Aging with Dignity and Independence

What's the Problem?
The face of American society is changing with people living longer than ever before. Yet right now our nation lacks a system of care and support that enables older adults to age with dignity, independence and choice in the face of increasing health and daily needs. Vulnerable older adults need more affordable and accessible options for receiving care and support in their homes so that they don’t have to end up in a nursing home. Fulfilling this need will take unprecedented levels of public involvement, including being engaged in our daily lives, our neighborhoods, our communities and at the state and federal levels.

Aging with dignity and independence is the ability to live life to its fullest in the place you call home, regardless of your age, health or ability. The largest generation in American history - baby boomers - has begun to turn 65. Twenty years from now this age group will double, reaching nearly 20 percent of the population. The American senior of tomorrow will be better educated, experience lower levels of poverty, live in a more diverse society and have a longer life expectancy than previous generations.

Who’s at Risk?
Aging with dignity and independence is the ability to live life to its fullest in the place you call home, regardless of your age, health or ability. This ideal is important because many Americans have loved ones who are aging, whether it is a spouse, neighbor, parent or other family member. As a result, those closest to us may soon need some assistance and care in order to continue to live in their communities and among friends and family. A little-known reality is that half of Americans reaching 65 will need high levels of costly help with daily activities.

Today, there are nearly 67 million people in America providing assistance to a spouse, parent, relative, or even a neighbor. One-quarter of family caregivers are Millennials. And, every day for the next 18 years, about 8,000 baby boomers will turn 65. As individuals grow older, they are more likely to need assistance that will enable them to live with dignity and independence in their homes and communities. The implications of this change are being felt in families and communities across the nation.

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Can It Be Prevented?
Whether you’re over the age of 65 or have a loved one who is, there are simple, inexpensive things you can do – today – to help plan for aging with dignity, choice and independence.

The first step is to build a plan that preserves your choices, dignity and independence, even when you need some help to do so. The second step is to start conversations with the people around you—family and friends, health care and social service providers, legal and financial experts and others—about what you want and what is important to you in case the need arises.

It is also important that your doctor knows as much as possible about your current health situation. This way, if your health needs change over time, you and your doctor can tailor your care to help you live safe and well. The best way to start these conversations is to ask questions. Your doctor has a responsibility to provide you with answers in a way that you can understand. Be sure to write your questions down before your doctor’s visit and take them with you. You may want to invite a loved one to join you at the visit so that s/he can write down the doctor’s answers while you listen.

The Bottom Line
Talk to your family about what’s important to you as you age.

Make a list of all your medications and keep it up to date.

Walk through your home to ensure that it’s both safe and comfortable.

Visit www.eldercare.gov to find out what resources are in your community.

Find an activity that is new or fun for you – and get active.

Make a list of your support team – people in your life who can assist you.

Make a list of the things you need help with and ask for help if you need it.

Review your finances – are you prepared for the future costs of your own care?

Talk to your doctor about any changes in your health.

Find out where your local senior center is – and pay a visit.

Case Example
Matt, a 60-year-old retired CEO, spends his days reading and watching TV. At a recent physical he learns that his current health problems could progress and escalate. All throughout his career Matt put money into a retirement savings program to ensure he would have enough money to live on once he stopped working. Unfortunately, he did not account for the fact that he may need long-term care and the additional costs that could bring.
He begins talking to his providers and doing more research and learns that he should designate a caregiver on his medical chart who should be involved in all discussions about care, and that he will need to work to coordinate care across what will likely be multiple health providers. He also learns more about his health plan and learns that most health plans do not cover long-term care from a licensed home health care professional or at a nursing home. He starts figuring out how much more he may need than what he currently has in retirement and explores moving into a smaller house and figuring out other ways to save money. He also explores going back to work as he is currently active, healthy and able to work.

Related Links

- Federal Administration for Community Living: Profile of Older Americans: http://www.aoa.acl.gov/Aging_Statistics/Profile/index.aspx
- Kaiser Health News reporter webinar on Who are America’s Caregivers?: http://khn.org/news/who-are-americas-caregivers-nearly-a-quarter-are-millennials/
- The SCAN Foundation Aging Well: http://www.thescanfoundation.org/aging-well
- The SCAN Foundation’s Long-Term Care Financing Initiative: http://www.thescanfoundation.org/ltc-financing-initiative