

Aging in Place and Addressing Social Isolation



Pulaski County • New River Valley Area Agency on Aging

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Overview

In recent years, the demographic composition of Virginia's rural population has become increasingly older, as the number of retirees increases and younger residents move to more urban areas. Older individuals are attracted to rural Virginia's lower cost of living, lower crime rate, lower taxes, and its high quality of life. An aging population has an increased need for health care services, long-term care, and social services. Communities with an aging population must also consider the need for in-home care, limited mobility accommodations, access to transportation, opportunities for social interaction, public safety and emergency preparedness infrastructure, and access to healthy affordable food.

The ideal situation for most older adults would be to continue living in their homes for as long as possible. However, it is sometimes necessary for people to be in closer proximity to healthcare services as they age. While some are able to afford in-home care or to move into a long term care facility, this is not always the case. Some of Virginia's families live in multi-generational households where family members are able to take care of young children or grandparents.

For aging adults living away from families, social isolation, defined as the lack of social connections, has been well-documented as a major risk factor for a variety of physical and mental conditions. Some studies suggest that the

Grandparents Raising Grandchildren Alone



Rural
44.7%



non-Rural
35.1%

impact of social isolation and loneliness on health and mortality are of the same order of magnitude as risk factors like high blood pressure, obesity, and smoking (1). In rural areas, inadequate broadband and public transportation services often make it more difficult for older people to stay connected to their families and friends.

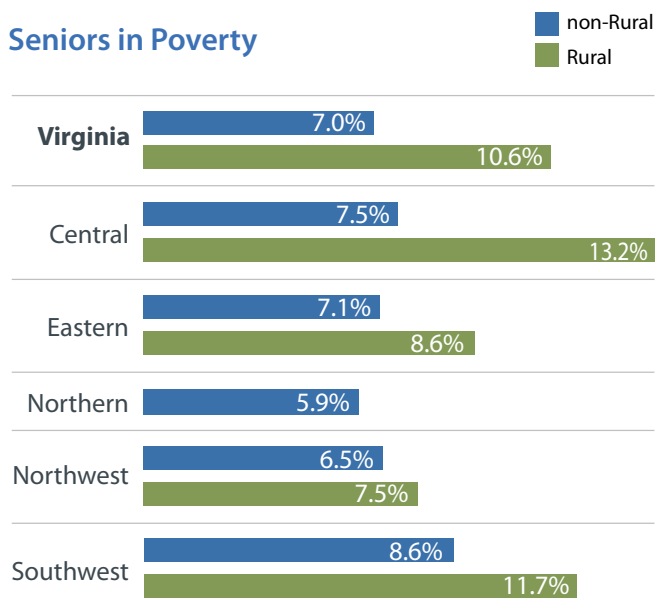
Rural Veterans

Recent studies show that military veterans, especially older veterans, present unique experiences of loneliness and social isolation(2). Nearly a quarter of all veterans in the United States, 4.7 million, return from active military careers to reside in rural communities(3). After returning from service, it is common for veterans to experience difficulty readjusting to civilian life without some of the people they formed close bonds with in the military.



Smyth County • Earl Neikirk

Seniors in Poverty



Source: US Census Bureau, ACS 5-year Estimate, 2018



Blue Ridge Parkway • VA Tourism Library

Leading Practices and Approaches

Whenever possible, examples of leading practices and approaches were taken from rural Virginia communities. Otherwise, examples were gathered from localities with comparable demographic characteristics.

New River Valley Agency on Aging

Need addressed: National and local surveys indicate that almost 90% of older adults want and expect to age in place by remaining in their homes as they get older (4). While most older adults expect to be able to manage changes that might occur in their health, wellbeing, and finances, approximately 70% will require help with their care at some point, for an average of three years(4).

Approach: The New River Valley Agency on Aging exists to support and enhance the lives of older adults, their families, and caregivers through advocacy, information, and services(4). They do this by offering programs and services that help facilitate aging in place such as care coordination, congregate meals, elder abuse prevention, home delivered meals, homemaker services, and medical transportation. In addition to these programs and services, the agency has held Aging in Place workshops and launched an Aging in Place website containing a workbook, videos, a facilitation guide, and resource listings to help individuals create a plan to age in place.

Outcome(s): By partnering with community organizations and with the help of donors, the agency is able to provide information and services that allow older adults in rural Virginia to maintain independence and remain in their homes for as long as possible. Many of the challenges commonly faced by older adults including limited access to health care, lack of transportation, and social isolation are addressed by the agency's many programs and dedicated staff.

Bay Aging (Urbanna, Virginia)

Need addressed: Bay Aging exists to provide dignity and resources to older adults so that they may live independently in their communities.

Approach: Bay Aging offers accessible and affordable transportation, housing, and healthy community living services and programs. With an emphasis on personal choice, Bay Aging offers a range of programs and services to meet the needs of everyone they serve.

Outcome(s): Bay Aging is known for its ability to collaborate and form partnerships with federal, state, and local governments, community and civic groups, faith communities, and businesses. Their many partnerships along with a dedication to innovation and leadership allows them to serve a large population of people with a wide variety of wants and needs.

Community Paramedicine/Mobile Integrated Healthcare (CP-MIH) model

Need addressed: Due to a lack of access to primary care, some rural patients rely on 911 and emergency medical services (EMS) to receive healthcare even in non-emergency situations (5). The use of 911 for non-emergency situations is an inefficient use of emergency resources that can have negative and potentially fatal consequences on those in need of immediate medical attention. This issue is particularly common among the elderly population.

Approach: Community Paramedicine/Mobile Integrated Healthcare (CP-MIH) is a relatively new and evolving healthcare model that improves access to healthcare for underserved populations including older adults in rural communities (5). The model allows paramedics and emergency medical technicians (EMTs) to operate in expanded roles by assisting with public health, primary

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health care and preventive services, aiming to improve access to care without duplicating existing services (5).

Outcome(s): The CP-MIH model creates a system that benefits both rural patients and community paramedics alike by allowing for resources to be allocated in a more efficient and proactive way (5). With this model community paramedics can provide care in non-emergency situations without denying immediate care to those in critical or life threatening conditions.

Senior Farmers' Market Nutrition Program (SFMNP) - Farm Market Fresh

Need addressed: To improve seniors' access to nutritious, locally-grown, fresh produce.

Approach: The Virginia Department for Aging and Rehabilitative Services-Office for Aging Services (DARS-OAS) partners with the Virginia Department of Agriculture and Consumer Services (VDACS), ten local Area Agencies on Aging (AAA), and one city government to operate the program which is funded by the US Department of Agriculture, Food and Nutrition Service(6). Seniors who are 60 years or older and meet the program's locality and income requirements are able to apply to participate in the program each year. Participants receive nine 5-dollar checks each growing season that can be spent on fresh produce at participating farmers' market vendors (6).

Outcome(s): The Virginia's Farm Market Fresh program helps eligible seniors get fresh, tasty, and nutritious locally-grown fruit, vegetables, and cut herbs while also supporting local farmers and farmers markets in Virginia (6).

Older Americans Congregate Nutrition Program

Need addressed: The purpose of the Older Americans Congregate Nutrition Program is to reduce hunger and food insecurity among older individuals, promote socialization of older individuals, promote the health and well-being of older individuals, and delay adverse health conditions for older individuals(7).

Approach: The program targets adults aged 60 and older who are in greatest social and economic need, with particular attention to individuals who are low income, part of a minority population, in rural communities, with limited English proficiency, or at risk of institutional care (7). Through the program older adults receive meals and nutrition services in group settings.



Amelia County • VDH SORH Staff

Outcome(s): The program provides not only meals that contribute to the overall health and wellbeing of participants but also offers opportunities for social engagement, information on healthy aging, and meaningful volunteer roles(7).

Opportunities for Growth

1. Technology-based Interventions

- Though not appropriate for all seniors, telehealth has been used internationally to target social isolation and to enhance communication and connectedness, particularly among those with geographical or mobility barriers. Further exploration is needed to determine how to effectively leverage technology to address social isolation among seniors.

2. Infrastructure Investing

- Community-based interventions that consider healthy aging in place can improve quality of life and prevent unnecessary costs for communities. A promising intervention is to build or adapt community infrastructure in ways that support healthy lifestyles among older adults. For instance, by increasing the number of parks, grocery stores, and health clinics in neighborhoods where older adults live, relaxes the burden of physical mobility constraints. Improving transportation systems provides safe transportation alternatives for older adults and people with disabilities. These types of investments are necessary not only to promote the general health of aging individuals.

3. Structural Interventions

- Supporting the employment of seniors can promote inclusivity and help change societal attitudes towards seniors.

