected With My Daily Activitie Statement Describes Respondent				
		(n)	Very Well	Fairly Well	Not Very Well	No At Al We
Total Elderly		(1251)	8%	17%	17%	
Household Composition						
Alone		(376)	7	15	18	
With spouse only		(490)	7	19	15	
With spouse & children only		(95)	9	17	18	
With children only		(97)	7	22	14	
Other combinations		(193)	11	17	20	
Age						
65-69		(381)	8	17	17	
70-74		(378)	9	19	15	
75-79		(260)	6	20	16	
80-84		(141)	8	13	19	
85+	NOT ASKED	(86)	8	13	21	
Perceived Health***						
Excellent		(216)	4	10	9	
Good		(532)	6	16	16	
Fair		(393)	9	24	19	
Poor		(107)	25	19	24	
Number of Unmet Needs ***						
None		(1113)	6	17	16	
One		(94)	21	26	16	
Two or more		(44)	38	23	23	

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

3.15 Social Factors. Several indications of the quantity
and self-perceived quality of social activity of the elderly are
presented in Table 37. The amount of social contact with people with
whom the respondent does not live is presented first. A total of
15 percent of the elderly reported social contact with non-household
persons at a frequency of once a week or less, while 57 percent
reported some daily contact. Household composition had a significant
affect on the amount of contact with non-household members, with
those living alone being slightly more likely to have daily contact
and those living with children being considerably less likely to have
daily contact. The older age groups (particularly those aged 85 or
more and to a slightly lesser extent those 80 through 84 years of age)
reported significantly lesser amounts of social contact with non-house-
hold people. The frequency of social contact also declined as a function
of decreasing levels of perceived health and as a function of whether or
not the respondent had an unmet need.

These data support the contention that the social activities of
an older person are the first things to be curtailed when problems
occur. Social activities in some ways function as an early warning
indicator that changes in the overall life style are occurring.

A dimension which is closely related to the frequency of contact
with non-household people is the frequency of simply leaving one's
house or apartment and venturing outside for whatever reason. Table 37
also presents the information indicating that the percentage of total
elderly who reported leaving their homes almost every day was 60 percent.

Household composition had a significant affect on the frequency of
leaving the home. Those living with children or in other combinations
were much less likely to leave the house or apartment daily. Increasing
age significantly decreased the frequency with which the respondent
reported leaving the home, particularly among those age 85 or more and
to a slightly lesser degree those age 80 through 84 years of age. Per-
ceived health also had a significant affect on the response patterns as
seen in the dramatic difference in the percentages for leaving the home
daily between those who reported excellent health and those who reported
poor health (80 percent as opposed to 27 percent). Those respondents
with an unmet need were two to three times more likely to report leaving
the home less than once a week.

The data from this item also indicate that 2 percent of the elderly
were functionally homebound, that is reporting leaving their homes never
or almost never except for emergencies. A greater percentage of those
living with children were homebound, suggesting that the particular needs
of the homebound elderly person are met by the informal support system of
the family. In addition, the older age groups and those who reported
poor health had a considerably greater number of homebound respondents.

As always, attention to the stability of the aggregate response
distributions finds the expected constancy between Time 1 and Time 2.

Most of the elderly (92 percent) reported having a particular friend that they feel close to and can confide in (Table 37). Those respondents living alone were significantly less likely to report having a confidant. Age also had a significant influence on whether or not the respondent reported having a close friend, with the younger age group (65 through 69 years old) being more likely to report having a close friend. In addition, the older the respondent the more likely he or she would report not seeing as much of the close friend as desired. The respondents who reported poor health were significantly more likely to report not having a close friend and not seeing as much of the close friend as desired. The presence of an unmet need also decreased the likelihood of having a close friend and decreased the satisfaction with the amount of time seeing the friend.

A related dimension is the satisfaction with the amount of contact with relatives. Nearly two out of three elderly (64 percent) reported seeing as much of their relatives as desired (Table 37). Household composition significantly affected the response pattern, with those living alone or with spouse less likely to report seeing as much of their relatives as they would like. The age groups of 75 through 79 years of age and those of 85 or more years, were found to have a significantly greater likelihood of reporting not seeing as much of relatives as desired. Perceived health was not a significant influence but the number of unmet needs very dramatically was, with the presence of an unmet need having a drastic affect on the percentage who reported seeing as much of relatives as desired.

As would be expected, those respondents living alone were significantly less likely to report spending the day with someone (Table 37). However, it is interesting to note that those living with children were also much less likely to report spending the day with someone. Increasing age also decreased the number of people who reported spending the day with someone. Perceived health did not have a significant influence but those respondents with an unmet need were less likely to report spending the day with someone.

Almost half (46 percent) of the elderly reported belonging to a club, a lodge or another social organization (Table 37). Those people living alone or with spouse only, those who reported excellent or good health, and those with no unmet needs were more likely to report belonging to some kind of organization.

Nearly all of the elderly have a telephone (98 percent), while half of the remaining people have a phone that they can use without going outside. There was a significantly greater percentage of respondents living alone who reported not having their own telephone.

Of those elderly respondents who do have a telephone to use, about half (52 percent) did talk on the phone at least once a day. Household composition had a significant affect on the frequency of phone conversations, with those living alone reporting about twice the frequency of talking on the phone several times daily. The frequency of phone

conversations decreased significantly with increasing age. In particular, those respondents reporting poor health were significantly less likely to report daily phone conversations. Those people with one or more unmet needs also reported a significantly lesser frequency of talking on the phone.

The implication of all this information on the amount and self-reported satisfaction with various dimensions of social activity is merely to complement with some specific information the general pattern previously reported in the social activities need assessment. There is a small percentage (two to six percent) who could probably benefit from the intervention of a formal support service group, and another quarter of the elderly who perhaps would appreciate a little more of the right kind of social activities than their usual patterns allow.

Table 37. Social Factors for Various Subgroups of the Elderly.

| Filter Variable | (n) | Time 1 Social Contact With Non-Household Persons | | | | | |
		Almost Daily	Few Times a Week	Once a Week	Few Times a Month	Once a Month	Less Often
Total Elderly	(1603)	·47%	26%	11%	8%	3%	5%
Household Composition							
Alone	(452)	56	23	9	5	4	3
With spouse only	(652)	45	30	12	8	2	3
With spouse and children only	(123)	39	27	13	8	4	9
With children only	(110)	36	20	17	12	6	8
Other combinations	(266)	41	27	10	9	3	10
Age							
65-69	(579)	50	25	13	6	3	3
70-74	(435)	46	32	9	4	3	6
75-79	(302)	48	25	11	9	3	4
80-84	(189)	40	23	11	13	4	9
85+	(92)	28	22	11	19	7	13
Perceived Health							
Excellent	(293)	53	26	11	8	1	1
Good	(682)	49	27	12	5	3	4
Fair	(419)	43	29	9	9	4	6
Poor	(180)	32	16	15	16	7	14
Number of Unmet Needs							
None							
One							
Two or more							

| Filter Variable | (n) | Time 2 Social Contact With Non-Household Persons | | | | | |
		Almost Daily	Few Times a Week	Once a Week	Few Times a Month	Once a Month	Less Often
Total Elderly	(1265)	57%	28%	7%	5%	1%	2%
Household Composition***							
Alone	(389)	66	24	6	2	1	1
With spouse only	(491)	57	30	6	4	1	2
With spouse and children only	(95)	59	20	12	5	1	3
With children only	(98)	35	43	11	8	1	2
Other combinations	(192)	52	28	8	9	2	1
Age*							
65-69	(382)	61	27	6	4	1	1
70-74	(382)	57	27	9	5	1	1
75-79	(262)	60	25	9	3	1	2
80-84	(143)	50	38	5	4	0	3
85+	(91)	46	33	9	7	2	3
Perceived Health***							
Excellent	(215)	69	19	7	3	1	1
Good	(533)	60	29	6	3	1	1
Fair	(399)	53	31	9	5	1	1
Poor	(111)	39	31	8	14	3	5
Number of Unmet Needs***							
None	(1121)	60	28	7	3	1	1
One	(99)	39	32	6	13	2	8
Two or more	(45)	31	31	16	16	4	2

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 37. Social Factors for Various Subgroups of the Elderly (continued).

| | Time 1 Social Factors | | | | | Time 2 Social Factors | | | | |
| | FREQUENCY OF LEAVING HOUSE OR APARTMENT | | | | Percent Homebound (Leaving Home for Emergencies only) | FREQUENCY OF LEAVING HOUSE OR APARTMENT | | | | Percent Homebound (Leaving Home for Emergencies only) |
Filter Variable	(n)	Almost Every Day	Few Times a Week	Once a Week	Less Often		(n)	Almost Every Day	Few Times a Week	Once a Week	Less Often	
Total Elderly	(1661)	63%	22%	6%	9%		(1308)	60%	23%	7%	10%	2%
Household Composition***												
Alone	(461)	63	26	5	6		(394)	61	23	8	8	2
With spouse only	(676)	68	20	6	6		(510)	64	24	6	6	1
With spouse & children only	(125)	68	19	7	6		(100)	73	14	6	7	1
With children only	(118)	41	28	14	17		(107)	40	29	10	21	6
Other combinations	(281)	59	19	5	17	NOT	(197)	53	22	8	17	4
Age***						ASKED						
65-69	(594)	74	18	4	4		(389)	72	21	4	3	1
70-74	(444)	66	22	5	7	IN	(390)	62	25	8	5	1
75-79	(315)	60	27	6	7		(275)	58	27	7	8	3
80-84	(199)	43	31	11	15	THIS	(150)	47	21	10	22	5
85+	(102)	31	22	12	35		(98)	33	18	9	40	8
Perceived Health***						FORMAT						
Excellent	(296)	78	18	2	2		(216)	80	17	1	2	0
Good	(685)	73	19	4	4		(533)	69	22	4	5	1
Fair	(419)	57	27	7	9		(395)	50	29	11	10	2
Poor	(187)	25	29	16	30		(111)	27	23	16	34	10
Number of Unmet Needs***												
None							(1152)	65	24	6	5	0
One							(112)	25	19	12	44	18
Two or more							(44)	11	21	23	45	23

| | Time 1 Social Factors | | | | Time 2 Social Factors | | | | |
Filter Variable[A]	(n)	% Having Someone They Feel Close to	Of Those, % Who See As Much of That Person as Would Like	% Who See as Much of Relatives as Would Like	% Generally With Someone Most of The Day	(n)	% Having Someone They Feel Close to	Of Those, % Who See as Much of That Person as Would Like	% Who See as Much of Relatives as Would Like	% Generally With Someone Most of the Day
Total Elderly	(1638)	93%			66%	(1275)	92%	83%	64%	66%
Household Composition							**		*	***
Alone	(457)	91			16	(387)	88	80	60	28
With spouse only	(670)	95			81	(497)	95	81	62	90
With spouse & children only	(125)	91			79	(97)	93	87	74	93
With children only	(114)	94			39	(99)	90	84	69	46
Other combinations	(273)	95			72	(194)	94	88	70	77
Age							***	*	**	***
65-69	(579)	96			62	(383)	97	85	70	74
70-74	(440)	94			59	(384)	91	82	65	67
75-79	(315)	91			57	(265)	87	85	59	65
80-84	(195)	91			54	(144)	92	76	67	58
85+	(102)	91	NOT ASKED		53	(92)	91	74	51	48
Perceived Health							**	***		
Excellent	(293)	96			55	(214)	92	81	68	67
Good	(688)	95			58	(532)	95	87	67	68
Fair	(426)	95			61	(397)	90	82	61	64
Poor	(187)	81			57	(109)	85	68	57	60
Number of Unmet Needs							***	***	***	***
None						(1127)	94	85	68	69
One						(103)	83	60	42	48
Two or more						(45)	73	52	16	36

* Time distribution significantly influenced by this filter variable at .05 level (chi square).

** Time distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi-square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 37. Social Factors for Various Subgroups of the Elderly (continued).

| | Time 1 Social Factors | | | | | | Time 2 Social Factors | | | | | |
| | % Belonging to Clubs, Lodges, Or- | HAS TELEPHONE | | | | | % Belonging to Clubs, Lodges, Or- | HAS TELEPHONE | | | |
Filter Variable[A]	(n)	ganizations	(n)	With Phone	With Phone to Use	No Phone	(n)	ganizations	(n)	With Phone	With Phone to Use	No Ph
Total Elderly	(1684)	45%	(1683)	97%	–	3%	(1315)	46%	(1316)	98%	1%	
Household Composition								**		------- *** ------		
Alone	(466)	47	(466)	93	–	7	(394)	50	(395)	95	3	
With spouse only	(685)	48	(685)	98	–	2	(511)	50	(511)	98	1	
With spouse & children only	(127)	35	(127)	98	–	2	(101)	34	(101)	100	0	
With children only	(120)	37	(120)	98	–	2	(107)	36	(107)	99	1	
Other combinations	(286)	38	(285)	99	–	1	(202)	43	(202)	99	1	
Age												
65-69	(595)	45	(595)	97	–	3	(390)	47	(390)	98	1	
70-74	(450)	45	(450)	97	–	3	(393)	46	(394)	98	1	
75-79	(323)	48	(323)	96	–	4	(275)	48	(275)	97	1	
80-84	(201)	44	(201)	97	–	3	(152)	45	(152)	98	1	
85+	(108)	32	(107)	94	–	6	(99)	34	(99)	97	3	
Perceived Health								***				
Excellent	(297)	59	(297)	99	–	1	(216)	57	(216)	97	2	
Good	(688)	46	(688)	98	–	2	(534)	52	(534)	98	1	
Fair	(431)	41	(431)	96	–	4	(399)	39	(399)	97	2	
Poor	(189)	29	(189)	93	–	7	(113)	31	(113)	96	3	
Number of Unmet Needs								***				
None							(1156)	48	(1158)	98	1	
One							(114)	30	(113)	94	3	
Two or more							(45)	27	(45)	96	2	

| | Time 1 Of Those With Phone, Frequency of Talking with Friends or Relatives | | | | | | Time 2 Of Those With Phone, Frequency of Talking with Friends or Relatives | | | | |
Filter Variable	(n)	Several Times a Day	Once a Day	Few Times a Week	Once a Week	Less Often	(n)	Several Times a Day	Once a Day	Few Times a Week	Once a Week	Less Ofte
Total Elderly	(1588)	35%	19%	26%	8%	12%	(1296)	35%	17%	28%	6%	14%
Household Composition ***												
Alone	(424)	46	20	24	6	4	(385)	47	19	21	6	7
With spouse only	(654)	32	19	28	9	12	(502)	29	17	34	6	14
With spouse & children only	(123)	20	19	34	8	19	(101)	23	14	27	10	26
With children only	(110)	32	18	24	6	20	(106)	32	15	26	9	17
Other combinations	(277)	31	16	24	9	20	(202)	31	18	28	5	18
Age ***												
65-69	(568)	33	21	29	8	9	(385)	31	20	33	7	9
70-74	(426)	40	18	25	8	9	(388)	38	17	28	5	12
75-79	(302)	38	16	27	8	11	(268)	37	18	25	7	13
80-84	(189)	29	17	27	7	20	(150)	34	14	25	6	21
85+	(96)	19	22	16	12	31	(99)	25	14	22	12	27
Perceived Health **												
Excellent	(289)	32	19	33	5	11	(213)	35	20	23	10	12
Good	(658)	38	18	28	9	7	(528)	38	18	29	5	10
Fair	(407)	37	20	23	8	12	(394)	32	17	31	5	15
Poor	(170)	25	19	18	11	27	(109)	29	15	25	11	20
Number of Unmet Needs **												
None							(1143)	35	17	29	6	13
One							(109)	31	15	24	9	21
Two or more							(44)	18	25	21	9	27

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi-square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

3.16 Alcohol and Tobacco Consumption. The patterns of alcohol and tobacco consumption are increasingly being used in the evaluation of disease and disability etiology. Excessive consumption of either has been a long-standing concern of health educators and health planners. However, too little descriptive information has been available on the patterns of consumption for a probability sample of the elderly. The information presented in Table 38 is intended to address the problem of an insufficient descriptive data base.

About three out of four (76 percent) of the elderly reported that they never or almost never drink wine. Only 13 percent of the total elderly reported drinking wine once a week or more often.* The mean number of drinks of wine per week for those who reported drinking wine with some amount of consistency (anything more frequent than never or almost never) was 3.10. Neither household composition nor age had a significant influence on the frequency of wine drinking. However, those who reported their health as fair or poor and those who had one or more unmet needs also reported drinking wine with some consistency significantly less often.

The percentage of older people who reported drinking beer was even less, with nearly three out of four (74 percent) of the total elderly reporting that they never drink beer. Only nine percent of the elderly respondents reported drinking beer once a week or more often. Household composition had a significant affect on the response pattern, those living with spouse or with spouse and children were about twice as likely to report drinking beer with some regularity than the others. In addition, those respondents in the younger age groups and those with an unmet need were significantly more likely to report drinking beer more often.

About one out of five of the total elderly (19 percent) reported drinking liquor or cocktails at a frequency of once a week or more often. Of those who reported drinking liquor more than never or almost never, the mean number of drinks per week was 4.25. Those respondents living with a spouse were significantly more likely to report drinking liquor at least once a week. Age also had a significant influence on the frequency of liquor consumption with the 85 or more age group having a greatly increased percentage of people reporting they never drink liquor. In addition, those respondents who reported excellent or good health significantly more often reported drinking liquor or cocktails with at least weekly regularity.

One interpretation of all the alcohol consumption information is that the younger, healthier people with no unmet needs as a group

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*The response options for the three alcohol consumption items are truncated in this table because of the small percentage of respondents who used some of the categories. Appendix A includes the percentage distributions for all response options.

consume alcohol with more regularity than the rest of the elderly.
No one needs to be reminded though, that such correlational data does
not imply that one factor is causing the other, but perhaps both
factors are influenced by a third one, like a generalized zest for
enjoying life.

Nearly half (48 percent) of the elderly respondents reported that
they had never smoked (Table 38). The percentage of total elderly who
currently smoke was 23 percent and of those current smokers, 25 percent
were pipe or cigar smokers. The remaining 75 percent who were cigarette
smokers had a mean number of 16 cigarettes per day. Household com-
position, age, and perceived health significantly influenced smoking
habits. Those respondents living alone or with children only, those
in older age groups, and those who reported their health as fair or
poor were less likely to be current smokers.

Though the data is not presented in the table, it is worth noting
that the gender of the respondents did have a significant influence
on their reported smoking habits. A significantly greater percentage
of females reported having never smoked (67 percent as opposed to 18
percent of the males). A significantly smaller percentage of the
females were current smokers (16 percent compared to 34 percent of
the males). In addition, the number of cigarettes smoked daily for
the current cigarette smokers was significantly higher for the males
than for the females.

Table 38. Patterns of Alcohol and Tobacco Consumption for Various Subgroups of the Elderly.

Filter Variable	Time 1 Wine Consumption	Time 2 Wine Consumption FREQUENCY OF DRINKING WINE			Mean Number of Drinks per Week of Those Who Drink Wine With Some Consistency[A]
		(n)	Never	Almost Never	More Often	
Total Elderly		(1315)	57%	19%	24%	3.10
Household Composition						
Alone		(396)	57	22	21	
With spouse only		(511)	56	17	27	
With spouse & children only		(100)	51	21	28	
With children only		(106)	70	14	16	
Other combinations		(202)	57	18	25	
Age						
65-69		(391)	56	19	25	
70-74		(394)	54	23	23	
75-79		(274)	62	14	24	
80-84		(151)	52	20	28	
85+	NOT ASKED	(99)	71	11	18	
Perceived Health***						
Excellent		(215)	46	17	37	
Good		(535)	54	21	25	
Fair		(398)	62	19	19	
Poor		(113)	77	13	10	
Number of Unmet Needs**						
None		(1156)	55	20	25	
One		(114)	72	11	17	
Two or more		(45)	80	9	11	

Filter Variable	Time 1 Beer Consumption	Time 2 Beer Consumption FREQUENCY OF DRINKING BEER			Mean Number of Drinks per Week of Those Who Drink Beer With Some Consistency[A]
		(n)	Never	Almost Never	More Often	
Total Elderly		(1308)	74%	13%	11%	3.91
Household Composition***						
Alone		(396)	82	9	9	
With spouse only		(507)	67	15	18	
With spouse & children only		(97)	59	21	20	
With children only		(106)	86	6	8	
Other combinations		(202)	76	13	11	
Age***						
65-69		(386)	65	14	21	
70-74		(393)	72	15	13	
75-79		(274)	81	9	10	
80-84		(150)	77	15	8	
85+	NOT ASKED	(99)	87	5	8	
Perceived Health						
Excellent		(213)	69	15	16	
Good		(531)	73	14	13	
Fair		(397)	76	12	12	
Poor		(113)	87	6	7	
Number of Unmet Needs*						
None		(1149)	72	14	14	
One		(114)	81	10	9	
Two or more		(45)	93	0	7	

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] The number of cases is too small to provide reliable figures for each of the categories of the filter variables.

Table 38. Patterns of Alcohol and Tobacco Consumption for Various Subgroups of the Elderly (continued).

Filter Variable	Time 1 Alcohol Consumption	Time 2 Alcohol Consumption				Mean Number of Drinks per Week Of Those Who Drink Liquor With Some Consistency[A]
		FREQUENCY OF DRINKING LIQUOR				
		(n)	Never	Almost Never	More Often	
Total Elderly		(1315)	56%	16%	28%	4.25
Household Composition**						
Alone		(395)	59	16	25	
With spouse only		(511)	50	16	34	
With spouse & children only		(101)	55	18	27	
With children only		(106)	63	13	24	
Other combinations		(202)	60	17	23	
Age***						
65-69		(391)	48	16	36	
70-74		(393)	55	18	27	
75-79		(275)	58	16	26	
80-84		(151)	58	19	23	
85+	NOT ASKED	(99)	80	5	15	
Perceived Health***						
Excellent		(215)	47	12	41	
Good		(534)	51	19	30	
Fair		(399)	61	16	23	
Poor		(113)	75	11	14	
Number of Unmet Needs**						
None		(1156)	54	17	29	
One		(114)	67	10	23	
Two or more		(45)	80	9	11	

Filter Variable	Time 1 Tobacco Consumption	Time 2 Tobacco Consumption				OF THE CURRENT SMOKERS	
		SMOKING HABITS				% Who Are Pipe or Cigar Smokers Only[A]	Mean Number of Cigarettes per Day of The Cigarette Smokers[A]
		(n)	Never Smoked	Smoked In Past	Currently Smoke		
Total Elderly		(1314)	48%	29%	23%	25%	16.28
Household Composition***							
Alone		(394)	58	23	19		
With spouse only		(511)	37	38	25		
With spouse & children only		(100)	41	22	37		
With children only		(107)	64	20	16		
Other combinations		(202)	54	23	23		
Age***							
65-69		(390)	38	29	33		
70-74		(394)	46	31	23		
75-79		(273)	56	25	19		
80-84		(152)	59	29	12		
85+	NOT ASKED	(99)	62	25	13		
Perceived Health*							
Excellent		(215)	41	35	24		
Good		(533)	50	24	26		
Fair		(399)	50	31	19		
Poor		(113)	50	29	21		
Number of Unmet Needs							
None		(1156)	48	29	23		
One		(114)	53	27	20		
Two or more		(44)	59	25	16		

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] The number of cases is too small to provide reliable figures for each of the categories of the filter variables.

3.17 Dietary Patterns and Nutritional Intake. This section pro-
vides descriptive information about both the diet and meal habits of
the elderly (Table 39) and their nutritional intake patterns (Table 40).

The percentage of total elderly who reported following a diet
ordered by the doctor is 26 percent, of whom 89 percent reported being
able to follow the particular diet (Table 39). The specific health
problems which were named as the reason for the diet were numerous and
varied. The health problems were classified as follows: cardiovascular
health problems (36 percent of those on diets), gastrointestinal health
problems (20 percent), weight problems (seven percent), and all other
problems (37 percent). A total of eight percent of the elderly reported
having had a new diet ordered by the doctor in the interim period between
the Time 1 and Time 2 interviews.

Household composition had a significant affect on whether or not the
respondent reported a special diet. Those people living with children or
in other combinations were more likely to report a special diet. Once
again, these data suggest the existence of the family as informal support
system for the older person. Age did not significantly influence the
reported diets but perceived health and the number of unmet needs did.
Those who reported poor health and to a slightly lesser degree fair health
were more likely to report having a special diet. In addition, those
who reported poor health significantly more often reported not being
able to follow the diet. The presence of an unmet need increased the
likelihood that the respondent would report a special diet and increased
the likelihood that he or she would report not being able to follow the
diet.

A total of 36 percent of the elderly reported a weight change of
five pounds or more in the 15 month period between the Time 1 and Time
2 interviews (Table 39). For the 13 percent who had an increase of
five pounds or more, the mean number of additional pounds was 9.16.
For the 23 percent who had a decrease in weight, the mean number of
pounds lost was 13.23. The reported weight increases were significantly
influenced by the age of the respondent, with twice as many of those under
age 80 reporting increases of five or more pounds than those aged 80 or
more. Weight decreases of five or more pounds were significantly influ-
enced by household composition, perceived health, and number of unmet
needs of the respondent. Weight loss was reported more frequently by
those living with children only, those with poor self-perception of
health, and those with two or more unmet needs.

More than one third (37 percent) of those who had a weight change
reported the reason for the change as either a doctor-ordered diet or
as the result of a period of ill health or emotional stress. About
half (52 percent) reported a change in behavior (such as an intentional
diet, a change in smoking behavior or physical activity) and 11 percent
reported no particular reason for the weight change.

About one in three (32 percent) of the total elderly reported that
they usually eat their meals alone (Table 39). As would be expected,

household composition had a significant affect on their responses; a total of 89 percent of those living alone reported eating alone. The frequency of eating alone increased significantly as a function of increasing age, particularly for those aged 85 or more. Perceived health did not significantly affect the likelihood of eating alone; however, the presence of an unmet need significantly increased the chances that a respondent would report usually eating alone.

Three out of four of the total elderly (75 percent) reported their usual meal pattern as three meals per day and only seven percent reported eating one regular meal or less daily. In the subgroups, only the number of unmet needs had a significant influence on the usual meal pattern. Those people with two or more unmet needs were more likely to report one meal per day or less.

The majority of the elderly (84 percent) rated their appetite as either excellent or good (Table 39). Only four percent rated their appetite as poor; the most frequently reported reason for the poor appetite was ill health (23 out of the 51 people). As might be expected, perceived health was significantly associated with perceived appetite. The relationship was dramatic and linear; those who reported their general health as excellent were more likely to report excellent appetite and those who reported poor health significantly more often reported poor appetite. The presence of an unmet need also significantly increased the likelihood that the respondents would rate their appetites as fair or poor.

The percentage of elderly who were satisfied with their meals was 98 percent. Little variation in the percentages was noted in the subgroup analyses with the one exception that those people with two or more unmet needs were more likely to report being not satisfied with the quality of their meals. The stability of the distribution over time is expectantly high.

The Time 2 interview contained a series of questions obtaining information about the consumption of specific foods. Table 40 provides a limited picture of the specific foods the elderly usually eat. Each respondent reported the frequency of eating each of the 43 food items included in the questionnaire. However, the respondent was not asked about the portion size of any particular item. Several foods were combined into one item (such as fresh strawberries or fresh melon) and the respondent indicated the frequency of eating any one. In addition, the respondent reported the frequency of eating each of the food items separately without any indication of the combination of foods in meals that would serve to combine nutrients and increase the overall nutritional value of the food consumed. Thus the interpretation of this self-reported food consumption information is not as straightforward as the interpretation of most of the preceding data. Furthermore, the self-reported consumption information, which is the basis of the nutritional intake patterns presented in Table 40 is perhaps slightly less reliable than other kinds of self-reported information because the task makes more difficult cognitive demands on the respondents. Normalizing the frequency with which a person customarily consumes a specific type of food, correcting for additional

consumption in certain circumstances and missed consumption in other circumstances, is a difficult task. Some specific methodological analyses are being done to gauge the actual reliability of such information, so in the meantime the information should be interpreted as a description of the order of magnitude, not necessarily exact estimates. Consequently, the focus of this discussion is on what nutrients these elderly respondents are usually eating. No assumptions are made about the nutritional adequacy or quality of their consumption.

The one or two primary nutrients in each of the 43 items were identified and then the items were grouped together by several of the important nutrients (protein, Vitamin A, Vitamin C, riboflavin, thiamin, niacin, iron, calcium). Thus, any one food item may appear as a source for one or more nutrients.

The first food group presented contains the mean number of times per week each of 13 common sources of protein was consumed. The mean number of times that any of these sources of protein was consumed is about 26 for the total elderly. On a 21 meal a week norm, that means that slightly more than one source of protein was consumed per meal. Beef or hamburger was consumed almost four times a week. The older respondents reported eating beef or hamberger at a significantly lower rate. Eggs were consumed three times a week with no significant variation among the different subgroups. The reported consumption of milk was about five times per week; both age and perceived health had a significant affect on the distribution of these responses. Increasing age also increased the likelihood of reporting a greater frequency of consuming milk, as did reporting poor health.

Next consider Vitamin A intake. For the total elderly, the mean number of times per week that any of the six items which are sources of Vitamin A was consumed was about 12. Salads or leafy green vegetables were reported consumed three to four times per week on the average, but several groups of respondents (those living alone, those in the older age groups, those who reported their health as fair or poor, and those with an unmet need) reported a significantly lower rate of consumption. The reasons for these subgroup variations are not apparent. Carrots and tomatoes were both reported consumed more than twice a week.

The mean number of times per week that any of the five items which are sources of Vitamin C was consumed was close to 12 for the total elderly. Oranges or grapefruit (either fresh or as juices) were reported consumed nearly six times per week, or almost once a day.

For the total elderly the mean number of times per week that any of the nine items which are sources of riboflavin were consumed was 20, or almost every meal. The mean number of times for any of the three sources of thiamin was slightly more than seven, which prorated means once a day. The mean for any of the six sources of niacin was about 19, close to almost every meal.

Across the twelve sources of iron, the mean number of times per week that any item was consumed was nearly 31 for the total elderly. The mean number of times per week of reported consumption for any of the fourteen items that are sources of calcium was about 39, which is almost two sources per meal on a 21 meal per week norm.

After grouping the food items by their primary nutrients as we have presented, three additional groupings (sweets, starches, and miscellaneous other foods) were required to present the food intake pattern of the elderly as completely as these data allow.

The reported consumption of sweets was minimal. Cakes, pies, pastry and cookies combined, at about three times per week, were the only sweet foods eaten more than twice a week.

Food items which are commonly considered starches were also grouped together. Bread was the only food item that had a mean rate of weekly consumption (9.50) that suggested it was eaten more than once daily. Cereal and potatoes were items that were reportedly consumed slightly more than four times per week. The older age groups reported eating cereal and eating potatoes significantly more often. In addition, those living alone were significantly less likely to report eating potatoes.

The final grouping of food items contained all those items that did not fall into a clearly defined category. Contrary to one of the popular assumptions, it is interesting to note the incredibly low mean number of times per week that TV dinners were consumed (0.27 times); in fact, TV dinners is the food item with the lowest reported consumption. In addition, the mean number of times per week for each of the soup items was just about one.

About one in three (32 percent) of the elderly reported taking vitamin pills, for whom the mean number of pills taken per week was 6.7, slightly less than one vitamin pill per day. As might be expected, those people who rated their health as fair or poor were taking the vitamin pills significantly more often.

The reported frequencies of consumption for the 43 specific food items of course can be analyzed in different combinations to address the aggregate consumption of different nutrients. For example, if potassium consumption were of interest to a reader, he or she could determine that three of the 43 items (orange or grapefruits, green peppers, and dried fruit) are good sources of potassium. The reported consumption frequencies were 5.78, 1.17, and 1.03 respectively, suggesting almost daily consumption of items which are good sources of potassium.

Table 39. Diet and Meal Patterns for Various Subgroups of the Elderly.

Filter Variable[A]	Time 1 Following a Special Diet				Time 2 Following a Special Diet			
	(n)	Percent Following a Diet Ordered by Doctor	(n)	Of Those With Special Diet, Percent Able to Follow the Diet	(n)	Percent Following a Diet Ordered by Doctor	(n)	Of Those With Special Diet Percent Able to Follow the Diet
Total Elderly	(1682)	25%	(409)	84%	(1314)	26% *	(333)	89%
Household Composition								
Alone	(465)	23	(104)	87	(395)	23	(92)	88
With spouse only	(684)	23	(155)	81	(509)	24	(119)B	93
With spouse & children only	(127)	28	(35)	89	(101)	26	(25)B	88
With children only	(120)	31	(37)	84	(107)	33	(34)B	79
Other combinations	(286)	28	(78)	86	(202)	32	(63)	91
Age								
65-69	(594)	25	(150)	84	(389)	24	(93)	90
70-74	(450)	26	(117)	81	(393)	27	(105)	88
75-79	(322)	25		82	(275)	27	(75)	92
80-84	(201)	22	(44)B	93	(152)	26	(39)B	90
85+	(108)	19	(20)B	95	(99)	21	(20)B	85
Perceived Health						***		
Excellent	(296)	8	(23)B	91	(215)	10	(20)B	90
Good	(688)	18	(122)	81	(534)	22	(113)	90
Fair	(430)	37	(158)	86	(398)	33	(131)	93
Poor	(189)	45	(85)	83	(113)	51	(58)	79
Number of Unmet Needs						***		
None					(1156)	24	(277)B	92
One					(113)	30	(34)B	79
Two or more					(45)	49	(22)B	77

Filter Variable[A]	Time 1 Weight Change	Time 2 Weight Change			OF THOSE WITH WEIGHT CHANGE REASON GIVEN		
		(n)	Percent Who Had Increase of 5 lb. or More	Percent Who Had Decrease of 5 lb. or More	(n)	No Particular Reason	Health or Emotional
Total Elderly		(1287)	13%	23%	(467)	11%	37%

Other Change in Behavior column values follow at right of each row:

Filter Variable[A]	Time 1 Weight Change	(n)	Percent Who Had Increase of 5 lb. or More	Percent Who Had Decrease of 5 lb. or More	(n)	No Particular Reason	Health or Emotional	Other Change in Behavior
Total Elderly		(1287)	13%	23%	(467)	11%	37%	52%
Household Composition				*				
Alone		(381)	11	22	(126)	13	37	50
With spouse only		(508)	15	24	(195)B	8	37	55
With spouse & children only		(98)	15	13	(27)B	15	22	63
With children only		(103)	13	30	(45)	20	40	40
Other combinations		(197)	12	26	(74)	7	43	50
Age	NOT			***				
65-69		(384)	19	22	(155)	10	33	53
70-74	ASKED	(384)	13	23	(139)	9	40	51
75-79		(270)	13	22	(93)	10	35	55
80-84		(147)	7	29	(51)B	20	45	35
85+		(96)	6	24	(29)B	14	38	48
Perceived Health				***		----------*----------		
Excellent		(210)	12	16	(59)	10	17	73
Good		(526)	12	20	(171)	11	35	54
Fair		(387)	16	26	(160)	9	44	47
Poor		(111)	13	41	(58)	10	53	37
Number of Unmet Needs				***		----------**----------		
None		(1136)	13	22	(391)	10	35	55
One		(108)	16	28	(50)B	10	46	44
Two or more		(43)	7	51	(26)B	15	65	20

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).
** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).
*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

B The number of cases is too small to provide reliable percentage estimates.

Table 39. Diet and Meal Patterns for Various Subgroups of the Elderly (continued).

Filter Variable[A]	Time 1 Food Consumption Patterns		Time 2 Food Consumption Patterns						
					USUAL MEAL PATTERN				
		(n)	Percent Who Usually Eat Alone	(n)	Three Regular Meals	Two Regular Meals	One Reg. Meal; Rarely Snack	One Reg. Meal; Snack Quite a Bit	Zero Reg Meal Snack All Day
Total Elderly		(1309)	32%	(1314)	75%	18%	2%	4%	1%
Household Composition			***						
Alone		(392)	89	(395)	73	17	4	5	1
With spouse only		(510)	4	(510)	78	18	1	2	1
With spouse & children only		(101)	3	(101)	75	19	2	3	1
With children only		(106)	20	(106)	68	21	3	6	2
Other combinations		(200)	13	(202)	77	17	1	4	1
Age			***						
65-69		(390)	26	(391)	72	18	3	6	1
70-74	NOT	(391)	29	(393)	77	17	2	3	1
75-79		(273)	35	(275)	79	15	1	3	2
80-84	ASKED	(150)	37	(151)	77	20	1	2	0
85+		(99)	49	(98)	76	20	2	1	1
Perceived Health									
Excellent		(214)	32	(216)	78	15	3	3	1
Good		(532)	30	(534)	77	17	2	3	1
Fair		(397)	35	(396)	74	18	3	4	1
Poor		(113)	31	(113)	69	24	1	3	3
Number of Unmet Needs			***				---***---		
None		(1152)	29	(1156)	77	17	2	3	1
One		(112)	55	(113)	70	23	3	2	2
Two or more		(45)	56	(45)	53	20	7	13	7

Filter Variable	Time 1 Food Consumption Patterns			Time 2 Food Consumption Patterns					
	HOW DESCRIBE PRESENT APPETITE	(n)	Percent Satisfied With the Quality of Their Meals	HOW DESCRIBE PRESENT APPETITE					Percent Satisfied With the Quality of Their Meals
				(n)	Excellent	Good	Fair	Poor	(n)	
Total Elderly		(1598)	98%	(1314)	39%	45%	12%	4%	(1260)	98%
Household Composition										
Alone		(453)	97	(396)	33	48	15	4	(384)	96
With spouse only		(650)	98	(509)	43	45	9	3	(490)	98
With spouse & children only		(121)	98	(101)	39	48	10	3	(95)	100
With children only		(111)	96	(106)	32	45	17	6	(98)	98
Other combinations		(263)	99	(202)	41	43	11	5	(193)	99
Age										
65-69		(568)	98	(391)	41	47	9	3	(382)	98
70-74		(435)	97	(392)	41	44	11	4	(379)	97
75-79	NOT	(304)	98	(275)	35	45	15	5	(262)	98
80-84		(189)	99	(151)	35	48	12	5	(142)	99
85+	ASKED	(96)	97	(99)	36	44	17	3	(90)	97
Perceived Health							---***---			
Excellent		(289)	99	(214)	66	31	3	0	(215)	99
Good		(675)	99	(534)	41	51	7	1	(533)	98
Fair		(421)	97	(399)	27	50	19	4	(395)	97
Poor		(185)	93	(113)	20	36	24	20	(110)	95
Number of Unmet Needs							---***---			**
None				(1155)	41	46	10	3	(1119)	98
One				(114)	23	43	23	11	(98)	96
Two or more				(45)	7	42	35	16	(43)	88

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at 001 level (chi square).

A Notice that the chi square significance level (.05, .01, 1001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 40. Nutritional Intake Patterns at Time 2 for Various Subgroups of the Elderly.

Filter Variable[A]	(n)	Beef, Ham- burger	Pork, Lamb, Veal	Chicken, Turkey	Fish	Shell Fish	Eggs	Cot- tage Cheese	Other Cheeses	Whole Milk	Skim Milk	Cus- tard	Dried Beans, Peas or Lentils	Peanuts or Peanut Butter
							Sources of Protein: Mean Number of Times Per Week Consumed							
Total Elderly	(1293)	3.71	0.95	2.02	1.47	0.31	3.32	1.53	2.50	5.08	1.98	0.53	0.68	1.54
Household Composition								**						
Alone	(385)	3.69	0.92	2.07	1.40	0.28	3.48	1.88	2.47	5.10	2.00	0.54	0.59	1.35
With spouse only	(506)	3.69	0.90	2.01	1.55	0.33	3.25	1.44	2.66	5.11	2.10	0.48	0.69	1.71
With spouse & children only	(101)	4.05	1.06	1.98	1.34	0.36	3.26	0.97	2.57	5.23	1.98	0.53	0.76	1.78
With children only	(103)	3.71	1.04	1.93	1.27	0.30	3.04	1.37	2.15	4.93	1.47	0.70	0.78	1.21
Other combinations	(197)	3.60	1.02	2.01	1.58	0.31	3.37	1.47	2.30	4.94	1.85	0.55	0.75	1.52
Age		***				*	*		*	*	**	***		**
65-69	(389)	3.94	1.00	2.01	1.58	0.38	3.16	1.61	2.81	4.43	2.55	0.35	0.60	1.86
70-74	(389)	3.82	1.01	1.89	1.33	0.31	3.35	1.57	2.42	5.22	1.76	0.55	0.67	1.50
75-79	(271)	3.51	0.83	2.12	1.60	0.23	3.48	1.52	2.44	5.30	1.86	0.58	0.79	1.44
80-84	(149)	3.51	0.81	1.98	1.51	0.28	3.36	1.35	2.35	5.47	1.65	0.64	0.72	1.39
85+	(93)	3.12	1.08	2.36	1.14	0.30	3.31	1.37	2.00	5.65	1.94	0.83	0.69	0.89
Perceived Health		*	*			*	**		**	*				
Excellent	(213)	3.70	1.10	1.87	1.63	0.31	3.47	1.57	2.69	4.81	2.10	0.55	0.61	1.68
Good	(527)	3.83	0.99	2.08	1.51	0.37	3.20	1.47	2.65	5.07	1.90	0.55	0.71	1.62
Fair	(395)	3.49	0.83	1.96	1.41	0.27	3.23	1.63	2.35	4.82	2.05	0.45	0.68	1.48
Poor	(109)	3.87	0.78	2.22	1.16	0.18	3.63	1.62	1.82	6.25	2.05	0.60	0.65	1.19
Number of Unmet Needs		***					**		*	*				
None	(1143)	3.76	0.96	1.99	1.49	0.33	3.32	1.60	2.55	5.03	2.01	0.51	0.68	1.59
One	(107)	3.53	1.02	2.27	1.28	0.21	3.37	0.97	2.31	5.25	1.82	0.68	0.74	1.13
Two or more	(43)	2.76	0.55	2.20	1.43	0.08	3.30	1.15	1.50	5.85	1.29	0.55	0.48	1.43

Filter Variable[A]	(n)	Car- rots	Straw- berries or Melons	Dried Fruit	Salads, Leafy Green Vegtbls.	Broc- coli	Toma- toes	(n)	Oran- ges Grape- fruit	Straw- berries or Melon	Broc- coli	Toma- toes	Green Peppers
		Sources of Vitamins: Vitamin A Mean Number of Times Per Week Consumed						Sources of Vitamins: Vitamin C Mean Number of Times Per Week Consumed					
Total Elderly	(1287)	2.60	0.88	1.03	3.52	0.90	2.96	(1288)	5.78	0.88	0.90	2.96	1.17
Household Composition					**	*			*		*		*
Alone	(383)	2.49	0.84	1.17	3.11	0.71	2.72	(384)	5.85	0.84	0.71	2.72	0.95
With spouse only	(505)	2.53	0.85	1.04	3.62	0.94	2.98	(505)	5.90	0.85	0.94	2.98	1.27
With spouse & children only	(101)	2.76	0.90	0.96	3.69	1.04	3.12	(101)	4.71	0.90	1.04	3.12	1.53
With children only	(103)	2.73	1.07	0.86	3.64	0.85	2.89	(103)	5.94	1.07	0.85	2.89	1.06
Other combinations	(195)	2.84	0.94	0.88	3.91	1.09	3.30	(196)	5.79	0.94	1.09	3.30	1.23
Age					***								***
65-69	(387)	2.65	0.86	0.93	3.97	0.99	3.12	(387)	5.73	0.86	0.99	3.12	1.49
70-74	(386)	2.63	0.99	0.96	3.40	0.92	2.92	(387)	5.66	0.99	0.92	2.92	1.18
75-79	(271)	2.60	0.80	1.13	3.46	0.76	2.95	(271)	5.86	0.80	0.76	2.95	1.09
80-84	(148)	2.41	0.87	1.34	3.29	0.95	2.80	(149)	5.94	0.87	0.95	2.80	0.75
85+	(92)	2.63	0.75	0.98	2.72	0.77	2.76	(92)	5.83	0.75	0.77	2.76	0.79
Perceived Health					***		*		*			*	*
Excellent	(211)	2.73	1.03	1.08	4.08	0.95	3.42	(212)	6.21	1.03	0.95	3.42	1.26
Good	(525)	2.58	0.92	0.94	3.65	0.99	2.86	(525)	5.85	0.92	0.99	2.86	1.27
Fair	(394)	2.43	0.83	1.04	3.28	0.76	2.81	(394)	5.46	0.83	0.76	2.81	1.05
Poor	(109)	2.94	0.68	1.36	2.86	0.84	2.72	(109)	5.93	0.68	0.84	2.72	0.81
Number of Unmet Needs					***		*						
None	(1138)	2.61	0.91	1.05	3.65	0.90	3.00	(1140)	5.78	0.91	0.90	3.00	1.21
One	(107)	2.79	0.68	0.98	2.63	1.02	2.83	(107)	5.59	0.68	1.02	2.83	0.99
Two or more	(43)	1.93	0.62	0.69	2.28	0.50	2.04	(42)	6.22	0.62	0.50	2.04	0.56

*
Time 2 distribution significantly influenced by this filter variable at .05 level (F-test).
**
Time 2 distribution significantly influenced by this filter variable at .01 level (F-test).
***
Time 2 distribution significantly influenced by this filter variable at .001 level (F-test).

[A]
Notice that the F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 40.   Nutritional Intake Patterns at Time 2 for Various Subgroups of the Elderly (continued).

Filter Variable[A]	(n)	Cottage Cheese	Other Cheeses	Whole Milk	Skim Milk	Custard	Yogurt	Eggs	Beef, Hamburger	Pork, Lamb, Veal
Total Elderly	(1293)	1.53	2.50	5.08	1.98	0.53	0.39	3.32	3.71	0.95
Household Composition		**								
Alone	(387)	1.88	2.47	5.10	2.00	0.54	0.45	3.48	3.69	0.92
With spouse only	(506)	1.44	2.66	5.11	2.10	0.48	0.34	3.25	3.69	0.90
With spouse & children only	(101)	0.97	2.57	5.23	1.98	0.53	0.25	3.26	4.05	1.06
With children only	(103)	1.37	2.15	4.93	1.47	0.70	0.59	3.04	3.71	1.04
Other combinations	(197)	1.47	2.30	4.94	1.85	0.55	0.40	3.37	3.60	1.02
Age			*	*	**	***			***	
65-69	(389)	1.61	2.81	4.43	2.55	0.35	0.42	3.16	3.94	1.00
70-74	(387)	1.57	2.42	5.22	1.76	0.55	0.41	3.35	3.82	1.01
75-79	(271)	1.52	2.44	5.30	1.86	0.58	0.39	3.48	3.51	0.83
80-84	(149)	1.35	2.35	5.47	1.65	0.64	0.25	3.36	3.51	0.81
85+	(93)	1.37	2.00	5.65	1.94	0.83	0.34	3.31	3.12	1.08
Perceived Health			**	*					*	*
Excellent	(213)	1.57	2.69	4.81	2.10	0.55	0.50	3.47	3.70	1.10
Good	(527)	1.47	2.65	5.07	1.90	0.55	0.37	3.20	3.83	0.99
Fair	(395)	1.63	2.35	4.82	2.05	0.45	0.40	3.23	3.49	0.83
Poor	(109)	1.62	1.82	6.25	2.05	0.60	0.36	3.63	3.87	0.78
Number of Unmet Needs		*	*						***	
None	(1144)	1.60	2.55	5.03	2.01	0.51	0.39	3.32	3.76	0.96
One	(197)	0.97	2.31	5.25	1.82	0.68	0.41	3.37	3.53	1.02
Two or more	(43)	1.15	1.50	5.85	1.29	0.55	0.31	3.30	2.76	0.55

| | Sources of Vitamins: Vitamin B[1] (Thiamin) Mean Number of Times Per Week Consumed | | | | Sources of Vitamins: Vitamin B (Niacin) Mean Number of Times Per Week Consumed | | | | | | |
Filter Variable[A]	(n)	Dried Beans, Peas or Lentils	Pork, Lamb, Veal	Oranges, Grapefruit	(n)	Beef, Hamburger	Pork, Lamb, Veal	Chicken, Turkey	Fish	Peanuts or Peanut Butter	Bread
Total Elderly	(1295)	0.68	0.95	5.78	(1295)	3.71	0.95	2.02	1.47	1.54	9.50
Household Composition				*							
Alone	(386)	0.59	0.92	5.85	(385)	3.69	0.92	2.07	1.40	1.35	9.62
With spouse only	(507)	0.69	0.90	5.90	(507)	3.69	0.90	2.01	1.55	1.71	9.32
With spouse & children only	(101)	0.76	1.06	4.71	(101)	4.05	1.06	1.98	1.34	1.78	9.31
With children only	(103)	0.78	1.04	5.94	(103)	3.71	1.04	1.93	1.27	1.21	9.78
Other combinations	(197)	0.75	1.02	5.79	(198)	3.60	1.02	2.01	1.58	1.52	9.62
Age						***			*	**	
65-69	(389)	0.60	1.00	5.73	(389)	3.94	1.00	2.01	1.58	1.86	9.17
70-74	(389)	0.67	1.01	5.66	(389)	3.82	1.01	1.89	1.33	1.50	9.51
75-79	(272)	0.79	0.83	5.86	(271)	3.51	0.83	2.12	1.60	1.44	9.85
80-84	(149)	0.72	0.81	5.94	(149)	3.51	0.81	1.98	1.51	1.39	9.51
85+	(93)	0.69	1.08	5.83	(93)	3.12	1.08	2.36	1.14	0.89	9.98
Perceived Health			*	*		*	*		*		
Excellent	(213)	0.61	1.10	6.21	(213)	3.70	1.10	1.87	1.63	1.68	9.32
Good	(529)	0.71	0.99	5.85	(529)	3.83	0.99	2.08	1.51	1.62	9.56
Fair	(396)	0.68	0.83	5.46	(395)	3.49	0.83	1.96	1.41	1.48	9.53
Poor	(111)	0.65	0.78	5.93	(110)	3.87	0.78	2.22	1.16	1.19	9.44
Number of Unmet Needs						***					*
None	(1146)	0.68	0.96	5.78	(1145)	3.76	0.96	1.99	1.49	1.59	9.53
One	(107)	0.74	1.02	5.59	(107)	3.53	1.02	2.27	1.28	1.13	9.75
Two or more	(43)	0.48	0.55	6.22	(43)	2.76	0.55	2.20	1.43	1.43	7.86

*Time 2 distribution significantly influenced by this filter variable at .05 level (F-test).

**Time 2 distribution significantly influenced by this filter variable at .01 level (F-test).

***Time 2 distribution significantly influenced by this filter variable at .001 level (F-test).

[A]Notice that the F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 40. Nutritional Intake Patterns at Time 2 for Various Subgroups of the Elderly (continued).

Filter Variable [A]	(n)	Beef, Hamburg	Pork, Lamb, Veal	Chicken or Turkey	Fish	Dried Beans, Peas, Lentils	Dried Fruit	Salads, Leafy Vegetables	Broccoli	Carrots	Tomatoes	Bread	Rice, Pasta
						Sources of Iron: Mean Number of Times Per Week Consumed							
Total Elderly	(1293)	3.71	0.95	2.02	1.47	0.68	1.03	3.52	0.90	2.60	2.96	9.50	1.29
Household Composition								**	*				***
Alone	(385)	3.69	0.92	2.07	1.40	0.59	1.17	3.11	0.71	2.49	2.72	9.63	1.16
With spouse only	(507)	3.69	0.90	2.01	1.55	0.69	1.04	3.62	0.94	2.53	2.98	9.32	1.18
With spouse & children only	(101)	4.05	1.06	1.98	1.34	0.76	0.96	3.69	1.04	2.76	3.12	9.31	1.82
With children only	(103)	3.71	1.04	1.93	1.27	0.78	0.86	3.64	0.85	2.73	2.89	9.78	1.60
Other combinations	(197)	3.60	1.02	2.01	1.58	0.75	0.88	3.91	1.09	2.84	3.30	9.63	1.39
Age		***			*			***					
65-69	(388)	3.94	1.00	2.01	1.58	0.60	0.93	3.97	0.99	2.65	3.12	9.17	1.27
70-74	(388)	3.82	1.01	1.89	1.33	0.67	0.96	3.40	0.92	2.63	2.92	9.51	1.23
75-79	(271)	3.51	0.83	2.12	1.60	0.79	1.13	3.46	0.76	2.60	2.95	9.85	1.26
80-84	(149)	3.51	0.81	1.98	1.51	0.72	1.34	3.29	0.95	2.41	2.80	9.51	1.45
85+	(93)	3.12	1.08	2.36	1.14	0.69	0.98	2.72	0.77	2.63	2.76	9.98	1.49
Perceived Health		*	*		*			***			*		*
Excellent	(212)	3.70	1.10	1.87	1.63	0.61	1.08	4.08	0.95	2.73	3.42	9.32	1.08
Good	(527)	3.83	0.99	2.08	1.51	0.71	0.94	3.65	0.99	2.58	2.86	9.56	1.30
Fair	(395)	3.49	0.83	1.96	1.41	0.68	1.04	3.28	0.76	2.43	2.81	9.57	1.21
Poor	(109)	3.87	0.78	2.22	1.16	0.65	1.36	2.86	0.84	2.94	2.72	9.44	1.65
Number of Unmet Needs		***						***			*	*	**
None	(1143)	3.76	0.96	1.99	1.49	0.68	1.05	3.65	0.90	2.61	3.00	9.53	1.27
One	(107)	3.53	1.02	2.27	1.28	0.74	0.98	2.63	1.02	2.79	2.83	9.75	1.69
Two or more	(43)	2.76	0.55	2.20	1.43	0.48	0.69	2.28	0.50	1.93	2.04	7.86	0.72

Sources of Calcium: Mean Number of Times Per Week Consumed

Filter Variable [A]	(n)	Whole Milk	Skim Milk	Cottage Cheese	Other Cheeses	Custard	Yogurt	Broccoli	Salads, Leafy Vegetables	Carrots	Dried Fruit	Oranges, Grapefruit	Eggs	Shellfish	Bread
Total Elderly	(1291)	5.08	1.98	1.53	2.50	0.53	0.39	0.90	3.52	2.60	1.03	5.78	3.32	0.31	9.50
Household Composition				**				*	**			*			
Alone	(387)	5.10	2.00	1.88	2.47	0.54	0.45	0.71	3.11	2.49	1.17	5.85	3.48	0.28	9.63
With spouse only	(505)	5.11	2.10	1.44	2.66	0.48	0.34	0.94	3.62	2.53	1.04	5.90	3.25	0.33	9.32
With spouse & children only	(101)	5.23	1.98	0.97	2.57	0.53	0.25	1.04	3.69	2.76	0.96	4.71	3.26	0.36	9.31
With children only	(103)	4.93	1.47	1.37	2.15	0.70	0.59	0.85	3.64	2.73	0.86	5.94	3.04	0.30	9.78
Other combinations	(197)	4.94	1.85	1.47	2.30	0.55	0.40	1.09	3.91	2.84	0.88	5.79	3.37	0.31	9.63
Ages		*	**		*	***			***				*		
65-69	(388)	4.43	2.55	1.61	2.81	0.35	0.42	0.99	3.97	2.65	0.93	5.73	3.16	0.38	9.17
70-74	(387)	5.22	1.76	1.57	2.42	0.55	0.41	0.92	3.40	2.63	0.96	5.66	3.35	0.31	9.51
75-79	(271)	5.30	1.86	1.52	2.44	0.58	0.39	0.76	3.46	2.60	1.13	5.86	3.48	0.23	9.85
80-84	(149)	5.47	1.65	1.35	2.35	0.64	0.25	0.95	3.29	2.41	1.34	5.94	3.36	0.28	9.51
85+	(93)	5.65	1.94	1.37	2.00	0.83	0.34	0.77	2.72	2.63	0.98	5.83	3.31	0.30	9.98
Perceived Health		*			**				***			*		**	
Excellent	(211)	4.81	2.10	1.57	2.69	0.55	0.50	0.95	4.08	2.73	1.08	6.21	3.47	0.31	9.32
Good	(527)	5.07	1.90	1.47	2.65	0.55	0.37	0.99	3.65	2.58	0.94	5.85	3.20	0.37	9.56
Fair	(395)	4.82	2.05	1.63	2.35	0.45	0.40	0.76	3.28	2.43	1.04	5.46	3.23	0.27	9.57
Poor	(109)	6.25	2.05	1.62	1.82	0.60	0.36	0.84	2.86	2.94	1.36	5.93	3.63	0.18	9.44
Number of Unmet Needs				*	*				***					**	*
None	(1142)	5.03	2.01	1.60	2.55	0.51	0.39	0.90	3.65	2.61	1.05	5.78	3.32	0.33	9.53
One	(107)	5.25	1.82	0.97	2.31	0.68	0.41	1.02	2.63	2.79	0.98	5.59	3.37	0.21	9.75
Two or more	(43)	5.85	1.29	1.15	1.50	0.55	0.31	0.50	2.28	1.93	0.69	6.22	3.30	0.08	7.86

* Time 2 distribution significantly influenced by this filter variable at .05 level (F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (F-test).

[A] Notice that the F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 40. Nutritional Intake Patterns at Time 2 for Various Subgroups of the Elderly (continued).

Filter Variable[A]	Sweets: Mean Number of Times Per Week Consumed							Starches: Mean Number of Times Per Week Consumed					
	(n)	Ice Cream	Ice Milk	Milk Pud-ding	Cus-tard	Cakes, Pies, Pastry, Cookies	Candy or Choco-late	(n)	Bread	Rice Pasta	Pota-toes	Bis-cuits Muf-fins	Ce-real
Total Elderly	(1294)	1.82	0.28	0.70	0.53	3.15	1.72	(1292)	9.50	1.29	4.15	1.69	4.10
Household Composition										***	***	***	
Alone	(386)	1.56	0.22	0.61	0.54	2.87	1.70	(384)	9.63	1.16	3.73	1.28	4.35
With spouse only	(508)	1.94	0.32	0.73	0.48	3.19	1.54	(507)	9.32	1.18	4.18	1.84	4.07
With spouse & children only	(101)	1.68	0.30	0.77	0.53	3.17	1.62	(101)	9.31	1.82	4.72	1.91	3.99
With children only	(103)	1.99	0.17	0.92	0.70	2.96	1.82	(103)	9.78	1.60	4.10	1.60	3.87
Other combinations	(197)	2.02	0.33	0.67	0.55	3.69	2.21	(197)	9.63	1.39	4.65	2.06	3.83
Age			*		***						*	*	***
65-69	(389)	1.68	0.37	0.59	0.35	2.94	1.59	(389)	9.17	1.27	3.90	1.58	3.67
70-74	(389)	1.78	0.16	0.72	0.55	3.29	1.72	(389)	9.51	1.23	4.20	1.50	3.96
75-79	(271)	2.03	0.37	0.71	0.58	3.10	1.60	(271)	9.85	1.26	4.19	1.91	4.45
80-84	(149)	1.86	0.28	0.75	0.64	3.31	1.89	(149)	9.51	1.45	4.66	1.85	4.79
85+	(93)	1.94	0.13	0.98	0.83	3.31	2.38	(93)	9.98	1.49	4.10	2.13	4.08
Perceived Health						*				*	*		
Excellent	(213)	1.95	0.29	0.75	0.55	3.31	1.92	(213)	9.32	1.08	3.94	1.71	3.94
Good	(529)	1.79	0.28	0.78	0.55	3.31	1.77	(528)	9.56	1.30	4.03	1.81	4.25
Fair	(395)	1.81	0.21	0.61	0.45	3.04	1.63	(395)	9.57	1.21	4.26	1.51	3.84
Poor	(110)	1.49	0.31	0.61	0.60	2.36	1.19	(110)	9.44	1.65	4.81	1.57	4.21
Number of Unmet Needs									*	**			
None	(1144)	1.81	0.27	0.70	0.51	3.19	1.74	(1142)	9.53	1.27	4.15	1.69	4.12
One	(107)	1.97	0.39	0.77	0.68	3.07	1.56	(107)	9.75	1.69	4.33	1.69	3.87
Two or more	(43)	1.71	0.16	0.59	0.55	2.44	1.52	(43)	7.86	0.72	3.72	1.74	4.08

Filter Variable[A]	Other Foods: Mean Number of Times Per Week Consumed							
	(n)	Hot Dogs, Salami, or Cold Cuts	Hash or Stew	TV Din-ners	Plain Broth Soup	Chunky or Noodle Soup	Macaroni and Cheese	Vita-min Pills
Total Elderly	(1293)	0.97	0.73	0.27	1.00	1.23	0.70	2.19
Household Composition				*		*		
Alone	(386)	0.90	0.68	0.37	0.93	1.11	0.67	2.34
With spouse only	(507)	1.10	0.75	0.23	0.94	1.25	0.68	2.12
With spouse & children only	(101)	0.89	0.64	0.20	0.87	1.13	0.67	1.95
With children only	(103)	0.72	0.82	0.18	1.13	1.70	0.69	2.43
Other combinations	(197)	0.96	0.77	0.26	1.30	1.20	0.81	2.10
Age		*	*		*			
65-69	(389)	1.13	0.69	0.26	0.92	1.13	0.60	2.20
70-74	(388)	0.98	0.72	0.24	0.95	1.22	0.67	1.96
75-79	(271)	0.74	0.67	0.32	0.95	1.15	0.79	2.25
80-84	(149)	0.98	0.94	0.32	1.33	1.48	0.76	2.67
85+	(93)	1.02	0.76	0.27	1.26	1.50	0.76	2.37
Perceived Health						***		*
Excellent	(213)	0.95	0.73	0.17	0.85	0.93	0.63	1.89
Good	(528)	1.03	0.77	0.30	1.04	1.13	0.65	1.99
Fair	(395)	0.96	0.69	0.32	0.99	1.33	0.75	2.55
Poor	(110)	0.81	0.70	0.21	1.27	1.65	0.87	2.73
Number of Unmet Needs								
None	(1144)	0.98	0.73	0.27	0.98	1.22	0.70	2.19
One	(107)	1.12	0.71	0.23	1.15	1.38	0.69	2.14
Two or more	(43)	0.56	0.67	0.39	1.26	1.08	0.55	2.34

* Time 2 distribution significantly influenced by this filter variable at .05 level (F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (F-test).

[A] Notice that the F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

3.18 Housing Factors. Table 41 presents data concerning various aspects of the housing situation of the elderly. A total of 73 percent of the elderly were very satisfied with their present living situation. Household composition, perceived health, and the number of unmet needs each significantly influenced the response distribution, with the least satisfied being those living alone, those reporting poor health, and those with two or more unmet needs. The respondents reporting just slightly lesser dissatisfaction with their living situation were those living with spouse and children, those reporting fair health, and those with one unmet need.

In response to another item, only 15 percent reported housing problems. Of those who did report problems with their housing, about half (51 percent) considered their problems serious. The most frequently mentioned housing problem (42 percent of the problems mentioned) was dissatisfaction with the housing unit itself. Housing unit problems included dissatisfaction with the number of rooms, the overall condition, the availability of particular features such as elevators.

Two percent of the total elderly reported being on a waiting list for a rest home, nursing home or other housing for the elderly (Table 41). Neither household composition nor age had a significant affect on the responses; however, none of those elderly respondents who are living with children reported being on a waiting list. Perceived health did have a significant affect, with those in fair health more often reporting being on a waiting list; quite unexpectedly, none of those reporting poor health were also on a waiting list. In addition, those respondents with an unmet need reported being on a waiting list significantly more often.

Of the three percent (N = 49) who had been on a waiting list at Time 1, eight had died, two were in nursing homes, and three were in hospitals requiring long term care at Time 2. These 13 represent nearly one percent of the Time 1 respondents, which means the stability of the data over time at the aggregate level is very high. It should be emphasized, though, that this stability is at the aggregate level. The issue of whether these are the same individuals has not been addressed at all. From the perspective of health care and social service planning, it is not important that the individuals remain the same, it is important that the percentage of the total remains substantially unchanged.

The percentage of elderly who reported living in public or subsidized housing was seven percent of the total sample. Only household composition significantly influenced these responses, with those respondents living alone reporting being in public or subsidized housing more frequently than the other household compositions. The seven percent is an increase from Time 1 of about two percent, which probably reflects placements during the 15 month interim.

Six percent (76 respondents) of the total elderly who were reinterviewed at Time 2 had moved in the last 15 months. In addition, 20 other people from the Time 1 sample were not reinterviewed because they had moved out of state. For these six percent reinterviewed, the reasons

mentioned for moving were varied. The most frequently reported reason for moving was expense (14 percent of the total number of reasons offered). Any physical or economic factor of the old or new housing accounted for 39 percent of the reasons mentioned for moving. In addition, the health of the respondent and/or spouse was the reported reason for moving for 22 percent of the mentioned reasons. Only eight percent of those who moved reported a change in their household composition (which includes the death of a spouse) as the reason for moving.

Table 41 also presents the number of years the respondents had lived at their present addresses. The number of years at Time 2 was determined by adding one year for everyone to the Time 1 response, except for those who had moved during the interim who were placed in the one year category at Time 2. A comparison of the percentages in comparable categories between Time 1 and Time 2 suggests that about a third of those who moved during the interim had been at their previous addresses for only a year, implying that they were still looking for an appropriate housing accomodation for themselves, while the other two thirds had been at their previous addresses for varied amounts of time.

Nearly two out of three of the total elderly (62 percent) reported living at their present addresses for 12 years or longer. Five percent reported being at that same address for over 51 years. These responses were significantly influenced by the household composition and age of the respondents. Expectedly, those living with spouse and children were more likely to have been at the present address longer, while those living with children were more likely to have been at the present address for a short time.

Table 41. Housing Factors for Various Subgroups of the Elderly.

Filter Variable[A]	Time 1 — Overall Satisfaction with Living Situation (n)	Very Satisfied	Fairly Satisfied	Not Very Satisfied	Time 1 Percent Reporting Housing Problems (n)	Percent Reporting Housing Problems	Time 2 — Overall Satisfaction with Living Situation (n)	Very Satisfied	Fairly Satisfied	Not Very Satisfied	Time 2 Percent Reporting Housing Problems (n)	Percent Reporting Housing Problems
Total Elderly	(1589)	71%	25%	4%	(1621)	15%	(1259)	73%	23%	4%	(1260)	15%
Household Composition												
Alone	(447)	65	27	8	(453)	19	(384)	68	26	6	(384)	17
With spouse only	(654)	75	23	2	(664)	13	(490)	78	19	3	(491)	15
With spouse & children only	(123)	65	34	1	(125)	17	(95)	67	32	1	(95)	12
With children only	(103)	77	18	5	(110)	17	(98)	72	22	5	(97)	11
Other combinations	(262)	72	27	1	(269)	15	(192)	75	21	5	(193)	16
Age												
65–69	(573)	70	28	2	(579)	16	(381)	73	23	5	(382)	18
70–74	(426)	73	22	5	(443)	17	(381)	74	22	5	(379)	14
75–79	(303)	72	24	4	(308)	14	(261)	72	23	5	(262)	16
80–84	(187)	66	27	7	(188)	15	(144)	75	22	3	(143)	13
85+	(93)	74	26	0	(96)	8	(87)	74	23	3	(89)	11
Perceived Health												
Excellent	(294)	85	14	1	(296)	13	(215)	82	15	3	(215)	15
Good	(673)	74	24	2	(685)	12	(532)	79	18	3	(533)	14
Fair	(420)	65	31	4	(429)	17	(399)	64	30	5	(398)	17
Poor	(184)	55	30	15	(188)	23	(108)	58	32	9	(108)	16
Number of Unmet Needs												
None							(1117)	76	21	3	(1118)	14
One							(98)	57	31	12	(98)	23
Two or more							(44)	32	39	29	(44)	39

Note: Household Composition marked * ; Perceived Health marked *** ; Number of Unmet Needs marked *** (Time 2 satisfaction) and *** (Percent Reporting Housing Problems).

Filter Variable[A]	Time 1 (n)	Mean Number of Rooms	Percent on Waiting List For Rest Home, Nursing Home, Housing for Elderly	Percent in Public or Subsidized Housing	Percent Who Moved in Last 15 Months	Time 2 (n)	Mean Number of Rooms	Percent on Waiting List For Rest Home, Nursing Home, Housing For Elderly	Percent in Public or Subsidized Housing	Percent Who Moved in Last 15 Months
Total Elderly	(1647)	5.6	3%	5%		(1308)		2%	7%	6%
Household Composition								***		
Alone	(458)	4.6	7	11		(393)		4	13	7
With spouse only	(673)	5.6	2	5		(507)		2	7	5
With spouse & children only	(125)	6.6	1	1		(101)		0	0	2
With children only	(115)	5.8	2	1		(106)		0	2	7
Other combinations	(275)	6.5	2	0		(201)		2	0	7
Age							SIMILAR			
65–69	(585)	5.4	5	5	NOT	(389)		3	7	6
70–74	(443)	5.7	3	5		(391)	DISTRI-	1	7	7
75–79	(315)	5.6	2	7	ASKED	(273)		3	7	4
80–84	(195)	5.6	3	5		(151)	BUTION	2	7	6
85+	(101)	5.6	3	4		(99)		1	7	7
Perceived Health							ASSUMED	*		
Excellent	(295)	5.9	1	4		(215)		1	3	5
Good	(689)	5.6	3	5		(531)		2	7	5
Fair	(429)	5.3	4	6		(397)		4	9	7
Poor	(188)	5.2	5	6		(112)		0	5	4
Number of Unmet Needs								*		
None						(1150)		2	6	6
One						(113)		5	11	5
Two or more						(45)		4	11	13

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A]Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 41. Housing Factors for Various Subgroups of the Elderly (continued).

Filter Variable	(n)	One	Two	Three	Four	Five	6-10	11-15	16-20	21-30	31-40	41-50	51 Or More
					Time 1		Number	of Years	at Present	Address			
Total Elderly	(1677)	8%	3%	5%	3%	4%	13%	10%	11%	16%	13%	9%	5%
Household Composition													
Alone	(461)	12	3	6	3	4	13	9	11	11	13	9	6
With spouse only	(681)	5	3	2	2	3	13	12	13	19	16	8	4
With spouse & children only	(127)	1	3	6	6	3	15	8	10	26	13	7	2
With children only	(119)	7	3	1	5	3	18	7	6	12	16	18	4
Other combinations	(283)	8	6	8	3	5	11	10	10	13	6	12	8
Age													
65-69	(592)	11	3	5	3	4	15	13	11	18	11	4	2
70-74	(448)	5	3	4	4	5	13	9	12	16	16	8	5
75-79	(320)	7	5	3	2	2	12	8	9	14	14	16	8
80-84	(199)	4	4	6	5	3	9	8	8	16	12	14	11
85+	(105)	6	1	7	2	3	13	9	13	9	16	16	5
Perceived Health													
Excellent	(293)	6	1	6	1	4	14	10	12	17	16	7	6
Good	(683)	7	4	4	3	3	13	9	9	17	15	9	6
Fair	(429)	10	2	3	4	3	12	11	14	14	11	11	5
Poor	(187)	3	6	4	6	5	12	12	12	14	11	10	4
Number of Unmet Needs													
None													
One													
Two													

Filter Variable	(n)	One	Two	Three	Four	Five	Six	7-11	12-16	17-21	22-31	32-41	42-51	52 or More
					Time 2		Number	of Years	at Present	Address[A]				
Total Elderly	(1310)	6%	5%	3%	4%	3%	3%	13%	9%	10%	15%	13%	10%	5%
Houshold Composition***														
Alone	(393)	7	7	3	5	2	3	12	9	12	10	13	10	7
With spouse only	(510)	4	5	3	3	3	3	14	10	10	18	15	8	4
With spouse & children only	(101)	2	0	7	6	6	3	14	7	10	26	12	7	0
With children only	(106)	7	4	5	1	5	5	22	6	6	7	13	15	4
Other combinations	(200)	7	7	2	5	3	5	11	12	7	14	7	12	9
Age***														
65-69	(389)	6	9	3	4	3	3	16	13	10	15	12	3	3
70-74	(392)	7	4	3	3	3	5	14	8	10	16	13	9	5
75-79	(273)	4	3	5	3	3	2	13	8	9	13	14	16	6
80-84	(151)	6	3	1	5	2	3	10	7	8	14	14	17	10
85+	(99)	7	5	0	7	4	4	9	8	13	10	13	12	7
Perceived Health														
Excellent	(213)	5	4	2	6	2	4	14	8	11	15	14	7	8
Good	(532)	5	7	3	4	2	3	13	10	9	17	13	9	5
Fair	(396)	7	5	3	3	3	4	15	10	10	12	12	11	5
Poor	(113)	4	4	2	7	6	4	10	7	13	13	13	14	3
Number of Unmet Needs														
None	(1150)	6	6	3	4	3	4	13	9	10	15	13	9	5
One	(112)	5	4	6	4	4	0	13	11	13	13	9	13	5
Two or more	(44)	14	2	2	0	2	7	9	9	7	14	14	14	7

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] The responses to this question were obtained in the Time 1 interview.

3.19 Income and Expenditures. The data concerning the personal
economics of the elderly respondents are presented in Tables 42 and 43.
In Table 42 the reported 1975 gross income for the respondent (and spouse
if there was a spouse) is presented first. The median reported annual
income for the total elderly was $4500. Thirteen percent reported incomes
over $10,000; 66 percent reported incomes under $6000. The income of the
respondent (and spouse) was significantly influenced by all four of the
subgroup variables. Those respondents living with spouse or with spouse
and children reported significantly higher incomes. Also income decreased
at a significant rate and in a linear fashion as a function of increasing
age. Perceived health was significantly associated with the income levels,
with those who reported excellent health indicating much higher median
incomes and those who reported poor health reporting much lower incomes.
In addition, the respondents with an unmet need were significantly more
likely to report lower level of incomes.

    Table 42 also presents the self-reported sources of income for the
respondents. A total of 96 percent of the elderly reported social
security benefits, a private retirement plan, or veteran's compensation
or pension as a source of income, but interestingly enough this distri-
bution was significantly influenced by each of the four subgroup analysis
variables. There were two to three percent less than the total elderly
receiving these benefits from the following subgroups: those living in
other household composition combinations, the youngest and the oldest
age groups, and those with two or more unmet needs. As often is the case
with such correlational data, it is interesting to speculate on the causes
of the demonstrated relationships. Perhaps the unavailability of social
security, private retirement plans, or veteran's benefits forces a small
percentage of the elderly to live in the other household composition
combinations such as with relatives and so forth. Perhaps the unavail-
ability of these sources of incomes causes some of the elderly to have
two or more unmet needs, a state which we have seen is consistently
associated with the negative side of nearly every dimension.

    Only 13 percent of the total elderly reported having Old Age
Assistance or Supplemental Security Income (SSI). Those respondents living
with a spouse were significantly less likely to report this source of income.
The age of the respondent and the presence of an unmet need were also fac-
tors which significantly increased the likelihood of the respondent report-
ing SSI in a linear fashion. Also, a significantly greater percentage of
those who reported poor health identified SSI as a source of income.

    The percentage of elderly who reported having financial assistance
from children or relatives not in their household was five percent. One
curious finding is that a significantly greater percentage (22 percent)
of those living with children reported receiving financial assistance
from children not in their household. This fourfold increase in the
rate in which children not in the household contribute income for those
living with other children suggests two explanations. One is that
indeed other children do lend monetary support when one child provides
the informal support required for aging parents. . The other is that
this percentage is inflated due to some miscommunication between the

interviewer and respondent that this support was from children <u>outside</u> the household, though there is no indication that this interpretation is justified at all.

A total of 15 percent reported income from rents and 60 percent reported income from interest in stocks, bonds or savings. Age had a significant influence on income from interest in that the older age groups had a lower percentage reporting income from interest. In addition, fair or poor self-perceived health and an unmet need significantly decreased the likelihood of the respondent reporting income from interest.

Table 43 specifies the types of expenditures that the elderly reported making on a regular basis.* The median weekly grocery bill for the elderly was $25.00. Six percent of the total elderly had no grocery costs due to the type of household situation in which they lived. As would be expected, a greater number of those without grocery costs were living with children or in other household combinations. Household composition had a significant influence on the weekly amount spent for groceries. The median cost ranged from a low figure of $18.00 for those living alone to the high figure of $40.00 for those living with spouse and children. Also, the older age groups spent significantly less for the average weekly grocery bill. Neither perceived health nor the number of unmet needs had a significant affect on the amount spent for groceries. There was some increase between Time 1 and Time 2 as expected due to rising food costs.

The median monthly housing bill for the total elderly was $150.00. The housing bill was meant to include utilities, rents, mortgage payments, taxes (whichever were applicable to the living situation) and to exclude telephone costs. Five percent of the elderly respondents had no monthly housing costs. Once again, a greater percentage of those without housing costs were those respondents living with children only, in other household combinations, or with spouse and children. Household composition had a significant influence on the reported housing bills. The median monthly cost ranged from $105.50 for those living with children to $190.00 for those living with spouse and children. Again, there was a modest increase from Time 1 to Time 2.

Knowing that the median reported grocery costs for the elderly were $25.00 and the median reported housing costs were $150.00 is useful in some planning situations, but knowing what proportions of total income these regular expenditures amount to is more useful for some other purposes. Table 43 also presents information on several regular yearly expenditures (grocery; housing; medical; combined grocery and housing; and combined medical, grocery, and housing) as a percentage of the total annual income of the respondent (and spouse if present) and as a percentage of the total annual income of the related individuals in a household. This analysis required conversion of the basic economic information reported by the elderly respondents. The weekly grocery bill, the monthly housing bill and the monthly medical cost were converted to yearly expenses in order to discover what percentage of the respondent's (and spouse) annual income that these necessary costs were. Thus, the mean percent of income for each of these three expenditures (as well as the combinations of them) can be presented in four formats.

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*Some of the Time 1 information was not obtained in a manner which

For the total elderly, grocery costs represented 32 percent of the income of respondent (and spouse). The mean grocery cost for all the elderly respondents was $1362.68 yearly. Household composition had a significant affect on the mean percentages. Those living with spouse or with spouse and children had a significantly greater percentage of income spent on groceries. In addition, those in the older age groups and those who reported their health as poor were significantly more likely to have a lower percentage of income spent on grocery expenses. Overall though, the range of percent of income spent for groceries was from a low of 23 percent (age 85 or more; excellent health) to a high of 36 percent (poor health), excluding the one subgroup which was very discrepant (those living with spouse and children was 47 percent).

Housing costs for the total elderly represented 44 percent of the income of respondent (and spouse) on the average. The mean housing expenditure for the total elderly was $1925.29 a year. The percentage of respondents (and spouse) income devoted to housing costs was remark- ably constant across the subgroups, from a low of 34 percent (living with children only) to a high of 53 percent (living with spouse and children only).

The mean percentage of income spent for medical costs for the elderly respondents was only three percent. The mean medical expenditure for the total elderly was $124.00 yearly. Those people living with children had a significantly greater percentage of their income spent on medical costs. Increasing age was also significantly associated with increasing percentage of medical costs. As might be expected those respondents who reported fair or poor health or who had an unmet need were more likely to report a higher percentage of income spent on medicines and medical equipment.

On the average 76 percent of the respondent's (and spouse) income was spent for combined grocery and housing costs. The mean combined grocery and housing costs was $3287.97 yearly for the total elderly. Household composition had a significant affect on the percent of income for the combined grocery and housing costs. Those living with spouse and children reported spending virtually all of their income for room and board, though perhaps the children contribute to the household economics which the elderly respondents did not mention in this context. Excluding this group, the range of reported percentage expenditures for room and board was from 58 percent (living with children only) to 85 percent (aged 70 through 74).

The percentage of respondent's (and spouse) income that was spent on medical costs, grocery and housing was 79 percent. The mean combined medical, grocery and housing costs for the total elderly was $3411.97 yearly. Once again, those living with spouse and children reported spending virtually all their income on grocery, housing and medical needs.

The second format for the presentation of these data depicts the mean percentage for each of the expenditures by the income of the entire related household (assuming that a related household functions as

an economic unit). One problem peculiar to this section is the considerable amount of missing data. Questions pertaining to economic information often result in missing data (because of the respondent not knowing the information and because of the personal nature of finances). This section is combining three pieces of economic information (the amount spent, the income of respondent and the income of the other household members) and a respondent declining to answer any one of the items was excluded from the whole analysis. Consequently this analysis contained a greater amount of missing data; a total of 376 respondents were excluded from this section.

For the total elderly, grocery costs represented 29 percent of the income for the entire related household. Those respondents living with children had a significantly lower percentage of the entire income spent on groceries, about a third as much as the other households, presumably because the children's income greatly increased the denominator. The same mean expenditures on groceries for the elderly respondents living with children represented a threefold increase in the percentage of the respondents' income compared to the percentage of the entire household income.

The mean housing percentage for the total elderly was 42 percent of the income for the entire household. Once again, the respondents living with children reported a significantly lower percentage, only about a third to a fourth as much as other household combinations.

Medical costs still represented only three percent of the income for the entire related household. The following groups reported significantly lower percentages: those living with spouse or spouse and children only, those who rated their health as excellent or good, and those with no unmet needs.

The mean combined housing and grocery cost percentages was 71 percent and the mean combined medical, grocery and housing cost percentage was 73 percent of the income of the entire related household. Again the percentage of income for those living with children was significantly lower than for the other possible household compositions.

The third and fourth formats for the presentation of these data utilize a new subgrouping analytic variable which formulated categories by combining the annual income of the entire related household with the number of people in the household. First the number of people category was defined and then within those categories three levels of income were used. The lowest level of income approximates the established poverty line level for that specific number of people. The medium level of income is between the approximate level of poverty and $10,000. The highest level of income is $10,000 or more. The distribution of each of the mean expenditures as a percent of both the income of the respondent (and spouse) and the income of the entire related household was significantly influenced by this combined number of people and income variable. The number of cases in many of the cells is too small to accomplish more than general hypotheses to be tested on another data set.

Table 42. Amounts and Sources of Income for Various Subgroups of the Elderly.

Filter Variable	(n)	Under 1000	1000-1999	2000-2999	3000-3999	4000-4999	5000-5999	6000-6999	7000-7999	8000-8999	9000-9999	10000-14999	15000-19999	20000-24999	25000 Plus	Median
							Time 1 Gross Income of Respondent (and Spouse) Only									
Total Elderly	(1489)	1%	6%	18%	19%	13%	10%	7%	5%	4%	3%	8%	2%	1%	3%	4500
Household Composition																
Alone	(409)	1	8	25	28	11	7	5	3	1	2	6	1	1	1	3500
With spouse only	(604)	½	1	7	13	17	14	10	7	6	4	12	3	2	4	5500
With spouse & children	(112)	1	4	13	12	21	16	9	4	3	3	9	4	0	1	4500
With children only	(112)	3	16	35	32	6	8	2	3	1	0	2	0	0	2	2500
Other combinations	(252)	4	12	30	20	8	8	5	5	2	1	4	1	0	0	3500
Age																
65-69	(539)	1	5	14	12	13	11	9	6	5	3	12	5	1	3	5500
70-74	(397)	1	4	19	20	13	13	7	5	4	4	5	1	2	2	4500
75-79	(280)	1	4	18	24	15	10	9	4	2	3	7	1	1	1	4500
80-84	(175)	1	13	28	26	14	6	2	3	1	0	3	0	1	2	3500
85+	(92)	2	14	26	27	9	7	1	3	1	0	7	0	0	3	3500
Perceived Health																
Excellent	(250)	0	5	9	14	7	11	8	6	4	2	15	5	4	10	6500
Good	(614)	2	5	19	17	14	9	8	6	5	3	8	2	1	1	4500
Fair	(384)	1	7	21	23	13	11	7	4	3	3	5	1	½	1	3500
Poor	(171)	2	8	25	24	16	12	3	2	1	2	3	1	0	1	3500
Number of Unmet Needs																
None																
One																
Two or more																

Filter Variable	(n)	Under 1000	1000-1999	2000-2999	3000-3999	4000-4999	5000-5999	6000-6999	7000-7999	8000-8999	9000-9999	10000-14999	15000-19999	20000-24999	25000 Plus	Median
							Time 2 Gross Income of Respondent (and Spouse) Only									
Total Elderly	(1139)	1%	3%	14%	20%	16%	12%	8%	6%	4%	3%	8%	2%	1%	2%	4500
Household Composition***																
Alone	(343)	½	4	19	31	16	7	6	3	3	3	6	2	0	½	3500
With spouse only	(440)	0	1	1	10	17	18	12	9	6	6	11	3	2	4	6500
With spouse & children	(86)	5	0	5	13	21	17	12	6	5	2	10	2	1	1	5500
With children only	(91)	1	7	36	28	15	7	1	1	1	0	2	0	0	1	3500
Other combinations	(179)	2	6	33	22	11	6	3	4	4	2	5	1	1	0	3500
Age***																
65-69	(343)	1	1	7	14	15	13	10	7	7	5	12	5	1	2	5500
70-74	(333)	1	2	13	21	12	14	9	8	5	3	7	2	1	2	5500
75-79	(245)	1	3	15	23	21	11	7	4	4	2	7	1	1	½	4500
80-84	(133)	1	6	22	24	22	8	7	1	2	2	2	1	1	1	3500
85+	(80)	1	6	38	26	13	4	0	1	1	3	5	0	1	1	3500
Perceived Health***																
Excellent	(177)	1	1	9	14	12	10	10	5	6	6	12	7	3	4	6500
Good	(475)	½	2	12	20	16	12	9	8	4	3	9	2	1	2	4500
Fair	(355)	½	5	17	23	18	11	8	3	5	3	6	1	0	½	4500
Poor	(93)	2	1	26	24	16	14	6	3	1	4	2	1	0	0	3500
Number of Unmet Needs***																
None	(1005)	1	3	12	20	16	12	9	6	5	3	8	2	1	2	4500
One	(90)	0	7	29	21	13	12	5	3	1	5	3	1	0	0	3500
Two or more	(44)	0	0	43	27	11	7	2	2	5	0	0	2	0	0	3500

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this fitler variable at .001 level (chi square).

Table 42. Amounts and Sources of Income for Various Subgroups of the Elderly (continued).

Filter Variable	(n)	Time 1 Sources of Income						
		Social Security[A]	Veterans Compensation or Pension[A]	Private Retirement Pension[A]	Old Age Assistance or Supplemental Security Income	Children Or Relatives Not in Household	Rents	Interest From Stocks Bonds or Savings
Total Elderly	(1669)	90%	11%	35%	12%	6%	14%	54%
Household Composition								
Alone	(462)	89	12	27	18	6	15	51
With spouse only	(680)	92	11	43	7	1	15	62
With spouse & children only	(126)	94	3	38	11	7	8	54
With children only	(119)	91	11	26	14	22	14	30
Other combinations	(282)	86	11	30	13	9	13	52
Age								
65-69	(590)	87	7	39	7	4	14	58
70-74	(446)	88	10	40	13	6	18	52
75-79	(318)	95	16	34	11	5	13	56
80-84	(199)	95	16	23	17	11	11	48
85+	(106)	93	8	20	22	12	12	50
Perceived Health								
Excellent	(294)	88	7	46	3	5	17	77
Good	(683)	90	10	37	9	5	16	56
Fair	(425)	91	13	31	19	5	12	45
Poor	(185)	93	11	19	21	11	8	37
Number of Unmet Needs								
None								
One								
Two or more								

Filter Variable[B]	(n)	Time 2 Sources of Income				
		Social Security, Retirement Pensions, Or Veterans Benefits[A]	Old Age Assistance or Supplemental Security Income	Children Or Relatives Not in Household	Rents	Interest From Stocks Bonds or Savings
Total Elderly	(1302)	96%	13%	5%	15%	60%
Household Composition		*	***	***		
Alone	(389)	97	17	5	15	60
With spouse only	(509)	97	7	2	13	71
With spouse & children only	(100)	95	13	5	19	54
With children only	(104)	95	21	22	19	33
Other combinations	(200)	92	16	7	13	53
Age		*	**			*
65-69	(387)	94	10	3	13	63
70-74	(391)	96	13	7	17	64
75-79	(273)	99	13	5	13	58
80-84	(149)	98	18	7	15	53
85+	(97)	95	23	7	9	51
Perceived Health		***	***			***
Excellent	(213)	95	5	4	16	77
Good	(529)	96	10	5	14	65
Fair	(396)	96	18	4	14	53
Poor	(110)	97	22	10	14	40
Number of Unmet Needs			***			***
None	(1146)	96	11	5	15	63
One	(111)	96	25	7	15	42
Two or more	(45)	91	39	7	9	27

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] At Time 2 the categories of "Social Security," "Veterans Compensation or Pension" and "Private Retirement Pension" were combined into one item.

[B] Notice that the chi-square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 43. Expenditures for Various Subgroups of the Elderly.

Filter Variable	(n)	None	$1–10	$11–15	$16–20	$21–25	$26–30	$31–35	$36–40	$41–50	$51–60	$61 Plus	Median Of Those Who Had Grocery Costs
						Time 1 Average Weekly Grocery Bill for Respondent (and Spouse)							
Total Elderly	(1517)	3%	6%	14%	15%	17%	14%	8%	10%	9%	2%	2%	$22.50
Household Composition													
Alone	(431)	1	13	29	26	16	9	2	2	2	0	½	17.50
With spouse only	(644)	0	1	5	9	20	21	13	15	11	3	2	27.50
With spouse & children only													
With children only													
Other combinations													
Age													
65–69	(545)	1	3	9	12	19	17	10	12	11	3	3	27.50
70–74	(410)	4	4	16	14	14	15	10	11	8	3	1	22.50
75–79	(299)	2	6	18	19	18	15	5	7	7	2	1	22.50
80–84	(176)	5	14	16	20	12	9	3	7	9	2	3	17.50
85+	(82)	10	11	23	14	16	10	2	7	5	1	1	17.50
Perceived Health													
Excellent	(263)	½	5	14	15	16	13	7	9	12	5	4	22.50
Good	(630)	3	6	15	15	17	14	10	10	7	2	1	22.50
Fair	(392)	4	5	13	16	17	17	7	10	8	1	2	22.50
Poor	(163)	2	6	15	17	14	13	7	11	11	3	1	22.50
Number of Unmet Needs													
None													
One													
Two or more													

Filter Variable	(n)	None	$1–10	$11–15	$16–20	$21–25	$26–30	$31–35	$36–40	$41–50	$51–60	$61 Plus	Median Of Those Who Had Grocery Costs
						Time 2 Average Weekly Grocery Bill for Respondent (and Spouse)							
Total Elderly	(1183)	6%	6%	13%	16%	14%	15%	8	10%	7%	3%	2%	$25.00
Household Composition***													
Alone	(361)	0	12	31	30	13	8	4	1	1	½	½	18.00
With spouse only	(490)	0	½	2	9	19	25	13	18	11	2	1	30.00
With spouse & children only	(83)	5	5	2	1	7	16	8	22	12	11	11	40.00
With children only	(84)	37	5	12	8	13	12	2	4	5	0	2	25.00
Other combinations	(165)	21	13	16	18	7	3	6	5	5	4	2	20.00
Age*													
65–69	(358)	4	3	9	13	13	18	10	.15	9	4	2	30.00
70–74	(358)	5	5	15	14	14	15	10	9	8	3	2	25.00
75–79	(247)	4	6	14	21	16	15	6	10	6	2	½	25.00
80–84	(135)	10	11	16	20	19	10	4	4	3	1	2	20.00
85+	(79)	19	17	20	15	8	11	0	5	3	1	1	20.00
Perceived Health													
Excellent	(194)	5	6	16	13	13	17	8	9	7	4	2	25.00
Good	(477)	5	5	14	17	15	15	9	11	5	3	1	25.00
Fair	(374)	5	6	14	18	13	13	8	10	10	2	1	25.00
Poor	(97)	8	9	8	14	17	18	7	5	6	4	4	25.00
Number of Unmet Needs													
None	(1044)	5	6	13	16	15	15	8	11	7	3	1	25.00
One	(100)	13	4	22	17	8	16	4	7	5	2	2	22.50
Two or more	(39)	5	13	21	21	15	10	3	10	3	0	0	20.00

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 43. Expenditures for Various Subgroups of the Elderly (continued).

Filter Variable	(n)	None	$1-50	$51-75	$76-100	$101-125	$126-150	$151-175	$176-200	$201-250	$251-300	$301-400	$401-500	$501 Plus	Median of Those Who Had Housing Cost
					Time 1 Average Monthly Housing Bill For Respondent (and Spouse)										
Total Elderly	(1429)	4%	5%	7%	14%	12%	15%	10%	12%	9%	6%	3%	2%	1% ·	$137.50
Household Composition															
Alone	(407)	3	8	11	13	14	18	9	11	7	3	2	½	1	137.50
With spouse only	(594)	0	2	5	13	12	15	13	13	10	8	3	4	2	162.50
With spouse & children															
With children only															
Other combinations															
Age															
65-69	(522)	3	3	4	11	13	16	9	15	12	7	4	3	2	162.50
70-74	(380)	3	5	7	14	13	18	9	11	7	7	3	2	1	137.50
75-79	(267)	5	8	9	15	10	15	11	10	9	5	2	2	½	137.50
80-84	(170)	9	11	8	19	10	7	12	14	4	5	2	0	1	112.50
85+	(85)	8	6	8	15	15	11	12	8	7	6	1	1	1	112.50
Perceived Health															
Excellent	(243)	1	4	5	12	9	14	12	14	7	9	4	5	4	162.50
Good	(582)	5	6	6	13	13	14	10	12	8	6	4	2	1	137.50
Fair	(372)	4	4	8	15	14	17	·7	12	11	6	2	½	0	137.50
Poor	(168)	6	7	10	16	8	11	11	11	10	7	2	0	1	137.50
Number of Unmet Needs															
None															
One															
Two or more															
					Time 2 Average Monthly Housing Bill for Respondent (and Spouse)										
Total Elderly	(1110)	5%	6%	8%	11%	11%	15%	9%	10%	11%	8%	4%	2%	1%	$150.00
Household Composition**															
Alone	(338)	½	6	15	11	12	20	9	9	11	4	2	1	0	138.00
With spouse only	(461)	1	1	4	10	13	13	11	12	14	11	6	3	1	170.00
With spouse & children	(74)	15	9	3	4	9	11	5	3	9	18	7	4	3	190.00
With children only	(77)	25	10	10	16	8	8	4	6	6	3	4	0	0	105.50
Other combinations	(160)	19	14	8	16	6	13	5	9	5	4	1	0	0	117.50
Age															
65-69	(343)	5	2	5	8	11	16	9	12	14	10	5	2	1	165.00
70-74	(329)	4	5	6	13	12	18	8	9	9	8	4	3	1	150.00
75-79	(230)	6	9	12	11	8	15	11	7	10	7	4	½	0	145.00
80-84	(122)	7	6	15	16	13	11	7	8	8	6	1	2	0	125.00
85+	(80)	14	13	10	12	14	6	5	6	11	4	4	1	0	125.00
Perceived Health															
Excellent	(177)	4	5	4	9	9	10	7	12	19	10	7	3	1	180.00
Good	(453)	4	4	8	11	13	17	10	10	10	8	4	1	½	150.00
Fair	(351)	6	6	10	13	11	16	8	9	10	7	3	½	1	140.00
Poor	(91)	8	7	8	12	13	10	7	10	14	5	3	3	0	146.50
Number of Unmet Needs															
None	(979)	5	5	8	11	11	15	9	10	11	8	4	2	1	150.00
One	(93)	1½	6	15	6	12	12	8	8	6	10	3	2	1	133.00
Two or more	(38)	8	15	11	15	11	13	5	8	11	0	3	0	0	125.00

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 43. Expenditures for Various Subgroups of the Elderly (continued).

Filter Variable[A]	(n)	Time 2 Expenditures for Respondent (and Spouse) As Percent of Income for Respondent (and Spouse) Only					(n)	Time 2 Expenditures for Respondent (and Spouse) As Percent of Income for Entire Household				
		Grocery	Housing	Medical	Grocery & Housing Combined	Medical, Grocery & Housing Combined		Grocery	Housing	Medical	Grocery & Housing Combined	Medical, Grocery & Housing Combined
Total Elderly	(1035)	32%	44%	3%	76%	79%	(941)	29%	42%	3%	71%	73%
Household Composition		***		***	***	***		***	***	**	***	***
Alone	(314)	28	46	3	73	76	(313)	28	46	3	73	76
With spouse only	(422)	34	46	3	80	83	(421)	34	46	3	80	83
With spouse & children only	(72)	47	53	4	95+	95+	(50)	22	36	1	59	60
With children only	(74)	27	34	5	58	62	(43)	9	12	1	21	23
Other combinations	(153)	29	39	4	68	72	(115)	22	29	2	52	55
Age		*		*								
65-69	(320)	32	45	3	75	78	(300)	29	42	3	70	72
70-74	(302)	31	49	3	85	88	(273)	32	48	3	80	83
75-79	(223)	35	40	4	74	78	(203)	30	38	3	68	71
80-84	(119)	28	41	4	69	73	(102)	24	34	3	59	62
85+	(69)	23	40	4	64	67	(59)	23	38	2	63	65
Perceived Health		***		***				**		***		
Excellent	(161)	23	42	1	66	67	(148)	22	39	1	61	62
Good	(427)	32	47	3	79	82	(395)	29	45	2	75	77
Fair	(332)	34	41	4	75	79	(299)	32	40	3	71	74
Poor	(81)	36	46	7	82	89	(70)	32	41	5	74	79
Number of Unmet Needs				***						*		
None	(913)	32	44	3	76	79	(831)	29	41	3	70	73
One	(80)	32	48	5	79	85	(73)	30	47	4	76	80
Two or more	(38)	31	37	4	70	73	(35)	33	39	4	74	78

Filter Variable[A]	(n)	Time 2 Expenditures for Respondent (and Spouse) As Percent of Income for Respondent (and Spouse) Only					(n)	Time 2 Expenditures for Respondent (and Spouse) As Percent of Income for Entire Household				
		Grocery	Housing	Medical	Grocery & Housing Combined	Medical, Grocery & Housing Combined		Grocery	Housing	Medical	Grocery & Housing Combined	Medical, Grocery & Housing Combined
Total Elderly	(1028)	32%	45%	3%	77%	80%	(940)	29%	42%	3%	71%	74%
Income by Number of People in Household		***	***	***	***	***		***	***	***	***	***
Alone												
Less than $3,000[B]	(74)	43	61	4	95+	95+	(74)	43	61	4	95+	95+
$3,000-$9,999	(216)[C]	25	43	3	69	72	(215)	25	43	3	69	72
$10,000+	(24)[C]	8	18	1	25	26	(24)	8	18	1	25	26
Respondent and Spouse												
Less than $4,000[B]	(48)	45	53.	5	95+	95+	(47)	45	53	5	95+	95+
$4,000-$9,999	(288)	39	53	3	92	95+	(288)	39	53	3	92	95+
$10,000+	(86)	12	18	1	30	31	(85)	12	18	1	30	31
Other 2 Person Household												
Less than $4,000[B]	(66)	30	37	5	66	71	(16)[C]	41	42	4	84	88
$4,000-$9,999	(41)	24	33	3	58	61	(39)[C]	25	31	2	58	60
$10,000+	(0)	-	-	-	-	-	(29)[C]	5	10	1	15	16
3 Person Household												
Less than $5,000[B]	(60)[C]	35	40	5	74	78	(10)[C]	42	54	6	95+	95+
$5,000-$9,999	(31)[C]	43	50	3	92	95+	(20)[C]	39	72	2	95+	95+
$10,000+	(12)[C]	17	21	1	39	39	(43)	10	8	1	19	20
4 or More Person Household												
Less than $6,000[B]	(69)[C]	35	46	7	85	91	(12)[C]	26	60	2	86	88
$6,000-$9,999	(9)[C]	70	90	4	95+	95+	(12)[C]	11	12	2	21	23
$10,000+	(4)[C]	23	29	1	53	53	(26)[C]	6	7	1	12	13

*
**Time 2 distribution significantly influenced by this filter variable at .05 level (F-test).
***Time 2 distribution significantly influenced by this filter variable at .01 level (F-test).
Time 2 distribution significantly influenced by this filter variable at .001 level (F-test).

[A]Notice that the F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

[B]Income level approximates established poverty levels at the time the data were collected.

[C]The number of cases is too small to provide reliable percentage estimates.

3.20 Background Characteristics. Table 44 presents a considerable amount of descriptive information about these elderly respondents.

The Time 2 respondents (age 66 or more) were 63 percent female and 37 percent male. The 1970 Census[12] found 58 percent female and 42 percent male for those aged 65 or older in the nation, and 61 percent female and 39 percent male aged 65 or more in Massachusetts. These percentages are all reasonably close.

A significantly greater number of the Time 2 males were found in the household compositions of living with spouse and living with spouse and children. In addition, females significantly more often had one or more unmet needs.

The mean age of the elderly respondents at the Time 2 interview was 74 years. The median age was 73 and the range was from 66 to 102 years. Age had a significant affect on perceived health; the older respondents being more likely to report poor health. In addition, the lack of an unmet need was significantly associated with younger age.

The racial background of the Time 2 sample (aged 66 or more) was 99 percent Caucasion, while the 1970 state percentage of people over age 65 based on the Federal Census was 98 percent Caucasion and the national percentage for people aged 65 or more was 91 percent. The national racial background is therefore fairly discrepant from this Northeastern state sample.

One half of the elderly respondents were presently married and 84 percent of the total elderly reported being married for most of their adult life. Household composition, of course, was significantly related to marital status. Increasing age also decreased significantly the likelihood of the respondent being married and increased the likelihood of being widowed.

Almost two out of three (63 percent) of the elderly respondents reported having had a formal education that included at least some high school. Forty-one percent were at least high school graduates. These responses were influenced by each of the variables used in the subgroup analysis. Less formal education was associated with living with children only; more formal education was associated with living alone. Increasing age was associated with more formal education in a linear fashion. A self-report of excellent health was associated with more formal education, poor health with less education. One or more unmet needs were also related to less education.

A total of 11 percent of the elderly reported working at the time of the second interview, which of course means these people were working beyond the customary mandatory retirement age of 65. As would be expected the younger age groups and the group self-reporting excellent health had significantly greater percentages of workers. Of those who are not working, one in four (21 percent) reported a desire to be working. The conventional assumption of a willing but untapped labor source is supported by these data.

The mean number of people within the household for the total elderly was 2.04. Of course, household composition was significantly associated with the number of people. In addition, the older age groups were significantly more likely to be in larger households. It should be noted that all the people in a household aged 65 or more at the point of Time 1 screening were eligible respondents. The 1317 Time 2 respondents in fact came from 1049 households.

Though not formally presented in Table 44 but incorporated into the subgroup analytic variable of household composition, it was interesting to note that a total of nine percent of the elderly reported a change in their household composition within the 15 month period between the Time 1 and Time 2 interviews. Three percent had a change in marital status, the majority of whom became widowed.

The last bit of data in Table 44 does present more information on their household composition, specifically the number of years with their present situation. Slightly less than half (48 percent) of the total elderly reported 12 or more years living with their present household composition. Perceived health and number of unmet needs were not significantly related to these responses, though household composition was related as expected, as well as the age of the respondents. As expected, those living with spouse reported longer periods with that composition and those living alone or in the other combinations reported shorter periods. The age relationship was more directly linear; in general the older the respondent the more likely a longer period in that household composition was reported.

After each interview the interviewers were asked to record their own impressions about the respondents general orientation to reality, about hearing problems, speech difficulties, the general housekeeping state of the home, and any need for support services. No systematic directions were given for making any of these judgments. As the data in Table 45 indicate, the interviewers judged very few elderly to be in poor condition; only one percent appeared disoriented, 11 percent were judged to have hearing difficulties, three percent were judged to have unclear speech, five percent were judged to have housekeeping problems and two percent might be candidates for institutions, while another eight percent might need some minimal support services. Most of these interviewer judgments were significantly related to the sub-group analytic variables, suggesting that the interviewers were in some fashion integrating the respondents' answers into their judgments.

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly.

Filter Variable [A]	Time 1 Characteristics						Time 2 Characteristics				
	Unadjusted Number of Respondents	Adjusted Number of Respondents	Number of Proxy Respondents	GENDER (n)	Female	Male	Unadjusted number of Respondents	Number of Proxy Respondents	GENDER (n)	Female	Male
Total Elderly	(1625)	(1685)	(45)	(1634)	60%	40%	(1317)	(46)	(1317)	63%	37%
Household Composition									---***---		
Alone	(451)	(466)	(7)	(465)	77	23	(396)	(6)	(396)	79	21
With spouse only	(658)	(685)	(15)	(685)	45	55	(511)	(18)	(511)	46	54
With spouse & children only	(124)	(127)	(2)	(127)	32	68	(101)	(6)	(101)	37	63
With children only	(119)	(120)	(6)	(120)	83	17	(107)	(8)	(107)	79	21
Other combinations	(273)	(287)	(15)	(286)	72	28	(202)	(8)	(202)	78	22
Age											
65-69	(572)	(595)	(12)	(595)	57	43	(391)	(8)	(391)	59	41
70-74	(438)	(450)	(6)	(450)	62	38	(394)	(11)	(394)	65	35
75-79	(309)	(323)	(8)	(323)	57	43	(275)	(10)	(275)	63	37
80-84	(192)	(201)	(7)	(201)	65	35	(152)	(8)	(152)	62	38
85+	(106)	(108)	(11)	(107)	61	39	(99)	(8)	(99)	68	32
Perceived Health											
Excellent	(282)	(297)	(0)	(297)	57	43	(216)	(0)	(216)	60	40
Good	(667)	(698)	(0)	(687)	60	40	(535)	(0)	(535)	63	37
Fair	(416)	(431)	(0)	(431)	63	37	(399)	(0)	(399)	64	36
Poor	(185)	(189)	(0)	(189)	61	39	(113)	(0)	(113)	65	35
Number of Unmet Needs									---**---		
None							(1158)	(32)	(1158)	61	39
One							(114)	(14)	(114)	76	24
Two or more							(45)	(0)	(45)	78	22

Filter Variable [A]	Time 1 Age of Respondent							Time 2 Age of Respondent						
	(n)	65-69	70-74	75-79	80-84	85+	Mean	(n)	66-69	70-74	75-79	80-84	85+	Mean
Total Elderly	(1677)	36%	27%	19%	12%	6%	73.2	(1311)	30%	30%	21%	12%	7%	74.0
Household Composition														***
Alone	(462)	27	27	24	14	8	74.3	(393)	21	31	24	13	11	75.2
With spouse only	(682)	44	26	19	7	4	71.8	(510)	40	31	19	7	3	72.2
With spouse & children only	(127)	45	31	18	5	1	71.1	(101)	36	33	24	6	1	71.9
With children only	(120)	22	23	15	24	16	76.6	(106)	16	25	16	25	18	77.5
Other combinations	(285)	30	29	14	17	10	74.3	(201)	25	28	20	16	11	75.2
Age														
65-69														
70-74														
75-79														
80-84														
85+														
Perceived Health									-------***--------					***
Excellent	(295)	43	27	16	7	7	73.3	(214)	35	31	19	7	8	73.1
Good	(683)	37	30	18	12	3	72.6	(532)	32	32	20	10	6	73.3
Fair	(431)	35	25	21	12	7	73.4	(399)	28	28	23	15	6	74.4
Poor	(188)	26	24	24	17	9	74.8	(113)	21	28	21	14	16	75.7
Number of Unmet Needs									-------***--------					***
None								(1153)	31	31	21	11	6	73.5
One								(113)	17	24	20	19	20	77.3
Two or more								(45)	11	33	30	15	11	76.4

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A] Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly (continued).

		Time 1 Race				Time 2 Race		
Filter Variable	(n)	White	Black	Other	(n)	White	Black	Other
Total Elderly	(1661)	99%	1%	½%	(1295)	99%	1%	½%
Household Composition ***								
Alone	(461)	100	½	0	(390)	100	0	0
With spouse only	(677)	99	0	1	(503)	99	½	½
With spouse & children only	(123)	100	0	0	(99)	98	0	2
With children only	(118)	98	1	1	(103)	100	0	0
Other combinations	(282)	97	2	1	(200)	98	2	0
Age								
65-69	(589)	99	1	½	(382)	100	½	0
70-74	(446)	99	½	½	(386)	100	0	½
75-79	(313)	99	0	1	(273)	99	½	½
80-84	(198)	98	1	1	(151)	99	1	0
85+	(108)	98	1	1	(98)	99	1	0
Perceived Health								
Excellent	(294)	99	½	½	(212)	100	0	0
Good	(676)	99	½	½	(523)	99	1	0
Fair	(425)	97	1	2	(397)	100	½	0
Poor	(188)	97	0	3	(113)	99	0	1
Number of Unmet Needs ***								
None					(1136)	99	½	½
One					(114)	100	0	0
Two or more					(45)	96	4	0

		Time 1 Marital Status						Time 2 Marital Status					
Filter Variable[A]	(n)	Mar-ried	Wid-owed	Div-orced	Separ-ated	Never Been Mar-ried	% Mar-ried for Most of Adult Life	(n)	Mar-ried	Wid-owed	Div-orced	Separ-ated	Never Been Mar-ried	% Mar-ried for Most of Adult Life
Total Elderly	(1675)	51%	37%	2%	1%	9%		(1312)	50%	39%	2%	1%	8%	84%
Household Composition											***---			***
Alone	(464)	3	75	6	1	15		(393)	1	78	4	2	15	72
With spouse only	(683)	100	0	0	0	0		(511)	100	0	0	0	0	99
With spouse & children only	(127)	100	0	0	0	0		(101)	100	0	0	0	0	97
With children only	(120)	1	96	2	1	0		(106)	0	99	1	0	0	87
Other combinations	(280)	17	51	4	3	25		(201)	15	52	5	3	25	63
Age											***---			
65-69	(592)	63	24	3	1	9		(393)	64	22	3	1	10	84
70-74	(448)	52	35	2	1	10	NOT	(394)	50	38	2	1	9	84
75-79	(321)	49	41	1	1	8		(275)	47	45	1	0	7	87
80-84	(201)	32	57	4	0	7	ASKED	(152)	33	59	3	0	5	85
85+	(106)	25	64	2	1	8		(99)	17	72	3	½	8	81
Perceived Health														*
Excellent	(296)	56	32	2	1	9		(216)	48	37	2	0	13	78
Good	(681)	51	37	3	1	8		(535)	51	38	3	1	7	87
Fair	(430)	50	36	3	1	10		(399)	48	41	2	1	8	83
Poor	(188)	52	39	2	1	6		(113)	48	42	1	3	6	87
Number of Unmet Needs														*
None								(1154)	52	37	2	1	8	85
One								(113)	34	52	2	1	11	78
Two or more								(40)	18	62	5	2	13	73

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A]Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly (continued).

Filter Variable	(n)	None	Grades 1-4	Grades 5-6	Grades 7-8	1-3 Years High School	High School Grad	Some College	College Grad	Higher Degree
				Time 1	Highest Level of Formal Education					
Total Elderly	(1625)	2%	6%	8%	22%	21%	24%	8%	6%	3%
Household Composition										
Alone	(454)	2	4	9	25	14	26	10	7	3
With spouse only	(659)	2	6	7	21	23	23	9	6	3
With spouse & children only	(119)	2	7	6	21	26	23	7	6	2
With children only	(115)	5	15	11	21	18	19	4	5	2
Other combinations	(278)	4	8	8	18	24	23	6	5	4
Age										
65-69	(580)	1	4	5	20	24	25	11	7	3
70-74	(435)	3	6	8	23	17	25	9	6	3
75-79	(308)	1	7	10	19	21	24	8	6	4
80-84	(194)	7	10	11	25	20	20	4	2	1
85+	(101)	7	9	8	27	20	19	3	3	4
Perceived Health										
Excellent	(286)	1	2	6	13	14	27	15	14	8
Good	(671)	1	5	6	20	23	29	8	6	2
Fair	(413)	3	7	9	28	24	19	4	4	2
Poor	(179)	8	16	12	23	18	14	6	1	2
Number of Unmet Needs										
None										
One										
Two or more										

Filter Variable	(n)	None	Grades 1-4	Grades 5-6	Grades 7-8	1-3 Years High School	High School Grad	Some College	College Grad	Higher Degree
				Time 2	Highest Level of Formal Education[A]					
Total Elderly	(1267)	2%	6%	7%	22%	22%	24%	8%	6%	3%
Household Composition**										
Alone	(384)	3	3	8	24	15	28	10	6	3
With spouse only	(491)	1	6	7	21	24	23	9	6	3
With spouse & children only	(97)	1	9	6	20	28	21	7	4	4
With children only	(98)	7	9	10	24	22	18	3	5	2
Other combinations	(197)	1	7	9	20	26	21	7	5	4
Age***										
65-69	(379)	1	3	4	20	26	26	11	6	3
70-74	(384)	2	6	8	23	18	25	7	8	3
75-79	(262)	2	6	10	20	19	24	9	6	4
80-84	(144)	5	9	12	24	25	17	5	2	2
85+	(92)	7	10	4	28	21	19	5	2	4
Perceived Health***										
Excellent	(211)	1	2	3	12	20	27	11	14	10
Good	(518)	2	4	6	21	22	27	9	6	3
Fair	(380)	2	7	11	28	22	20	7	2	1
Poor	(105)	3	13	10	20	23	17	7	3	4
Number of Unmet Needs**										
None	(1114)	2	5	7	21	22	25	9	6	3
One	(113)	3	12	6	25	25	19	3	3	3
Two or more	(40)	5	2	10	40	15	18	8	0	2

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] The responses to this question were obtained in the Time 1 interview.

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly (continued).

Filter Variable	Time 1 Employment Status				Time 2 Employment Status			
	(n)	Works Full Time	Works Part Time	Not Working	(n)	Works Full Time	Works Part Time	Not Working
Total Elderly	(1676)	5%	7%	88%	(1317)	4%	7%	89%
Household Composition								
Alone	(463)	6	7	87	(396)	5	7	88
With spouse only	(683)	5	8	87	(511)	5	8	87
With spouse & children only	(127)	6	10	84	(101)	3	8	89
With children only	(120)	5	4	91	(107)	2	5	93
Other combinations	(286)	4	8	88	(202)	4	6	90
Age***								
65-69	(593)	10	11	79	(391)	8	9	83
70-74	(448)	3	8	89	(394)	3	10	87
75-79	(322)	3	6	91	(275)	3	5	92
80-84	(201)	1	5	94	(152)	1	6	93
85+	(108)	1	2	97	(99)	1	2	97
Perceived Health***								
Excellent	(296)	10	10	80	(216)	11	14	75
Good	(686)	6	10	84	(535)	4	7	89
Fair	(430)	2	5	93	(399)	3	5	92
Poor	(189)	2	2	96	(113)	1	2	97
Number of Unmet Needs**								
None					(1158)	5	8	87
One					(114)	1	0	99
Two or more					(45)	5	2	93

Filter Variable	Time 1 Desire for Employment OF THOSE NOT WORKING				Time 2 Desire for Employment OF THOSE NOT WORKING			
	(n)	Would Like to Work Full Time	Would Like to Work Part Time	Would Not Like to Work	(n)	Would Like to Work Full Time	Would Like to Work Part Time	Would Not Like to Work
Total Elderly	(1445)	5%	18%	77%	(1133)	4%	17%	79%
Household Composition**								
Alone	(397)	4	16	80	(339)	2	12	86
With spouse only	(587)	5	19	76	(433)	4	21	75
With spouse & children only	(106)	5	26	69	(89)	10	21	69
With children only	(108)	9	17	74	(96)	3	18	79
Other combinations	(247)	5	15	80	(176)	5	15	80
Age**								
65-69	(458)	6	24	70	(317)	4	21	75
70-74	(396)	3	19	78	(333)	4	18	78
75-79	(291)	5	15	80	(249)	3	18	79
80-84	(189)	5	11	84	(136)	1	9	90
85+	(103)	8	9	83	(92)	5	11	84
Perceived Health								
Excellent	(238)	4	15	81	(160)	7	14	79
Good	(569)	5	21	74	(465)	2	18	80
Fair	(391)	5	17	78	(354)	4	19	77
Poor	(180)	10	15	75	(107)	4	12	84
Number of Unmet Needs								
None					(986)	3	18	79
One					(107)	7	16	73
Two or more					(39)	0	10	90

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly (continued).

Filter Variable[A]	Time 1 Number of People Per Household								Time 2 Number of People Per Household							
	(n)	One	Two	Three	Four	Five	Six or More	Mean	(n)	One	Two	Three	Four	Five	Six or More	Mean
Total Elderly	(1684)	28%	52%	11%	4%	3%	2%	2.10	(1317)	30%	51%	11%	4%	3%	1%	2.04
Household Composition												***——				***
Alone	(466)	100	0	0	0	0	0	1.00	(396)	100	0	0	·0	0	0	1.00
With spouse only	(685)	0	100	0	0	0	0	2.00	(511)	0	100	0	0	0	0	2.00
With spouse & children only	(127)	0	0	74	14	5	6	3.46	(101)	0	½	73	14	8	5	3.45
With children only	(120)	0	64	30	4	2	0	2.43	(107)	0	69	27	4	0	0	2.35
Other combinations	(285)	0	39	21	16	13	11	3.39	(202)	0	42	19	18	14	7	3.32
Age												***——				***
65–69	(595)	21	61	11	4	2	1	2.10	(391)	21	63	10	4	1	1	2.03
70–74	(450)	28	49	14	3	3	3	2.16	(394)	31	50	11	4	3	1	2.03
75–79	(323)	35	49	8	4	2	2	1.96	(275)	35	47	10	4	3	1	1.99
80–84	(201)	33	42	12	8	3	3	2.15	(152)	34	41	13	7	5	½	2.12
85+	(108)	32	40	14	5	6	3	2.22	(99)	43	33	10	4	6	4	2.10
Perceived Health																*
Excellent	(297)	30	54	12	3	½	1	1.92	(216)	36	50	9	2	2	1	1.87
Good	(687)	28	53	10	4	2	3	2.10	(535)	29	52	12	4	1	2	2.02
Fair	(431)	30	49	12	4	3	2	2.08	(399)	31	50	10	4	4	1	2.03
Poor	(189)	24	51	12	5	7	1	2.26	(113)	24	51	9	8	5	3	2.27
Number of Unmet Needs												—**——				
None									(1158)	28	53	11	4	3	1	2.06
One									(114)	43	36	15	3	2	1	1.90
Two or more									(45)	47	42	0	7	2	2	1.76

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square and/or F-test).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square and/or F-test).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square and/or F-test).

[A] Notice that the chi square and/or F-test significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 44. Background Characteristics of the Sample Presented By Various Subgroups of the Elderly (continued).

Filter Variable	(n)	Time 1 Number of Years With Present Household Composition											
		One	Two	Three	Four	Five	6-10	11-15	16-20	21-30	31-40	41-50	51 Or More
Total Elderly	(1606)	8%	5%	6%	4%	5%	19%	14%	10%	13%	7%	6%	3%
Household Composition													
Alone	(452)	10	9	8	4	7	21	15	11	8	4	1	2
With spouse only	(660)	4	2	2	3	2	18	15	12	7	10	10	5
With spouse & children only	(119)	5	5	12	3	13	10	5	9	18	9	8	3
With children only	(111)	11	3	5	5	5	25	14	7	12	6	6	1
Other combinations	(264)	13	7	8	6	5	19	13	8	11	3	4	3
Age													
65-69	(577)	8	6	6	5	6	21	15	9	10	6	7	1
70-74	(433)	9	3	5	3	4	18	14	12	12	8	8	4
75-79	(307)	8	6	5	2	3	16	13	11	21	5	4	6
80-84	(190)	9	6	6	6	6	15	10	11	15	6	5	5
85+	(93)	3	3	7	0	6	23	10	12	16	13	1	6
Perceived Health													
Excellent	(293)	5	4	5	2	6	20	15	14	12	8	6	3
Good	(676)	8	6	5	4	4	21	13	8	14	8	6	3
Fair	(422)	10	4	5	4	4	17	16	11	14	5	7	3
Poor	(186)	8	6	8	3	7	13	11	13	17	5	4	5
Number of Unmet Needs													
None													
One													
Two or more													

Filter Variable	(n)	Time 2 Number of Years With Present Household Composition[A]												
		One	Two	Three	Four	Five	Six	7-11	12-16	17-21	22-31	32-41	42-51	52 or More
Total Elderly	(1276)	10%	7%	4%	5%	3%	4%	18%	12%	10%	13%	5%	5%	3%
Household Composition*														
Alone	(388)	13	8	7	7	4	6	19	13	9	8	3	1	2
With spouse only	(496)	2	4	2	3	2	1	18	15	13	17	8	10	4
With spouse & children only	(95)	12	6	7	11	3	9	9	4	8	15	6	8	2
With children only	(100)	17	5	3	6	4	5	24	13	7	7	4	4	1
Other combinations	(197)	21	11	3	5	3	5	15	9	7	13	4	1	3
Age*														
65-69	(388)	8	6	6	5	3	5	22	14	8	10	5	7	1
70-74	(381)	11	5	3	4	5	3	19	12	12	11	6	6	3
75-79	(255)	11	9	5	6	1	2	14	15	10	16	4	4	4
80-84	(144)	13	5	5	7	5	3	14	9	9	18	6	3	3
85+	(90)	11	4	4	7	2	7	12	8	12	17	10	1	4
Perceived Health														
Excellent	(210)	8	7	6	5	6	3	19	13	11	10	4	5	3
Good	(516)	10	6	3	5	2	4	19	13	10	13	6	7	2
Fair	(392)	11	7	4	6	3	5	17	12	9	13	5	5	3
Poor	(110)	11	8	4	7	4	3	11	13	13	15	4	3	4
Number of Unmet Needs*														
None	(1120)	10	6	4	5	3	4	19	13	10	12	5	6	3
One	(105)	15	7	8	8	7	2	8	8	9	15	4	6	3
Two or more	(44)	7	12	5	0	7	2	14	12	18	16	7	0	0

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] The responses to this question were obtained in the Time 1 interview.

Table 45. Interviewer Judgments of the Sample Presented by Various Subgroups of the Elderly.

		Time 1 Interviewer Judgments				Time 2 Interviewer Judgments		
Filter Variable[A]	(n)	Appeared Dis-oriented	Appeared Unable to Hear Normal Conversations	Speech Appeared Unclear	(n)	Appeared Dis-oriented	Appeared Unable to Hear Normal Conversations	Speech Appeared Unclear
Total Elderly	(1582)	2%	14%	4%	(1251)	1%	11%	3%
Household Composition							***	
Alone	(446)	1	12	3	(385)	2	12	3
With spouse only	(649)	2	15	3	(489)	1	8	2
With spouse & children only	(121)	3	16	3	(93)	2	10	2
With children only	(107)	3	19	8	(93)	1	20	3
Other combinations	(259)	3	16	5	(191)	2	11	3
Age						***	***	***
65-69	(568)	1	9	2	(377)	0	6	1
70-74	(433)	1	8	3	(375)	1	9	2
75-79	(296)	1	18	4	(263)	5	12	3
80-84	(187)	3	26	5	(142)	2	15	3
85+	(91)	10	41	12	(87)	6	31	11
Perceived Health								***
Excellent	(293)	2	11	1	(213)	1	9	1
Good	(666)	1	12	2	(525)	1	12	1
Fair	(414)	2	17	6	(396)	1	8	3
Poor	(190)	6	19	9	(111)	3	14	10
Number of Unmet Needs						***	***	***
None					(1140)	1	10	2
One					(112)	4	12	4
Two or more					(45)	0	20	9

		Time 1 Housekeeping				Time 2 Housekeeping		
Filter Variable	(n)	Clearly Adequate	Appeared Neither Clearly Adequate Nor Fostering Health Problems	Extremely Poor/Could Foster Health Problems	(n)	Clearly Adequate	Appeared Neither Clearly Adequate Nor Fostering Health Problems	Extremely Poor/Could Foster Health Problems
Total Elderly	(1649)	93%	6%	1%	(1212)	95%	4%	1%
Household Composition**								
Alone	(453)	91	8	1	(351)	91	8	1
With spouse only	(674)	95	5	½	(476)	97	3	½
With spouse & children only	(125)	96	4	0	(97)	99	1	0
With children only	(115)	92	7	1	(93)	96	3	1
Other combinations	(282)	93	7	1	(195)	96	3	1
Age								
65-69	(586)	93	6	1	(353)	96	3	1
70-74	(440)	95	5	½	(360)	93	5	2
75-79	(314)	92	7	1	(255)	95	5	½
80-84	(197)	94	5	1	(147)	95	5	0
85+	(105)	93	6	1	(93)	99	1	0
Perceived Health**								
Excellent	(291)	96	3	1	(190)	97	3	0
Good	(674)	95	4	1	(500)	94	4	1
Fair	(422)	92	7	1	(377)	94	6	½
Poor	(189)	90	9	1	(108)	93	4	3
Number of Unmet Needs***								
None					(1061)	96	4	½
One					(110)	90	9	1
Two or more					(41)	81	12	7

* Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

** Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

*** Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

[A] Notice that the chi square significance level (.05, .01, .001) of the Time 2 distribution by each filter variable is included in the table itself.

Table 45. Interviewer Judgments of the Sample Presented By Various Subgroups of the Elderly (continued).

Filter Variable	Time 1 Need For Services				Time 2 Need For Services			
	(n)	Might Be Candidate For Some Type of Institution	Might Need Some Minimal Support Services	Clearly Does Not Need Any Type of Institution or Support Services	(n)	Might Be Candidate For Some Type of Institution	Might Need Some Minimal Support Services	Clearly Does Not Need Any Type of Institution or Support Services
Total Elderly	(1600)	2%	12%	86%	(1244)	2%	8%	90%
Household Composition**								
Alone	(453)	2	20	78	(382)	2	10	88
With spouse only	(657)	1	9	90	(487)	1	6	93
With spouse & children only	(122)	1	7	92	(94)	1	4	95
With children only	(108)	5	11	84	(92)	2	14	84
Other combinations	(260)	3	12	85	(189)	4	7	89
Age***								
65-69	(571)	1	6	93	(374)	1	3	96
70-74	(437)	1	11	88	(375)	2	9	89
75-79	(302)	2	16	82	(261)	1	9	90
80-84	(189)	4	20	76	(141)	4	11	85
85+	(94)	5	33	62	(88)	9	17	74
Perceived Health***								
Excellent	(294)	0	4	96	(212)	1	2	97
Good	(675)	1	7	92	(524)	1	5	94
Fair	(421)	2	17	81	(395)	2	10	88
Poor	(184)	7	35	58	(108)	12	25	63
Number of Unmet Needs***								
None					(1105)	1	4	95
One					(95)	8	34	58
Two or More					(44)	25	43	32

*Time 2 distribution significantly influenced by this filter variable at .05 level (chi square).

**Time 2 distribution significantly influenced by this filter variable at .01 level (chi square).

***Time 2 distribution significantly influenced by this filter variable at .001 level (chi square).

IV. SUMMARY

A summary of a quantitative information base about older people
such as the one presented risks overgeneralizing, a problem which is
antithetical to the logic of collecting a quantitative information
base in the first place. Hopefully the following are generalizations
which facilitate planning for targeted groups rather than overgeneral-
izations which hinder it.

1. Short Term Stability. The percentage of older people who
needed support services at Time 1 was about the same as the percentage
who needed them at Time 2. The individuals of course very often changed,
but the percentage was about the same. This stability and similarity
of the response patterns over time was found for virtually all the items.
The short term fluctuations were minimal.

2. Needs Assessment. At Time 2 the percentages of people who
were unable to take care of their needs under their present arrangements
were as follows: seven percent in transportation; three percent in per-
sonal care; two percent in housekeeping; two percent in social activities;
two percent in emergency assistance; one percent in food shopping; one half
percent in food preparation. The vast majority were fully independent
and self-sufficient in their present situation. About nine out of ten
older people had no unmet social service needs, and less than one in
twenty had two or more unmet social service needs.

3. Turnover Rates. The percentage who had needed some help in
any of the normal activities of daily living or with any kind of special
service (for example, home nursing services, home meal services, home
health aid services, speech or rehabilitation therapies) during the 15
months between interviews was almost twice as large as the percentage
who needed help at any specific point in time, implying the target
population is fairly stable. This bit of information can be particularly
useful in future years to planners trying to set up services for people
over age 65. The outreach component of the service system can be more
modest in this context than if the percentage of people having needed
a service during the interim had been, for instance, five times greater
than at any point in time.

4. Health Status. The self-reported health status of the sample
was generally good, reinforcing the general finding that only a small
percentage (three to seven percent) of those over age 65 have a need
for extensive services from the formal support system. This proposition
is supported by the following findings:

Less than one in ten reported poor health or reported their health
was worse than others their own age.

Using the number of days spent in bed as an indicator of general
disability, only one percent reported four months or more of days during
the preceding 15 months in which they were in bed for all of most of the
day, five percent reported a month or more of bed days, and a full 70 percent

reported no days in bed during the previous 15 months. Again, only one to six percent of the elderly have more severe disabilities.

The reported use of wheelchairs and walkers was minimal; one percent of the total elderly reported using a wheelchair and three percent a walker.

Only a third of the elderly sleep through the night without waking up. The mean number of hours of sleep reported was 7.3.

5. Health Care Utilization. The items about health care utilization and coverage patterns produced interesting findings. The vast majority (87 percent) of the elderly have a particular doctor to see; and the doctor's office is the customary location for 84 percent. The elderly as a whole averaged 4.5 doctor visits during the preceding 15 months, though almost one in five did not visit a physician at all during that time. About one in three of the elderly reported taking two or more prescriptions on a regular basis.

Medicare coverage for medical expenses was reported for 93 percent of the elderly, while 14 percent reported Medicaid coverage.

There was not much support for the revolving bed syndrome in long term care facilities; only one percent report a nursing home admission and discharge during the 15 month interim.

The general pattern of this health care utilization data is that the elderly closely parallel a pattern generally found for the nation as a whole, that approximately five to 15 percent of the population accounts for about half of the health care utilization. A separate analysis was designed to determine if any of the Time 1 social service needs assessment or health care utilization information could be used to predict the high users of the health care system as identified at Time 2. The results indicated that being a high user at one point in time in any one of the following six areas - (1) the number of hospital admissions; (2) the use of special services such as speech or rehabilitation therapy, counseling, home nursing services, home meal service, home health aid services, or short term nursing home admission; (3) the need for regular injections; (4) the number of prescription drugs taken regularly; (5) the average monthly cost of medicines and medical supplies; (6) the frequency of physician contact - was significantly related to being a high user in all of these specific areas 15 months later. Some of the social service needs indicators were also predictors of high health care utilization at a later point. Having two or more unmet social service needs was significantly related to being a high user in all of the specific areas. Having an unmet need in transportation or food shopping was significantly related to being a high user in all the specific areas except hospital admissions.

6. Social Activities. Social contact with non-household people occurred daily for the majority (57 percent), but once a week or less for 15 percent. Two percent were functionally homebound, that is reporting they leave their homes never or almost never except for

emergencies. This operational definition is slightly more stringent and conservative than the definitions used by the National Center for Health Statistics which produced higher estimates.

The data lend support to the contention that the social activities of an older person are the first things to be curtailed when problems arise. Social activities function in some ways as an early warning indicator that changes in the overall life style are occurring.

7. Tobacco and Alcohol Consumption. Nearly half (48 percent) of the elderly respondents reported that they had never smoked. The percentage of total elderly who currently smoke was 23 percent and of those current smokers, 25 percent were pipe or cigar smokers. The remaining 75 percent who were cigarette smokers had a mean number of 16 cigarettes per day.

The alcohol consumption information suggested that as a group the younger, healthier people with no unmet needs consume alcohol with more regularity than the rest of the elderly. Of course such correlational data does not imply that one factor is causing the other, but perhaps both factors are influenced by a third one, such as a generalized zest for enjoying life.

8. Dietary Patterns and Nutritional Intake. The dietary and nutritional intake patterns do not support the contention that under-consumption is a problem for a large percentage of older people.

9. Housing Factors. Three out of four of the elderly reported they were very satisfied with their current situation; two percent reported being on a waiting list for a rest home, nursing home, or other housing for the elderly; seven percent were in public or subsidized housing.

10. Income and Expenditures. The median reported annual income was $4500. Grocery costs amounted to 32 percent of the income of respondent (and spouse if present); housing costs were reported as 44 percent of this income; and medical costs were three percent. These three expenses reportedly accounted for 79 percent of the income of respondent (and spouse if present).

11. Affects of Age. Age was related to most of the issues addressed in this study. The most common form of the age relationship was that those aged 85 or more clearly reported the most negative patterns and situations; those aged 80 through 84 also reported negative patterns and situations, but to a slightly lesser degree than those aged 85 or more; those under age 80 reported favorable patterns and situations for the most part. A second type of association was noted between age and some of the variables, namely a straightforward linear relationship in which each increase in age was associated with a steady increment in the more negative response patterns. It should be emphasized that this linear relationship did not occur very often. A third type of age relationship occurred only a few times, but is interesting in its implications. Consider the case of need for personal care assistance.

The relationship with personal care was that those aged 80 through 84 reported the most serious problems, while those aged 85 or more reported the more favorable patterns. It seems those who had been in need had ultimately come to rely on other people for help in this area. Apparently the problems in personal care begin around age 80 as they did for other things, but the problems are solved by age 85 rather than deteriorating more seriously.

12. <u>Affects of Household Composition</u>. Household composition was associated with significant differences in most areas also. The household composition consistently associated with more problems or the more negative response pattern was the one in which the respondent was living with children only. Those living only with a spouse often reported the most favorable patterns and situations.

13. <u>Affects of Perceived Health</u>. The respondents' perception of their own health was also associated with significant differences in most variables with a remarkably consistent pattern. Those reporting excellent, good or fair perceived health were very similar in response patterns; those reporting poor perceived health were dramatically different from the rest of the elderly. In the needs assessment areas those reporting poor health actually had a four to fivefold increase in the percentage of respondents with an unmet need compared to the rest of the elderly.

14. <u>Affects of Number of Unmet Needs</u>. The social service needs assessment definitions used in the subgroup analyses dramatically influenced the response patterns. Those 45 respondents with two or more unmet needs reported the more negative responses at a rate about ten times greater than the rest of the elderly. Even the 114 respondents with one unmet need consistently reported the more negative patterns, but not to the same degree.

15. <u>Affects of Gender</u>. The affects of gender were considered in the needs assessment areas. Gender was associated with significant differences in five of the seven needs assessment areas (transportation, personal care, housekeeping, emergency assistance, and food preparation). In every instance females had higher levels of unmet needs or greater problems than males, including the gender stereotyped areas of housekeeping and food preparation. Several explanations for this are possible. One is that increased longevity of women over men might possibly be due in part to an increased number of women who are surviving with unmet needs in any one of several social service areas. In other words, perhaps the men with unmet needs are not surviving to the degree that women with unmet needs are. Or perhaps the women are merely more articulate or verbal about expressing problems.

16. <u>Family Care of Older People</u>. There was occasional support for the contention that the family provides informal support services for a small segment of the older people with failing health and/or resources. The support comes from an inspection of those tables presenting information about the source of help received when necessary; those living with children often had higher rates of need for

assistance, and the other household members were providing it.

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APPENDIX A

This appendix presents the exact operational definitions used in the needs assessment. The specific items from the questionnaire which were incorporated in a particular need assessment are presented. The number of respondents which were categorized within each of the major categories and within each of the subcategories are also presented.

TRANSPORTATION: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 98-103. The number of cases that is included in each category is presented in the parentheses.

Q98: About how often do you get out of your (HOUSE/APARTMENT) for any reason - almost every day, a few times a week, about once a week, several times a month, about once a month, several times a year, about once a year, never or almost never except for emergencies.

Q99: Which of these three statements best describes your present transportation pattern:

1. I am completely free to go and return as I want, when I want, and for what I want.
2. I go out for most things I need or like, but I don't do many extra things like going visiting.
3. I only go out for special occasions and/or basic necessities like food shopping.

Q100: How often are you able to go to the places you would like to - would you go as often as you'd like, most of the time, or not nearly as often as you'd like?

Q101: When you are going someplace that is too far to walk how do you usually get there - by car, public transportation, taxi, or what?

Q102: When you go somewhere by car, who usually drives - do you usually drive yourself, does someone living here drive you, or does someone else usually drive you? (Who is that?)

Q103: Do you find getting where you need to go is usually a big problem, a little problem, or no problem at all?

Number		Categories
905		1. NEED MET, NO APPARENT PROBLEM
	789	1.1 Transportation pattern-completely free (Q99); and no problem with transportation (Q103).
	65	1.2 Transportation pattern-completely free (Q99); and a little problem with transportation (Q103).
	19	1.3 Transportation pattern-goes out for most things (Q99); no problem with transportation (Q103); usual mode of transportation is a car (Q101); and usually drives self (Q102).
	17	1.4 Transportation pattern-goes out for most things (Q99); no problem with transportation (Q103); and usual mode of transportation is a taxi or public transportation (Q101).
	5	1.5 Transportation pattern-goes out for most things (Q99); a little problem with transportation (Q103); usual mode of transportation is a car (Q101); and usually drives self (Q102).
	10	1.6 Transportation pattern-goes out for most things (Q99); a little problem with transportation (Q103); and usual mode of transportation is a taxi or public transportation (Q101).
245		2. NEED MET, POTENTIAL PROBLEM
	8	2.1 Transportation pattern-completely free (Q99); and a big problem with transportation (Q103).
	19	2.2 Transportation pattern-goes out for most things (Q99); no problem with transportation (Q103); usual mode of transportation is a car (Q101); and a household member usually drives (Q102).
	19	2.3 Transportation pattern-goes out for most things (Q99); no problem with transportation (Q103); usual mode of transportation is a car (Q101); and a person outside of household usually drives (Q102).
	11	2.4 Transportation pattern-goes out for most things (Q99); a little problem with transportation (Q103); usual mode of transportation is a car (Q101); and a household member usually drives (Q102).
	18	2.5 Transportation pattern-goes out for most things (Q99); a little problem with transportation (Q103); usual mode of transportation is a car (Q101); and a person outside of household usually drives (Q102).
	13	2.6 Transportation pattern-goes out for most things (Q99) and Either a big problem with transportation (Q103) Or able to go places not nearly as often as would like (Q100) and not answered if there is a problem with transportation (Q103).
	16	2.7 Transportation pattern-goes out for basic necessities (Q99); no problem with transportation (Q103); usual mode of transportation is a car (Q101); and usually drives self (Q102).

26   2.8   Transportation pattern-goes out for basic necessities (Q99);
no problem with transportation (Q103);
and usual mode of transportation is a taxi or public transportation (Q.101).

50   2.9   Transportation pattern-goes out for basic necessities (Q99);
no problem with transportation (Q103);
usual mode of transportation is a car (Q101);
and a household member usually drives (Q102).

49   2.10   Transportation pattern-goes out for basic necessities (Q99);
no problem with transportation (Q103);
usual mode of transportation is a car (Q101);
and a person outside of household usually drives (Q102).

16   2.11   Transportation pattern-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
and able to go places as often or most of the time as would like (Q100).

54

3.   <u>UNCERTAIN NEED MET, POTENTIAL PROBLEM</u>

5   3.1   Transportation problem-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and usually drives self (Q102).

9   3.2   Transportation pattern-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a taxi or public transportation (Q101).

9   3.3   Transportation pattern-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and a household member usually drives (Q102).

23   3.4   Transportation pattern-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and a person outside of household usually drives (Q102).

3   3.5   Transportation pattern-goes out for basic necessities (Q99);
a little problem with transportation (Q103);
and missing data on how often able to go places would like (Q100).

5   3.6   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
and able to go places as often or most of the time as would like (Q100).

93

4.   <u>NEED UNMET; CURRENT PROBLEM</u>

2   4.1   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and usually drives self (Q102).

18   4.2   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a taxi or public transportation (Q101).

10   4.3   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and a household member usually drives (Q102).

25   4.4   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
usual mode of transportation is a car (Q101);
and a person outside of household usually drives (Q102).

1   4.5   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
able to go places not nearly as often as would like (Q100);
and usual mode of transportation is some special service (Q101).

7   4.6   Transportation pattern-goes out for basic necessities (Q99);
a big problem with transportation (Q103);
and missing data on how often able to go places would like (Q100).

30   4.7   (HOMEBOUND) goes out of home never or almost never except for emergencies (Q98)

18   OMITTED DUE TO MISSING DATA

2   OMITTED DUE TO OTHER PATTERN

COMBINED PERSONAL CARE BASED ON FIVE ACTIVITIES: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 41-45, 50-51, 53-57, 59-63, 65-70, 72-73. The number of cases that is included in each category is presented in the parentheses.

Q41: I need to find out about some activities of daily living. I know you've given me some of the information already, but I need to make sure I get it down correctly in this section.

Since the last interview, was there any period in which another person generally helped you to walk across a small room?

Q42: Who usually helped? (GET RELATIONSHIP)

Q43: Are you still getting this help?

Q44: Since the last interview, was there any time you felt you needed some (extra) help getting around the house, but didn't have anyone to help you on a regular basis?

Q45: Do you still feel you could use some (extra) help at the present time?

Q50: Since the last interview, was there any period in which another person generally helped you to get dressed or stayed with you while you dressed?

Q51: Who was that usually? (GET RELATIONSHIP)

Q53: Are you still getting this help?

Q54: Since the last interview, was there any time you felt you needed some (extra) help to get dressed, but didn't have anyone to help you on a regular basis?

Q55: Do you still feel you could use some (extra) help at the present time?

Q56: Since the last interview, was there any period in which another person generally helped you with bathing or stayed with you while you bathed?

Q57: Who was that usually? (GET RELATIONSHIP)

Q59: Are you still getting this help?

Q60: Since the last interview, was there any time you felt you needed some (extra) help with bathing, but didn't have anyone to help you on a regular basis?

Q61: Do you still feel you could use some (extra) help at the present time?

Q62: Since the last interview, was there any period in which another person generally helped you to eat or needed to be in the room with you?

Q63: Who was that usually? (GET RELATIONSHIP)

Q65: Are you still getting this help?

Q66: Since the last interview, was there any time you felt you needed some (extra) help with feeding, but didn't have anyone to help you on a regular basis?

Q67: Do you still feel you could use some (extra) help at the present time?

Q68: Since the last interview, was there any period in which another person needed to be in the room with you, or generally helped you to take care of things like brushing hair, shaving, or cutting toenails?

Q69: Who was that usually? (GET RELATIONSHIP)

Q70: Are you still getting this help?

Q72: Since the last interview, was there any time you felt you needed some (extra) help with your personal care, but didn't have anyone to help you on a regular basis?

Q73: Do you still feel you could use some (extra) help at the present time?

Activity #1 Bathing

1192
1. NO NEED
Not currently receiving help with bathing (Q56 and 59);
and does not feel need for help (Q60 and 61).

93
2. NEED MET
Currently receiving help with bathing (Q56 and 59);
and does not feel need for extra help (Q60 and 61).

8
3. UNMET AND RECEIVING HELP
Currently receiving help with bathing (Q56 and 59);
and does feel need for extra help (Q60 and 61).

13
4. UNMET AND NOT RECEIVING HELP
Not currently receiving help with bathing (Q56 and 59);
and does feel need for help (Q60 and 61).

Activity #2 Dressing

1243
1. NO NEED
Not currently receiving help getting dressed (Q50 and 53);
and does not feel need for help (Q54 and 55).

56
2. NEED MET
Currently receiving help getting dressed (Q50 and 53);
and does not feel need for extra help (Q54 and 55).

2
3. UNMET AND RECEIVING HELP
Currently receiving help getting dressed (Q50 and 53);
and does feel need for extra help (Q54 and 55).

8
4. UNMET AND NOT RECEIVING HELP
Not currently receiving help getting dressed (Q50 and 53);
and does feel need for help (Q54 and 55).

Activity #3 Eating

1287
1. NO NEED
Not currently receiving help with eating (Q62 and 65);
and does not feel need for help (Q66 and 67).

18
2. NEED MET
Currently receiving help with eating (Q62 and 65);
and does not feel need for extra help (Q66 and 67).

0
3. UNMET AND RECEIVING HELP
Currently receiving help with eating (Q62 and 65);
and does feel need for extra help (Q66 and 67).

1
4. UNMET AND NOT RECEIVING HELP
Not currently receiving help with eating (Q62 and 65);
and does feel need for help (Q66 and 67).

Activity #4 Grooming

1183
1. NO NEED
Not currently receiving help with grooming (Q68 and 70);
and does not feel need for help (Q72 and 73).

103
2. NEED MET
Currently receiving help with grooming (Q68 and 70);
and does not feel need for help (Q72 and 73).

9
3. UNMET AND RECEIVING HELP
Currently receiving help with grooming (Q68 and 70);
and does feel need for extra help (Q72 and 73).

9
4. UNMET AND NOT RECEIVING HELP
Not currently receiving help with grooming (Q68 and 70);
and does feel need for help (Q72 and 73).

Activity #5 Ambulation

1246   1. NO NEED
          Not currently receiving help walking across a small room (Q41 and 43);
          and does not feel need for help (Q44 and 45).

36   2. NEED MET
          Currently receiving help walking across a small room (Q41 and 43);
          and does not feel need for extra help (Q44 and 45).

8   3. UNMET AND RECEIVING HELP
          Currently receiving help walking across a small room (Q41 and 43);
          and does feel need for extra help (Q44 and 45).

17   4. UNMET AND NOT RECEIVING HELP
          Not currently receiving help walking across a small room (Q41 and 43);
          and does feel need for help (Q44 and 45).

Number	Categories

1091   1. NEED MET, NO APPARENT PROBLEM
    1091   1.1 No need score on all five activities.

148   2. NEED MET, POTENTIAL PROBLEM
    85   2.1 Need met score on at least one of five activities;
               all other items scored as no need;
               and help received is from household members, but no people outside
               of household or paid sources involved.
    24   2.2 Need met score on at least one of five activities;
               all other items scored as no need;
    39   and help received is from people outside of household but paid sources not involved.
            2.3 Need met score on at least one of five activities;
               all other items scored as no need;
               and help received is from paid source.

        3. UNCERTAIN NEED MET, POTENTIAL PROBLEM

43   4. NEED UNMET, CURRENT PROBLEM
    7   4.1 Need unmet on at least one of five activities;
               and help received is from household members, but no people
               outside of household or paid sources involved.
    7   4.2 Need unmet on at least one of five activities;
               and help received is from people outside of household but paid sources not involved.
    5   4.3 Need unmet on at least one of five activities;
               and help received is from paid source.
    24   4.4 Need unmet on at least one of five activities;
               and not getting any help at present.

35   OMITTED DUE TO MISSING DATA

HOUSEKEEPING: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 74-83. The number of cases that is included in each category is presented in the parentheses.

Q74: Who usually does most of the housekeeping like washing clothes and cleaning here? (GET RELATIONSHIP)

Q75: In general, is there any problem getting the housekeeping done, like cleaning and washing, or not?

Q76: Would you say it is a very serious problem, a somewhat serious problem, or not too serious a problem?

Q77: Does this statement pretty much describe your housekeeping situation or not: all the housekeeping gets done about the same as it did years ago; it gets done about as often, about as well, and with no more real difficulty.

Q78: Is there any problem getting the housekeeping done as often as you like?

Q80: (And) is there any problem getting it done as well as it used to be?

Q82: (And) is the housekeeping (also) a problem because it is just more difficult for you to get done?

Housekeeping problem scores based on a three item additive scale; each item scored 1, 2, 3, or 5 as indicated.

Score

Item#1 Q79: How often does the housekeeping get done now - most of the time, just some of the time, or hardly ever gets done at all?

no problem with how often housekeeping done (from Q77 or Q78)   5
housekeeping gets done most of the time   3
housekeeping gets done some of the time   2
housekeeping gets done hardly ever   1
missing data on how often housekeeping done   3

Item#2 Q81: How well does the housekeeping get done now - pretty well, fairly well, or not at all well?

no problem with how well housekeeping done (from Q77 or Q80)   5
housekeeping done pretty well   3
housekeeping done fairly well   2
housekeeping done not at all well   1
missing data on how well housekeeping done   3

Item#3 Q83: Does the housekeeping present a lot of difficulty or a little difficulty?

no problem with housekeeping being difficult (from Q77 or Q82)   5
housekeeping presents a little difficulty   3
housekeeping presents a lot of difficulty   1
missing data on housekeeping being difficult   3

Number   Categories

1116   1. NEED MET, NO APPARENT PROBLEM
     996   1.1 Housekeeping situation the same as years ago (Q77);
                       and no problem with housekeeping (Q75).
      43   1.2 Housekeeping problem score is 13 or more;
                       and no problem with housekeeping (Q75).
      46   1.3 Housekeeping problem score is 10, 11 or 12;
                       no problem with housekeeping (Q75);
                       and housekeeping done by self (Q74).
      31   1.4 Housekeeping situation not the same as years ago (Q77);
                       no problem with housekeeping (Q75);
                       and no specific problem with housekeeping (Q78, Q80, Q82).

44   2. NEED MET, POTENTIAL PROBLEM
       4   2.1 Not too serious or somewhat serious problem with housekeeping (Q76);
                       and no specific problem with housekeeping (Q78, Q80, Q82).
       6   2.2 Housekeeping problem score is 13 or more;
                       and a not too serious problem with housekeeping (Q76).
       4   2.3 Housekeeping problem score is 10, 11 or 12;
                       no problem or a not too serious problem with housekeeping (Q75 or Q76);
                       and household member does housekeeping (Q74).

10	2.4	Housekeeping problem score is 10, 11 or 12; no problem or a not too serious problem with housekeeping (Q75 or Q76); and person outside of household does housekeeping (Q74).
12	2.5	Housekeeping problem score is 10, 11 or 12; a not too serious problem with housekeeping (Q76); and housekeeping done by self (Q74).
4	2.6	Housekeeping problem score is 13 or more; and a somewhat serious problem with housekeeping (Q76).
4	2.7	Housekeeping problem score is 10, 11 or 12; and a somewhat serious problem with housekeeping (Q76).

112   3. UNDERTAIN NEED MET, POTENTIAL PROBLEM

0	3.1	Housekeeping problem score is 13 or more; and a very serious problem with housekeeping (Q76).
1	3.2	Housekeeping problem score is 10, 11 or 12; and a very serious problem with housekeeping (Q76).
48	3.3	Housekeeping problem score is 8 or 9; and no problem or a not too serious problem with housekeeping (Q75 or Q76).
10	3.4	Housekeeping problem score is 8 or 9; and a somewhat serious problem with housekeeping (Q76).
0	3.5	Housekeeping problem score is 8 or 9; and a very serious problem with housekeeping (Q76).
37	3.6	Housekeeping problem score is 6 or 7; and no problem or a not too serious problem with housekeeping (Q75 or Q76).
7	3.7	Housekeeping problem score is 7; and a somewhat serious problem with housekeeping (Q76).
9	3.8	Housekeeping problem score is 4 or 5; and no problem or a not too serious problem with housekeeping (Q75 or Q76).

26   4. NEED UNMET, CURRENT PROBLEM

1	4.1	Housekeeping problem score is 6; and a somewhat serious problem with housekeeping (Q76).
3	4.2	Housekeeping problem score is 6 or 7; and a very serious problem with housekeeping (Q76).
9	4.3	Housekeeping problem score is 4 or 5; and a somewhat serious housekeeping problem (Q76).
10	4.4	Housekeeping problem score is 4 or 5; and a very serious housekeeping problem (Q76).
3	4.5	Housekeeping problem score is 3; and a somewhat or very serious housekeeping problem (Q76).

19   OMITTED DUE TO MISSING DATA

SOCIAL ACTIVITIES: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 91-98, 105, 108 and 154. The number of cases that is included in each category is presented in the parentheses.

Social Activities behavior scores based on a seven item additive scale; each item scored 1, 3 or 5 as indicated.

	Score

Item#1 Q91: About how often do you talk with friends or relatives on the telephone - several times a day, once a day, a few times a week, once a week, or less often?

	Score
talks with friends or relatives on telephone several times a day	5
talks with friends or relatives on telephone once a day	5
talks with friends or relatives on telephone a few times a week	3
talks with friends or relatives on telephone once a week	3
talks with friends or relatives on telephone less often	1
missing data on frequency of talking with friends or relatives on telephone	3

Item#2 Q92: About how often do you talk in person to someone who does not live with you - almost every day, a few times a week, once a week, a few times a month, once a month, or less often?

contact with non-household person almost every day	5
contact with non-household person a few times a week	5
contact with non-household person once a week	3
contact with non-household person a few times a month	1
contact with non-household person once a month	1
contact with non-household person less often	1
missing data on frequency of contact with non-household person	3

Item#3 Q93: Do you generally spend most of the day with someone, or not?

does generally spend most of the day with someone	5
does not generally spend most of the day with someone	1
missing data on whether or not spends most of the day with someone	3

Item#4 Q95: Is there a friend, a relative or someone you know that you feel particularly close to, that is, somebody you can be completely yourself with and in whom you have complete trust and confidence?

has close friend	5
does not have close friend	1
missing data on whether or not has close friend	3

Item#5 Q97: Do you belong to any clubs, lodges, or organizations?

belongs to a club, lodge or organization	5
does not belong to a club, lodge or organization	1
missing data on whether or not belongs to a club, lodge or organization	3

Item#6 Q98: About how often do you get out of your (HOUSE/APARTMENT) for any reason - almost every day, a few times a week, about once a week, several times a month, about once a month, several times a year, about once a year, never or almost never except for emergencies?

goes out of home almost every day	5
goes out of home a few times a week	3
goes out of home about once a week	1
goes out of home several times a month	1
goes out of home about once a month	1
goes out of home several times a year	1
goes out of home about once a year	1
goes out of home never or almost never except for emergencies	1
missing data on frequency of leaving home	3

Item#7 Q154: Are you working at a job now?

working at a job now	5
not working at a job now	1
missing data on whether or not working at a job now	3

Social Activities evaluation scores based on a four item additive scale; each item scored 1, 3 or 5 as indicated.

Score

Item#1 Q94: Would you say you see as much of your relatives as you would like, or not?

sees as much of relatives as like	5
does not see as much of relatives	1
missing data on whether person sees as much of relatives	3

Item#2 Q96: Do you see as much of that person as you would like, or not?

sees as much of close friend as like	5
does not see as much of close friend	1
missing data on whether person sees as much of close friend	3

Item#3 Q105: In general, how satisfied are you with the way you spend your time - would you say very satisfied, somewhat satisfied, or not at all satisfied?

very satisfied with how spend time	5
somewhat satisfied with how spend time	5
not at all satisfied with how spend time	1
missing data on whether person satisfied with how spend time	3

Item#4 Q108: How satisfied are you with your life today - would you say very satisfied, fairly satisfied, satisfied, or not satisfied?

very satisfied with life today	5
fairly satisfied with life today	5
satisfied with life today	5
not satisfied with life today	1
missing data on whether person is satisfied with life today	3

Number		Categories
920		1. NEED MET, NO APPARENT PROBLEM
	34	1.1 Behavior score 35 or 33; and evaluation score 20 or 18.
	16	1.2 Behavior score 35 or 33; and evaluation score 16.
	137	1.3 Behavior score 35, 33 or 31; and evaluation score 20, 18 or 16.
	318	1.4 Behavior score 29 or 27; and evaluation score 20, 18 or 16.
	394	1.5 Behavior score 25, 23 or 21; and evaluation score 20, 18 or 16.
	21	1.6 Behavior score 21 or more; and evaluation score 14.
306		2. NEED MET, POTENTIAL PROBLEM
	123	2.1 Behavior score 21 or more; and evaluation score 12.
	3	2.2 Behavior score 21 or more; and evaluation score 10.
	49	2.3 Behavior score 19; and evaluation score 16 or more.
	6	2.4 Behavior score 19; and evaluation score 14.
	30	2.5 Behavior score 19; and evaluation score 12.
	4	2.6 Behavior score 19; and evaluation score 10.
	24	2.7 Behavior score 17; and evaluation score 16 or more.
	7	2.8 Behavior score 17; and evaluation score 14.
	15	2.9 Behavior score 17; and evaluation score 12.
	3	2.10 Behavior score 17; and evaluation score 10.
	42	2.11 Behavior score 15 or less; and evaluation score 14 or more.

58   3.   UNCERTAIN NEED MET, POTENTIAL PROBLEM
     30   3.1   Behavior score 21 or more;
                          and evaluation score 8 or less.
     28   3.2   Behavior score 15 or less;
                          and evaluation score 12 or 10.

30   4.   NEED UNMET, CURRENT PROBLEM
     15   4.1   Behavior score 19 or less;
                          and evaluation score 8.
     15   4.2   Behavior score 19 or less;
                          and evaluation score 6 or less.

3   OMITTED DUE TO MISSING DATA

COMBINED EMERGENCY ASSISTANCE: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 1, 85-90, 93 and 153. The number of cases that is included in each category is presented in the parentheses.

Q1:   In general, how is your health now - would you say excellent, good, fair or poor?

Q85: If you were sick, is there someone you could call on to help out around the house, or to help take care of you?

Q86: Who is that? (GET RELATIONSHIP)

Q87: How available (is/are PERSON(S) IN PRECEDING ITEM) to help at any particular time if you were sick - always available, often available, sometimes available, available on an emergency basis only.

Q88: In an emergency, is there someone you could call on to get help for you right away?

Q89: Do you have a telephone or not?

Q90: Is there a telephone you can use without going outside?

Q93: Do you generally spend most of the day with someone, or not?

Q153: Are you able to hear on the telephone (when you use the hearing aid)?

Long Term Emergency Assistance

Number		Categories
1044		1. NEED MET, NO APPARENT PROBLEM
	634	1.1 Has someone to call if sick (Q85); person is household member (Q86); and person is always available (Q87).
	32	1.2 Has someone to call if sick (Q85); person is household member (Q86); and person is often available (Q87).
	361	1.3 Has someone to call if sick (Q85); person is non-paid and outside of household (Q86); and person is always available (Q87).
	17	1.4 Has someone to call if sick (Q85); person is paid source (Q86); and person is always available (Q87).
115		2. NEED MET, POTENTIAL PROBLEM
	68	2.1 Has someone to call if sick (Q85); person is non-paid and outside household (Q86); and person is often available (Q87).
	9	2.2 Has someone to call if sick (Q85); person is household member (Q86); and person is sometimes available (Q87).
	35	2.3 Has someone to call if sick (Q85); person is non-paid and outside of household (Q86); and person is sometimes available (Q87).
	3	2.4 Has someone to call if sick (Q85); person is a paid source (Q86); and person is often available (87).
143		3. UNCERTAIN NEED MET, POTENTIAL PROBLEM
	3	3.1 Has someone to call if sick (Q85); person is household member (Q86); and person is available on an emergency basis only (Q87).
	24	3.2 Has someone to call if sick (Q85); person is non-paid and outside of household (Q86); and person is available on an emergency basis only (Q87).
	2	3.3 Has someone to call if sick (Q85); person is paid source (Q86); and person is sometimes available (Q87).
	1	3.4 Has someone to call if sick (Q85); person is paid source (Q86); and person is available on emergency basis only (Q87).
	50	3.5 Does not have someone to call if sick (Q85); and lives with others (demographic information from initial screening).
	33	3.6 Does not have someone to call if sick (Q85); lives alone (demographic information from initial screening); and excellent or good perceived health (Q1).
	30	3.7 Does not have someone to call if sick (Q85); lives alone (demographic information from initial screening); and fair perceived health (Q1).

6
    6

4. NEED UNMET, CURRENT PROBLEM
    4.1 Does not have someone to call if sick (Q85);
        lives alone (demographic information from initial screening);
        and poor perceived health (Q1).

9
           OMITTED DUE TO MISSING DATA

Short Term Emergency Assistance

Number   Categories

1266   1. NEED MET, NO APPARENT PROBLEM
    865   1.1 Generally spends the day with someone (Q93).
    155   1.2 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives with other people (demographic information from initial screening);
                  and has own telephone (Q89).
    245   1.3 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  has own telephone (Q89);
                  and able to hear on telephone (Q153).
    1   1.4 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives with others (demographic information from initial screening);
                  does not have own phone (Q89);
                  and has phone to use in building (Q90).

7   2. NEED MET, POTENTIAL PROBLEM
    6   2.1 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  does not have own phone (Q89);
                  has phone to use in building (Q90);
                  and able to hear on telephone (Q153).
    1   2.2 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives with others (demographic information from initial screening);
                  does not have own phone (Q89);
                  and does not have phone to use in building (Q90).

10   3. UNCERTAIN NEED MET, POTENTIAL PROBLEM
    1   3.1 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  does not have own phone (Q89);
                  does not have phone to use in building (Q90);
                  and able to hear on telephone (Q153).
    4   3.2 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  has own telephone (Q89);
                  and not able to hear on telephone (Q153).
    5   3.3 Does not generally spend the day with someone (Q93);
                  does not have someone to call in an emergency (Q88);
                  and lives with others (demographic information from initial screening).

16   4. NEED UNMET, CURRENT PROBLEM
    1   4.1 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  does not have own phone (Q89);
                  has phone to use in building (Q90);
                  and not able to hear on telephone (Q153).
    2   4.2 Does not generally spend the day with someone (Q93);
                  has someone to call in an emergency (Q88);
                  lives alone (demographic information from initial screening);
                  does not have own phone (Q89);
                  and does not have phone to use in building (Q90).
    13   4.3 Does not generally spend the day with someone (Q93);
                  does not have someone to call in an emergency (Q88);
                  and lives alone (demographic information from initial screening).

18   OMITTED DUE TO MISSING DATA

Combined Emergency Assistance

Number	Categories

1022   1. **NEED MET, NO APPARENT PROBLEM**

Need met, no apparent problem on <u>both</u> long term and short term emergency assistance.

116   2. **NEED MET, POTENTIAL PROBLEM**

Need met, potential problem on either long term or short term emergency assistance or on both.

141   3. **UNCERTAIN NEED MET, POTENTIAL PROBLEM**

Uncertain need met, potential problem on either long term or short term emergency assistance or on both.

20   4. **NEED UNMET, CURRENT PROBLEM**

Need unmet, current problem on either long term or short term emergency assistance or on both.

18   OMITTED DUE TO MISSING DATA

FOOD SHOPPING: Operational Definitions for Need Assessment.

     The following definitions are based on the response patterns reported within items 133, 135 and 136. The number of cases that is included in each category is presented in the parentheses.

Q133: How much of a problem is shopping for food and other things you need around the house - is it a big problem, some problem or no problem at all?

Q135: Who usually does the grocery shopping? (GET RELATIONSHIP)

Q136: How often is the food shopping done - would you say it's as often as you'd like, not quite as often as you'd like, or not nearly as often as you'd like?

Number	Categories

1121   **1. NEED MET, NO APPARENT PROBLEM**
    1051   1.1 Food shopping done as often as would like (Q136); and no problem with food shopping (Q133).
      70   1.2 Food shopping done as often as would like (Q136); some problem with food shopping (Q133); and food shopping done by self (Q135).

121   **2. NEED MET, POTENTIAL PROBLEM**
     24   2.1 Food shopping done as often as would like (Q136); some problem with food shopping (Q133); and food shopping done by household member (Q135).
     15   2.2 Food shopping done as often as would like (Q136); some problem with food shopping (Q133); and food shopping done by a person outside of household (Q135).
     24   2.3 Food shopping done not quite as often as would like (Q136); no problem or some problem with food shopping (Q133); and food shopping done by self (Q135).
      5   2.4 Food shopping done not quite as often as would like (Q136); no problem or some problem with food shopping (Q133); and food shopping done by household member (Q135).
      7   2.5 Food shopping done not quite as often as would like (Q136); no problem or some problem with food shopping (Q133); and food shopping done by a person outside of household (Q135).
     46   2.6 Missing data on whether food shopping done as often as would like (Q136); and no problem or some problem with food shopping (Q133).

53   **3. UNCERTAIN NEED MET, POTENTIAL PROBLEM**
     11   3.1 Food shopping done not quite as often as would like (Q136); and big problem with food shopping (Q133).
     10   3.2 Food shopping done not nearly as often as would like (Q136); and no problem or some problem with food shopping (Q133).
     31   3.3 Food shopping done as often as would like (Q136); and big problem with food shopping (Q133).
      1   3.4 Missing data on whether food shopping done as often as would like (Q136); and a big problem with food shopping (Q133).

8   **4. NEED UNMET, CURRENT PROBLEM**
      8   4.1 Food shopping done not nearly as often as would like (Q136); and a big problem with food shopping (Q133).

14   OMITTED DUE TO MISSING DATA

FOOD PREPARATION: Operational Definitions for Need Assessment.

The following definitions are based on the response patterns reported within items 115-117, 126, 127 and 129.
The number of cases that is included in each category is presented in the parentheses.

Q115: Who usually prepares your food? (GET RELATIONSHIP)

Q116: Is there any reason why you could not prepare your own food? (IF YES, SPECIFY)

Q117: At this present time, is getting the food prepared usually a big problem, a little problem, or no problem
at all?

Q126: For a lot of different reasons, people sometimes don't eat the right kinds of food or don't get enough
of the foods they should have.

Do you think there are times when you do not eat enough of the right kinds of foods?

Q127: About how often do you not eat enough of the right kinds of foods - would you say you often don't eat the
right kinds of foods, or sometimes don't eat the right foods, or just once in a while don't eat the right
foods?

Q129: Which of these statements best describes your usual eating pattern:

1. I usually eat regular meals and only rarely snack during the day. (How many regular meals usually -
1, 2, or 3?)

2. I usually eat one regular meal a day and snack quite a bit.

3. I usually skip regular meals and just snack all day long.

Number		Categories
1110		1. NEED MET, NO APPARENT PROBLEM
818		1.1 Usual eating pattern is 3 regular meals (Q129); eats right kinds of food (Q126); and no problem with food preparation (Q117).
169		1.2 Usual eating pattern is 2 regular meals (Q129); eats right kinds of food (Q126); and no problem with food preparation (Q117).
43		1.3 Usual eating pattern is either 2 or 3 meals (Q129); once in a while does not eat right kinds of food (Q127); no problem with food preparation (Q117); Either food preparation done by self (Q115) Or could prepare own meals (Q116).
69		1.4 Usual eating pattern is either 2 or 3 regular meals (Q129); eats right kinds of food (Q126); and little problem with food preparation (Q117).
11		1.5 Usual eating pattern is either 2 or 3 regular meals (Q129); missing data on whether person eats right kinds of food (Q126); and no problem with food preparation (Q117).
125		2. NEED MET, POTENTIAL PROBLEM
19		2.1 Usual eating pattern is either 2 or 3 regular meals (Q129); eats right kinds of food (Q126); and big problem with food preparation (Q117).
4		2.2 Usual eating pattern is either 2 or 3 regular meals (Q129); once in a while does not eat right kinds of food (Q127); no problem with food preparation (Q117); and cannot prepare own meals (Q116).
7		2.3 Usual eating pattern is either 2 or 3 regular meals (Q129); once in a while does not eat right kinds of food (Q127); and little prlblem or big problem with food preparation (Q117).
47		2.4 Usual eating pattern is 1 regular meal (Q129); Either eats right kinds of food (Q126) Or once in a while does not eat right kinds of food (Q127); no problem or little problem with food preparation (Q117); Either food preparation done by self (Q115) Or could prepare own meals (Q116).
34		2.5 Usual eating pattern is either 2 or 3 regular meals (Q129); sometimes does not eat right kinds of food (Q127); and no problem with food preparation (Q117).

11   2.6   Usual eating pattern is either 2 or 3 regular meals (Q129); sometimes does not eat right kinds of food (Q127); and little problem with food preparation (Q117).

3   2.7   Usual eating pattern is either 2 or 3 regular meals (Q129); missing data on whether person eats right kinds of food (Q126); and little problem with food preparation (Q117).

46   3.   <u>UNCERTAIN NEED MET, POTENTIAL PROBLEM</u>

18   3.1   Usual eating pattern is either 2 or 3 regular meals (Q129); often does not eat right kinds of food (Q127); and no problem or little problem with food preparation (Q117).

5   3.2   Usual eating pattern is either 2 or 3 regular meals (Q129); sometimes or often does not eat right kinds of food (Q127); and big problem with food preparation (Q117).

3   3.3   Usual eating pattern is either 2 or 3 regular meals (Q129); missing data on whether person eats right kinds of food (Q126); and big problem with food preparation (Q117).

17   3.4   Usual eating pattern is 1 regular meal (Q129); sometimes or often does not eat right kinds of food (Q127); and no problem or little problem with food preparation (Q117).

3   3.5   Usual eating pattern is 0 regular meals (Q129); eats right kinds of food (Q126); and no problem with food preparation (Q117).

5   4.   <u>NEED UNMET, CURRENT PROBLEM</u>

2   4.1   Usual eating pattern is 1 regular meal (Q129); sometimes or often does not eat right kinds of food (Q127); and big problem with food preparation (Q117).

3   4.2   Usual eating pattern is 0 regular meals (Q129); often does not eat right kinds of food (Q127); and big problem with food preparation (Q117).

31   OMITTED DUE TO MISSING DATA