Community of Care Baseline Survey: 2003

1. Study Objectives

This study is aimed at evaluating baseline knowledge and attitudes pertaining to services, funding, and perceptions of community responsibility for the care of seniors and disabled persons. A second study, using the same survey instrument, will be conducted at the end of the Community of Care grant period to assess changes in the public’s knowledge and attitudes.

2. Methodology

The survey instrument was implemented in November 2003 by phone and designed to assess rural Cass County, North Dakota residents' level of knowledge about general services for seniors and disabled persons, perceptions of care, and the characteristics of those who responded.

A list of phone numbers was obtained from InfoUSA naming residents of the rural Cass County communities of Alice, Amenia, Argusville, Arthur, Ayr, Buffalo, Casselton, Davenport, Erie, Gardner, Grandin, Hunter, Kindred, Leonard, Mapleton, Page, Tower City, and Wheatland. A total of 300 households were successfully contacted and the surveys were analyzed for this Community of Care Baseline Survey: 2003.

3. Summary of Findings

According to the U.S. Census Bureau, the elderly population in most of rural Cass County, North Dakota, is increasing significantly. However, the availability of services to seniors and disabled persons has not yet responded to this growth. The Cass County Community of Care is a project designed by the Good Samaritan Society to establish a permanent community-based system of care. Their mission is to ensure access to services for all seniors and disabled persons throughout rural Cass County. This system of care, if successful in rural Cass County, North Dakota, will be implemented throughout the United States where Good Samaritan Centers are located. In an effort to assist in determining success, a survey of rural Cass County residents was conducted to provide a baseline of knowledge and perceptions of long-term care. The results of that survey are the focus of this report. A second study will be conducted following the application of Community of Care in rural Cass County, North Dakota, to assess changes in rural Cass County residents’ knowledge and perceptions.

A. Level of Knowledge

- A majority of respondents do have at least some knowledge about senior and disabled services such as housing, outreach, wellness/health promotion, ambulatory care, home care, acute care, and extended care. Knowledge of all services are higher among respondents who are older.

- Respondents indicate higher levels of knowledge about housing, outreach, and funding options if they care for a disabled person or a senior.

- Respondents who indicate no concern for their long-term care were more likely to indicate no current knowledge about the services of outreach, wellness/health promotion, ambulatory care, and acute care.

- However, 40 percent of respondents have no current knowledge about funding options for services for seniors and disabled persons.

- The top four funding options the majority of respondents perceive as important for most senior and disabled services are government aid, private assets, insurance, and social services.
At least one in five respondents are unsure whether acute care, ambulatory care, outreach, and wellness/health promotion services are available in rural Cass County.

More than three-fourths of respondents consider services offered in urban Cass County, namely Fargo and West Fargo, as feasible and convenient.

B. **Perceptions of Care**

Nearly two-thirds of respondents are concerned about the long-term care of family and friends. On a scale of one to five, with five being “very concerned,” the average level of concern respondents have about the long-term care of others is 3.79, indicating much concern.

Respondents indicate less concern about their own long-term care with a mean of 3.10, which still suggests a moderate amount of concern. The majority of respondents who are concerned for the long-term care of others are between the ages of 20 to 69 years of age. The majority of respondents with an income of less than $20,000 indicate they are not concerned about others’ long-term care. Concerning their own long-term care, respondents are less likely to be concerned if they are between the ages of 20 to 29, while those 50 to 79 indicate higher concern.

More than half of respondents indicate that when the time comes they would like their long-term care needs to be met by professional home care. One in five respondents also prefers an informal means of caregiving. Approximately 16 percent indicate a nursing home.

Forty percent of respondents indicate ensuring access to services for seniors and disabled persons to be a community responsibility, one-third believe it to be a private responsibility, and one in five respondents perceives it to be both.

Approximately 71 percent of respondents perceive that rural communities in their area are at least somewhat willing to embrace a shared responsibility concept of senior and disabled care.

C. **Characteristics of Rural Residents**

Approximately 83 percent of respondents spend some time participating in community activities. One in five spends 11 hours or more each month. Of those who do not participate, almost half of respondents indicate an annual household income of less than $20,000.

Nearly two-thirds of respondents indicate they have lived in rural Cass County for more than 15 years, and 85 percent say they do not plan to move out of rural Cass County in the next five years.

Thirteen percent of respondents care for a senior or disabled person and 41 percent are responsible for a child under the age of 18.

One-third of respondents report an annual household income between $30,001 and $60,000. One-fourth of respondents did not report their income. Income varied by respondents’ age, with those 30 to 59 years of age indicating a household income of more than $40,000 per year. One-third of respondents 60 years of age and older indicate less than $20,000 per year.

Respondents are fairly evenly distributed by age. Half of respondents are 50 years or older and half are younger than 50 years of age.

Two-thirds of respondents are female.