Why Elders Do Not Follow on Suggestions They Requested?

An Exploratory Study by Care for Elders funded by The City of Houston, Department of Health and Human Services

December 2009- June 2010
Active Participants

- Ilana Reisz, PhD, Health Context, PI
- Gerald Goodman, DrPH, Texas Woman’s University, Co PI
- Esther Steinberg, LCSW, Consultant
- Evelyn Carlson, Director, Access & coordination, CFE
- Jane Bavineau, Senior VP Sheltering Arms, Executive Director, CFE
- Vishnu Nepal, MPH, A.J. Rosario, MD, MPH, & Deborah Banerjee, PhD, MS, City of Houston, Department of Health and Human Services
What was the study about?

- Proportion of vulnerable elders is growing without a solid safety net.
- 2004 study by Dr. Moseley raised alarm about elders whose needs were unmet due to their own inaction.
- 2008 Hurricane Ike raised another concern for vulnerable elders.
- Where are systemic barriers for most vulnerable elders to meet basic needs?
we wanted to know

- are there systemic barriers that stand in the way of vulnerable elders when they attempt to address urgent needs?

- How did vulnerable elders deal with hurricane preparation and its aftermath?

- What can we learn about managing services better for elders in need?
Guiding Questions

- What did elders say about their experiences in trying to get help to resolve basic needs?

- What is the understanding that professional helpers have on addressing the needs of vulnerable elders?

- How did elders prepare for, and live through, Hurricane Ike?
The Sample

all elder callers n=482

Needs Met n=262

Needs not met n=220

Elder Specialist

Case Manager

Inclusion criteria:
Elders whose needs were not met pending their action

n=81 met criteria

No Response N=27 error n=2 refused n=4 Sample n=48

Characteristics:
- age span: 35% 60-64; 45% 65-74
- F/M ratio: 6/1
- African American - 58%
- Latino - 6% & 5 Spanish Only
- Income: 29% under $750/mo and 24% under $1200 /mo
- Living arrange: alone 62%
- Home: low income neighborhoods all over city

Inclusion criteria: Elders whose needs were not met pending their action

n=81 met criteria
Method

- 15 question semi-structured phone interview (consent obtained before interview began)
- Focus group session with Elder Specialists
- Focus Group session with Case Managers
- Debriefing with interviewer
Analysis: 2 types
Quantitative Analysis

• descriptive

- Descriptive Characteristics of participants: geography, gender, income, age, living arrangements, ethnicity

- Types of Expressed Needs

- Categories of Resolution
Qualitative Analysis

- categories of responses
- Observation on emerging themes
- Focus Groups data comparison
- Comparing elder and professional data
some of our findings
Findings: Elders’ view

- frustration with long waiting, phone calls, application processes, people who don’t call back
- aware of only a few resources
- 1/3 complained of rudeness
- Only a few said they need help - confused
- don’t like asking for help
Findings: Elders’ view

- Children/family are not a resource - they are advisors and supporters.
- Often elders are also caregivers for spouses or other disabled family members.
- Most think they are resourceful and able to look for assistance and manage on their own.
Findings: professionals’ views

- Callers have learned to survive in deep poverty.
- Clients are satisfied when most urgent needs are addressed - manage ‘crisis to crisis’.
- Decrease in number of supporting agencies just as number of elders in need is increasing.
Findings: from the professional perspective

- ES & CM: most callers less independent than they believe themselves

- callers cannot manage ‘an overloaded and under-resources system’ - ‘resources in name only’

- there are too many obstacles:
  - Personal - (loss of hearing, memory, or articulation),
  - Technical - complex phone systems;
  - Temporal - long waiting;
  - Logistical - requiring appointments, applications etc.;
  - Cognitive - learning

where resources are
Findings: Hurricane Ike

- One year after ‘ike’ memories are fresh

- Information source - TV

- basic needs preparation for water, non perishables, batteries, taped windows, other supplies (not meds, important papers)

- about 1/3 left before the storm; most fared well during the storm - 3 had damage to home; 1 was traumatized

- The period after the storm was long and difficult; no power for up to 17 days; ran out of supplies; isolated and felt forgotten

- Lessons learned: Most felt safe and would do the same, perhaps prepare better for long run.
Implications
so what can be done?

- 2-1-1 a wonderful system - people who helped were patient and kind ‘angels’ (unsolicited comments)

- Support elder specialists (including CMs) they are vital in keeping elders functioning in the community - the closest we are to a single elder portal to care network

- eligibility criteria and applications could be made easier- ‘universal?’

- more integrity in services: “don’t promise what you cant keep - keep what you promise”
so what can be done?

- increased transparency in agencies where funding runs out
- Use evacuation assistance list as a check up list after the storm
- Fortify & link up neighborhood support networks to check in on isolated elders
- Map support and resource services for better integration of resources
- increase the Flexible Funding Pool (covering most urgent needs)
thank you

Questions? Comments?
Email: jbavineau@careforelders.org
Our Gratitude to the 48 elder participants in Houston who gave their time and told us their stories