



#### RESEARCH ON VILLAGES





## A CONSUMER-DRIVEN APPROACH TO AGING IN COMMUNITY



CALIFORNIA COUNCIL ON GERONTOLOGY AND GERIATRICS

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### What is a Village?

- Aging in Place (Village members continue to live in their own homes)
- Grassroots & Consumer Directed (developed and governed by older adults)
- Membership model (financed by member dues rather than fee for service)
- Multi-tiered Service Model
  - Staff coordinate and provide services
  - Volunteers provide admin and direct support to members
  - Referral to "vetted" preferred providers
- Promote Civic Engagement: members help other members
- Focus on Social Engagement (parties, classes, group activities)
- Collective bargaining for services (preferred providers offer discounts)

### Village Social Movement

Past caregiving experience

"I don't want what happened to my mom happening to me."

Aging in place

"I don't want to move out of my own home."

Independence from family

"I don't want to be a burden to my children."

### UC Berkeley Village Research 2009 - 2016

- Study of 7 Villages in California (The Archstone Foundation)
  - Village development, service delivery, sustainability
  - Longitudinal follow up with CA Village members (n=700)
- National Survey of Village organizations
  - Survey of 22 Villages in 2010 (The SCAN Foundation)
  - Survey of 69 Villages in 2012 (Silberman Foundation)
  - Survey of 115 Villages in 2016 (Mather Lifeways)
- National Survey of Village members (Retirement Research Foundation)
  - Surveyed 1,756 Village members to measure perceived impacts

## Survey of US Villages in 2016

- Survey of 115 operational Villages in 2016
  - Village member characteristics
  - Village organizational structure
  - Human resources
  - Financial resources
  - Challenges and best practices

 Reporting period 2015 calendar year, or January 1, 2016

## Village Organizational Characteristics in 2016

- 85% freestanding
- 15% agency-based (down from 23% in 2012)
  - Most common "lead" agencies
    - Social Service Agencies
    - Senior housing providers
    - Government agencies
    - Neighborhood Associations

## Geographic Locations of Villages

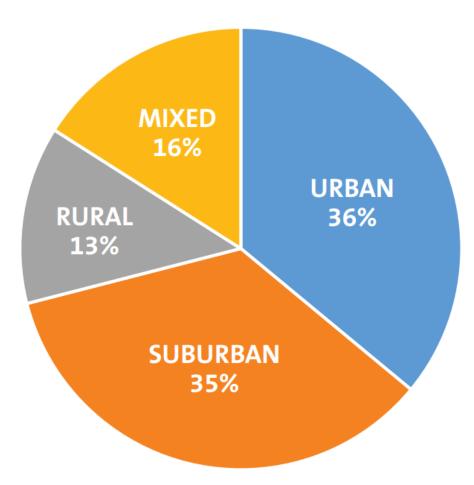


Figure 1. Geographic locations of Villages

## Village Membership

- Average # of members in 2016= 146
  - increased from 134 in 2012
- Average # of new members in 2015 = 36
- Average individual dues = \$431 (\$10 \$900)
- Average household dues= \$601 (\$15 \$1,309)
- 47% of Villages have "tiered" memberships
  - No services
  - Social memberships
- 72% offer discounted memberships

## Village Funding

- Average total annual revenue = \$115,085
- 44% from member dues
- 22% from individual donations
- 12% from private foundations
- 9% from fundraising events
- 6% from business/corporate donations
- 5% from government grants/contracts
- 43% of Villages have an endowment fund with an average balance of \$101,176
  - up from 23% in 2012

## Village Staffing and Volunteers

#### Staffing

- 80% of Villages had paid staff
- Average of 2.1 paid staff members (1-7)
- Average FTE 1.4 (0.1-5)
- Ratio of 80 Village members to each paid staff person

#### Volunteers

- Average number of volunteers = 82
- Increased from 42 volunteers in 2012
- Ratio of 1.9 members to each volunteer

## Services offered by Village Staff or Volunteers

- 95% host Social Events
- 94% offer Transportation Services
- 90% offer Classes or Educational Events
- 90% offer Companionship Services
- 88% offer Technology Assistance
- 87% offer Shopping
- 84% offer Information and Referral Services
- 83% offer Home Repair or Modification
- 79% offer Health Promotion Programs

## Services Referred to "Preferred Providers"

## VILLAGES REFERRING SERVICES TO OUTSIDE PROVIDERS

Home Modification or Home Safety Assessments	61%
Home Care/Personal Care Providers	58%
Care Coordination or Social Services	50%
Health Promotion Programs	39%
Gardening Services	37%
Technological Assistance	31%

### Village Services 2012 vs. 2016

- Compared to 2012, Villages in 2016 were more likely to offer:
  - Health promotion programs
  - Housekeeping/ home repair
  - Technological assistance
  - Discounted memberships, discounted services
  - Less likely to offer coordinating health care or social services
- Since 2012, Villages are more likely to have formal collaborations with other organizations
  - Increased from <1 to an average of 6 collaborations in 2016</li>
  - Partners include Social Service Agencies, Hospitals/Health Clinics, Home Health Agencies, Religious Institutions and Government Agencies, Senior Living Organizations
- A third of Villages have policies limiting services or memberships in some ways

## Survey of 1,753 Village members

#### Independent Variables

- Demographics
- Health and functional status
- Village involvement & service use

#### Dependent Variables: Perceived impacts of Village

- Health and health care access
- Well-being
- Social Engagement
- Civic engagement
- Confidence aging in place
- Analysis: Logistic Regression to identify predictors of perceived impacts

# Characteristics of Village Members (N=1,753)

#### Age

- 42% 74 and younger
- 37% 75-84 years
- 22% 85 or older
- **Race** (96% White)
- Gender (72% Female)
- Education
  - 18% no college degree
  - 25% college degree
  - 58% graduate degree
- Household composition (45% live alone)
- **Income** (74% \$50,000 or higher per year)
- Self-rated health status (Very good or excellent 58%; good 28%; poor or fair 14%

## Member Involvement in Village

#### Years since joined Village

- Less than 1 year 6%
- 1-2 years 49%
- 3-4 years 26%
- 5 or more years 19%

#### 46% Volunteered for Village in past year

#### Services used in the past year

- 67% Village-sponsored social or educational events
- 35% Called the Village for information, referral or advice
- 27% Transportation services
- 22% Technology assistance services

## Village Impact on Social and Civic Engagement

- Because of your membership in the Village, would you say...
  - 56% increased sense of connection to other people
  - 55% increased ability to count on other people
  - 30% get together more often with friends and neighbors
  - 29% attend meetings of organized groups more often
  - 27% do volunteer work more often

# Predictors of Improved Social and Civic Engagement

- Who is more likely to report increases in social/civic engagement?
  - Longer Village membership (5 or more years)
  - Men
  - Lower education (less than college)
  - Live alone
  - Member volunteers
  - Members who used Village services (transporation, technology assitance, Village-sponsored events, and info & referral)

## Predictors of Improved Health and Health Care Access

- Because of your membership in the Village, would you say...
  - 8% physical health is better
    - Women
    - Those with lower education (less then college)
    - Living alone
    - Used Village transportation
    - Called village information and referral (preferred provider) in the last year
  - 17% more likely to get the medical care I need when I need it
    - Those in fair or poor health
    - Living alone
    - Those who used Village transportation
    - Those who used Village technology assistance

### Village Impact on Quality of Life

- 47% say their quality of life is better because of the Village
  - Younger members (under 75)
  - Lower education (less then college)
  - Longer Village membership (5 or more years)
  - Member volunteers
  - Those who used services (transportation, technology assistance, Villagesponsored events and referral)

### Confidence and Ability to Age in Place

- Because of your membership in the Village, would you say...
  - 50% improved ability to get the help you need to live in your current residence
    - Used transportation services
    - Used Information and referral services
  - 29% improved ability to take care of your home
    - Used Information and Referral
  - 20% easier getting to places you need or want to go
    - Those with lower education (less than college degree)
    - Used transportation and technology services

## Who perceives the most benefit from Village membership?

- Villages impact different people in different ways
- Using Village services impacts members in all ways, health, well being, and social connections, and increased confidence/ability to age in place.
- Some evidence that those who are the most vulnerable (women, living alone, lower education, in poor health) are perceiving positive health impacts.
- Younger members, men, those who volunteer seeing more impacts in social and civic engagement.

#### For further information:

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To see UC publications on Village Research

http://socialwelfare.berkeley.edu/casasrecent-publications