Introduction

The general population of the United States is aging, baby boomers began entering the era of old age in 2011. As Americans age there is a greater likelihood of a disability or dependence on others, along with the elderly population living longer due to medical advancements. It is believed that Baby Boomers behavior at age 50 will impact their quality of life and how they feel at 80. As the elderly population ages in place the need for assistance and supportive services will be provided by mainly their children and other relatives, with some additional assistance obtained from community based programs. Family is the basic institution providing informal care to the elderly and disabled individuals (Sierakowska, Doroszkiewicz, Markowska, Lewko & Krajewska-Kulak, 2014).

The Sussex County Department of Human Services, Division of Senior Services is mandated to be the responsible entity for coordinating programs that impact the elderly in the County. The Division of Senior Services was established over 40 years ago, to meet the requirements mandated for the Area Agencies on Aging under the Older American’s Act of 1965, as amended. In 2012 it became the lead county agency for the local ADRC (Aging & Disability Resource Connection) that links older adults and the disabled to long term services and supports. The Division of Senior Services contracts with various agencies to offer services to older adults, the disabled and their caregivers. In order to facilitate the planning process for required programs and services that serve the elderly, the Division of Senior Services is mandated to complete a needs assessment process every three years. This process consists of survey’s that are completed by seniors, numerous focus groups throughout the county, and data provided by creditable resources such as the New Jersey Elder Economic Security Index.

The mission of the Sussex County Division of Senior Services is to empower older individuals, those 18 and older who are disabled, and/or their caregivers to choose from a coordinated system of services that enable them to live independently in their homes and in their communities while enjoying a dignified quality of life. To meet the mission, older citizens and those with disabilities are provided with direct services, referral services, and information needed to help them remain in their community, and to lead independent lives as long as possible. The Division also implements numerous health and wellness programs to enhance the overall well-being of seniors and individuals with disabilities. It is an ongoing challenge to assure services are being delivered and that the needs of all senior age groups are met.

In 2015, the Division of Senior Services conducted a needs assessment designed to maximize service utilization and enhance program development. Respondents were not assumed to represent the entire Sussex County senior population; however, their responses had the potential to establish how prospective service consumers perceive their needs and their likelihood of utilizing programs. The information gathered provided insight on the population’s characteristics, problems, and expressed needs.
Methodology

The Sussex County Division of Senior Services implemented the needs assessment between February 2015 and June 2015. The process utilized focus groups, surveys and secondary data such as the U.S. Census and the NJ Elder Economic Security Index (2012) to identify the needs of Sussex County seniors 60+ and their caregivers. The results of the assessment will be used to assist the Division in prioritizing their service delivery for 2016-2018.

Approximately 1,800 surveys were distributed throughout Sussex County. Surveys were made available through senior clubs and groups, nutrition sites, senior programs; such as the State Health insurance Program (SHIP), events sponsored by the Division of Senior Services, wellness programs, the Internet, Skylands Ride (Sussex County Transit), and various other providers who serve seniors in Sussex County. In an attempt to reach the more vulnerable and isolated seniors, the surveys were also distributed with home delivered meals and to clients receiving certified home health aide services. Press releases were also published in the local newspaper, the Sussex County Senior Times and requests were made via phone or email to obtain a copy of the assessment. The questionnaire was anonymous unless the individual requested to be contacted for additional information and services. The assessments were self administered and collected between January 1 and June 15, 2015. Quantitative methods were used in order to emphasize precise, objective, and generalizable findings. The response rate was 28.08% percent; out of approximately 1,800 surveys distributed, 490 were returned. The data was compiled using an excel spreadsheet, with totals being compiled into applicable charts to explain the observations through numerical representation. Each survey was given an identification number for recording and analytic purposes. No data from special interest and/or advocacy groups was used in the surveys.

During the months of March through May nine individual focus groups were administered to over 470 seniors at various locations throughout Sussex County. Each group was asked the same set of questions which included several questions in the area of housing, transportation, health, recreation/social/support, and finances/employment. While each group was diverse and unique a common theme emerged in each area of the questions presented.

Results

Demographics

Located in the Northern most part of New Jersey, Sussex County covers 521 square miles and ranks 20th in population density among the 21 counties in the State with only 278 people per square mile. It is one of the five minimum funded counties through the State Department of Human Services, Division of Aging Services. Its rural surroundings has an estimated population (2013) of 145,740 citizens, of which approximately 30,482 are Senior Citizens (ages 60 – 100+), 21 percent of the population as per the U.S
Census Bureau. While the overall County population is decreasing, the population 60+ is increasing. The fastest growing population is the 60+ group. The American Community Survey 2009-2013, identifies 4.2 percent of individuals over 65 living at or below the federal poverty rate for those in family households. However, 15.2 percent of people over 65 living alone or with an unrelated individual live below the federal poverty rate. The overall population in Sussex County is made up of 50.3 percent females and 49.7 percent males compared to the survey respondents who were approximately 74 percent female and 23 percent male.

The Division of Senior Services provides assistance to those 60 years of age and older, or those who are 18 and older with a disability. Seniors account for an estimated 21 percent of the population, or 30,482 individuals in Sussex County, which is a 4 percent increase when compared to 2012. Respondents from the survey ranged from 60 years of age to the age of 100. The median age of the respondents was 75.03, which is approximately the same when compared to 2012 survey results.
**Ethnicity**

The population of Sussex County is not racially diverse; however the overall minority population continues to increase since the last census data bringing it to approximately 9 percent. The majority of respondents (80 percent) were Caucasian, which coincides with the total population of Sussex County, which is 94.8 percent Caucasian. Only 1 percent of the individuals who completed the surveys were African American individuals, while 1 percent were from the Latino origin, and 1 percent was of Asian descent. Overall, when compared to the 2012 survey results, the number of African American individuals decreased by 4 percent, along with the Latino population response decreasing by 1 percent and the Asian response remained the same.

**Income**

According to the Elder Economic Security Standard Index for New Jersey social security is the sole source of income for 25 percent of the older adults in New Jersey, in which the majority are women. Women often earned a smaller income than men during their working years and now makeup a majority of the aging population that is living in poverty, additional attention is needed to address their needs. The average annual Social Security payment for a single woman in New Jersey for 2012 is $15,191 and $19,393 for a single man, which only provides 38 percent to 70 percent of what an elder needs to be economically secure (The Elder Economic Security Standard Index for New Jersey, 2012). About 19 percent of respondents reported having an annual income of less than $15,000 and 26 percent reported having income of less than $24,999 per year. The Social Security Administration (SSA) states the average social security payment for 2012 was $15,528 per person and $24,587 for a couple, while the mean total retirement income for New Jersey was $19,122 for men and $14,848 for women. The Federal Poverty Level for 2014 was $11,670 for an individual or $15,730 for a couple. Social security payments are often higher than the federal poverty level, but not
enough to make ends meet. As a result many older people are ineligible for income support programs that might help them to bridge the income gap.

![INCOME Bar Chart]

Focus Group Response

![DO YOU HAVE ENOUGH INCOME TO MEET YOUR NEEDS Pie Chart]

**Living Situation**

Of the 24 municipalities in Sussex County, a little more than half of the surveys (59 percent) were from Franklin, Montague, Newton, Sparta, and Vernon, which remained consistent with the 2012 assessment results. Most respondents either lived alone (52 percent), or lived with their spouse or life partner (30 percent). The remaining respondents (12 percent) either lived with a child, or no response was provided. Overall, the percentages of the key municipalities and the living situations of the seniors remained level when compared to the 2009 and 2012 survey.
Seniors not only need a sufficient income to support housing and medical costs but also need to have money to purchase food and clothing. Based on information from the 2012 Elder Economic Security Index the average single senior needs $243 a month (which is a $9 increase from 2008) to cover food expenses. Based on the respondents which responded to the survey only 15 percent sometimes had a problem with having enough money for food, shelter or clothing and 7 percent frequently had a problem with the basic needs, this remained consistent when compared to the 2012 survey results. Overall 76 percent had no problems with meeting the expenses for basic needs, which was also a 1 percent decrease when compared to the 2012 survey results.

The ability to maintain heating and other utility expenses continues to add to the challenge of maintaining the senior’s financial independence and stability. According to the seniors who responded to this survey only 14 percent reported that they sometimes had a problem with the ability to pay for heat and other utilities, which was a 1 percent decrease from the 2012 survey results and a 3 percent decrease from the 2009 survey results. Only 6 percent reported that they frequently had a problem with these
expenses, which was a 1 percent decrease when compared to 2012 survey results. Heating and fuel costs was not mentioned as a concern in any of the focus groups that were conducted, whereas in 2012 it was a strong concern.

Over half of the seniors that participated in the focus groups stated that they had enough income to meet their needs and were able to maintain their homes (over 70 percent). Only 5 percent were employed and 1 percent were employed because they had to be employed. Overall the economic situation of seniors in Sussex County appeared to be better when compared to the 2012 survey results and focus group responses.

**Housing**

Over half (65 percent) reported owning their own home and under a quarter (15 percent) reported renting a home or an apartment. Overall home ownership continued to increase by 8 percent when compared to the 2012 survey results, and a total of 18 percent when compared to the 2009 survey results, while renting decreased by 1 percent from the 2012 results. While affordable housing for all seniors was reported to be the top priority during the focus groups that were presented, only 15 percent of the respondents of the survey reported that they live in subsidized housing, which is approximately a 6 percent decrease when compared to the survey results from 2012. The focus group participants also reported (84 percent) that more affordable housing options are needed in Sussex County and most of the housing options that are currently available are too expensive for most seniors.

The Elder Economic Index measures the income that New Jersey seniors need to maintain independence and meet basic living expenses. The index will vary based on the household size, geographic area, housing arrangements and health status. The Elder Index uses an income measure that reflects the actual expenses for basic needs of older adults, in contrast to the outdated and outmoded federal poverty level, which is a measure of abject poverty and deprivation.
According to the 2012 Elder Economic Security Standard Index for Sussex County the average senior homeowner needs $779 per month to maintain a home without a mortgage (which was a $23. increase from 2008) and $1,703 to maintain a home with a mortgage (which was a $198. increase from 2008). The average senior renter needs $1,079 per month to maintain a one bedroom housing unit. Seniors in New Jersey cannot meet their basic living expenses whether they live at the Federal Poverty Level, or at the level of the average Social Security benefit. This living situation is true of seniors whether they rent or own a home. The Elder Indexes are significantly higher in Sussex County compared to the common index benchmarks.

The respondents (65 percent) that reported they own their own home are faced with the challenge of high property taxes, maintenance issues and energy costs. The Elder Economic Index (2012) reports that property taxes are high in New Jersey, which raises concern for low-income senior citizens on fixed incomes who are trying to maintain their independence in the community. Tax relief programs such as the Homestead Rebate, the Property Tax Reimbursement (Senior Freeze), Property Tax Deduction/Credit and Annual Property Tax Deduction for Senior Citizens are a few programs that are available to assist with offsetting the high cost of property taxes. Some of the participants of the focus groups also stated that they are not able to get enough money from the sale of their house in order to relocate or move to smaller housing options.

Despite the income levels of the seniors who participated in this survey only 6 percent of the respondents sometimes have an issue with obtaining affordable housing and 2 percent frequently have a problem with obtaining affordable housing. Overall 80 percent do not have a problem with affordable housing, or obtaining affordable housing is not applicable. When compared to the 2012 survey results, the number of seniors who do not have a problem with affordable housing decreased by 1 percent in 2015 and combined with the decrease in 2012 the overall decrease is 11 percent. Those that sometimes have an issue with obtaining affordable housing increased by 1 percent with the 2015 survey, compared to a 4 percent increase with the 2012 survey results.
Obtaining Affordable Housing

Affordable housing was an issue that was a common theme in most of the focus groups specifically there was an overwhelming need for affordable senior housing in Sussex County. Ninety-three percent of the focus group participants have not made alternative housing arrangements for when or if they could no longer maintain their current home. According to the 2012 Elder Economic Security Standard Index housing and health care have the greatest impact for seniors in regard to economic security. Housing costs puts a heavy burden on many New Jersey seniors, which represents as much as half of their total expenses, followed by expenses for good health care.

Focus Group Response
Healthcare and Seniors

The cost of healthcare can impact the overall well-being of seniors in Sussex County, which includes the purchase of supplemental health and prescription coverage through Medicare. The ability to purchase supplemental health and prescription drug coverage through Medicare allows seniors critical protection against high medical and prescription drug costs. Older adults who are in good health incur the health care costs that include insurance premiums plus co-pays, deductibles, fees and other out-of-pocket expenses in order to be protected against the risk of high medical and prescription costs. Senior couples can not purchase supplemental health insurance through a “family plan”; rather they must purchase coverage individually. According to the Elder Economic Security Standard Index the average health care costs for a senior in good health is $442 per month for a single person and $884 for a couple, which is a $28.00 increase per person when compared to 2012 survey.

Based on the survey responses from the Sussex County seniors 15 percent sometimes have a problem keeping up with medical cost, which is 4 percent less when compared to the 2012 results and overall a 5 percent decrease when compared to the 2009 survey results. Only 7 percent of the respondents frequently have a problem keeping up with their medical costs, which is 1 percent less than the 2012 survey and overall a 2 percent decrease when compared to the 2009 survey results. Overall 71 percent reported no problem, or it is not applicable, which was a 2 percent increase from the 2012 survey results and 4 percent decrease from the 2009 survey results.

Approximately 8 percent of the respondents reported that they frequently had problems obtaining adequate health insurance and 10 percent of the respondents sometimes had a problem obtaining adequate health insurance, this was a significant increase from the 2012 survey results where only 1 percent reported that they frequently had a problem and 1 percent stated they sometimes had a problem. The remaining respondents (76
percent) reported that adequate health insurance was not a problem, which was a 10 percent decrease from the 2012 survey results. A large majority of those that attended the focus groups also felt that adequate health insurance was not an issue for them as long as there doctors accepted Medicare or their supplemental coverage and they could get the medical care that they required. A large percentage of the participants expressed a concern regarding the high costs of supplemental insurance and the lack of coverage for dental, vision and hearing aid coverage. The focus group participants also voiced a concern for transportation out of county to medical specialist and doctors.

![Having Adequate Health Insurance Pie Chart]

**Focus Group Response**

![Do You Have Adequate Health Insurance Bar Chart]
A major contributing factor to adequate health care includes prescription drug coverage. The majority of the respondents (87 percent) do not have a problem with their prescription drug plan, which was 1 percent decrease from the 2012 survey. Less than 5 percent of respondents reported that they sometimes have a problem with their prescription drug plan and less than 1 percent frequently have a problem with their prescription drug plan. Overall, over 85 percent of the survey respondents have the ability to fill and maintain prescribed medications. A large majority of those that attended the focus groups also had the ability to obtain prescription medications. Many of those that attended the focus groups stated they would not be able to afford prescription drugs without the assistance of PAAD (Pharmaceutical Assistance for the Aged and Disabled). Some of the participants in the focus groups were not able to get prescriptions filled due to the high cost of the prescription, especially if the formularies changed during the year under the Medicare Coverage D Prescription Program, or their medication changed. Transportation to pick-up the prescriptions was also indicated as a problem at times for those attending the focus groups. Focus group participants stated pharmacies that deliver are very beneficial to seniors in Sussex County.
According to the discussion at several of the focus groups, seniors sometimes have issues accessing non-emergency care due to lack of transportation, or the locations of physicians, or health care facilities. Although approximately 70 percent of the respondents felt they did not have an issue with accessing non-emergency medical care in Sussex County, which is a 5 percent decrease when compared to the 2012 survey results. Less than 1 percent of the respondents sometimes or frequently have a problem accessing non-emergency medical care.

![Access to County Non-Emergency Medical Care](image)

Six percent of the respondents from the 2012 focus groups often had difficulty when they were discharged from hospitals, or health care facilities to access the services that are required in their discharge instructions. Often times it was a general lack of services that were available, or qualified staff in a specific area that could provide the required services. Slightly less than half of the seniors surveyed (41 percent) in 2015 had no problem in accessing services that were ordered in the discharge plans and 53 percent did not respond, or identified not applicable. Only 5 percent sometimes had a problem accessing services, which was 1 percent less when compared to the 2012 survey results and 1 percent frequently had a problem accessing the services, which remained the same as the 2012 survey results. Only one of the seniors that attended the focus groups stated they had a problem, or issues in following the discharge instructions and that was due to the handwriting of the health care provider. The lack of services or the ability to access the services, especially in specific areas was not mentioned in the focus groups, while in the 2012 focus groups it was a concern that was mentioned multiple times.
Independent Living

Activities of daily living include such items as dressing, toileting, eating, functional mobility, along with personal hygiene and grooming. The majority of the respondents (88 percent) reported that they did not need assistance, or have a problem with their activities of daily living (ADL), which was a 2 percent decrease when compared to the 2012 survey results. Less than 1 percent of the respondents reported that they sometimes had a problem with their ADL’s, this remained the same as the 2012 survey results and less than half of one percent stated that they frequently had a problem with daily living issues, which was a slight decrease from the 2012 survey results. Overall when compared to the 2009 and 2012 survey results it appears that the seniors continue to have a better ability to take care of themselves now than in previous years.
Many of the participants reported a greater need for assistance with maintenance issues with their homes than assistance with activities of daily living. Most of the survey respondents (21 percent) reported that they sometimes have a problem with snow removal, small repairs and lawn maintenance, when compared to the 2012 survey results, this is a 1 percent decrease. Only about 12 percent of the respondents reported that they frequently have a problem with these maintenance issues, which was the same when compared to the 2009 and 2012 survey results. A large majority of participants attending the focus groups did note that they can maintain their homes, but they have assistance from other people, or pay to have the services completed. They stated that at times it is difficult finding the availability of a contractor or someone to complete the maintenance repair, even when the individual is being paid to complete the service.

Focus Group Response

Household chores within the home did not present as much of a problem as home maintenance. Only 15 percent of the respondents reported that they sometimes have a problem cleaning their home, when compared to the 2012 survey results, this is a 5 percent decrease, while 5 percent frequently has a problem with cleaning, which was
more than a 4 percent increase. Overall 73 percent stated that cleaning their home was not a problem. Overall when compared to the 2009 and 2012 survey results it appears that the seniors have a better ability to clean their home now than in both 2009 and 2012. Most of the participants in the focus groups stated they can maintain their house but do require assistance, especially with mowing the lawn and shoveling.

Based on the limited income level of seniors combined with the overall cost of living and medical expenses incurred it is often difficult to maintain one’s home, or to obtain affordable assistance with their home maintenance issues (Elder Economic Index, 2012). This was the case in point with the respondents from this survey in which 20 percent reported that they sometimes had a problem with the ability to pay for home repairs (which increased by 2 percent when compared to the 2012 survey) and less than 1 percent frequently had a problem with the ability to pay for home repairs, which remained the same when compared to the 2012 survey results. Over 65 percent of the seniors did not have a problem with the ability to pay for home repairs and maintenance issues, which is a 14 percent increase when compared to the 2012 survey results.
Increasing age brings the increased likelihood of disability, which is attributed to people living longer and not encountering fatal diseases, however their illnesses are chronic instead (Chappell & Cooke, 2010) As the elderly age in place, the need for assistance and supportive services will be provided by family members, mainly their children and other relatives, with some assistance from community-based programs. A caregiver is someone who provides care for the physical and emotional needs of a family member or friend at home. Family members play an important role in the long-term care of the chronically ill and disabled older adults. A senior may need to receive care and they may also need to provide care to a disabled child, or have full responsibility of a minor grandchild. Often times caregivers are providing care to love ones and don’t realize that they are providing the care. The average length of time a caregiver has been providing caregiver services is 5 years or more. Less than 1 percent of the respondents of the survey are over the age of 60 and provide care to an adult over the age of 60 where it is sometimes or frequently a problem, while the remaining 94 percent did not provide care, or the care provided was not a problem. Almost three quarters of the seniors that attended the focus group do ask family and friends for support and assistance when it is needed. Only 2 percent of the respondents sometimes, or frequently have an issue with providing care to a disabled child, which is a 1 percent increase when compared to the 2012 survey results. Less than 1 percent of the respondents sometimes or frequently have a problem being a caregiver for another person. Often times the problems connected with providing home care by family caregivers includes the lack of time, disability of the elder and locomotion difficulties (Sierakowska, etal: 2014).

![Providing Care to an Older Adult (Age 60+)](chart)

**Services and Programs**

Transportation continues to be a major need in Sussex County for all ages not only seniors. Seniors utilize transportation in Sussex County for medical care, grocery shopping, errands and visits to the congregate nutrition sites. The ability to transport seniors to their destination can be a complex task but only 10 percent of the survey respondents reported that they sometimes had a problem being transported for medical appointments, shopping, etc, which when compared to the 2012 survey results was a 1
percent decrease. Seniors that frequently had a problem with being transported was 4 percent, while in 2012 it was less than 1 percent.

Focus Group Response

Accessing the transportation services (including bus, rail and taxi services) can also impact a persons ability to utilize services. Despite the increase demand for transportation services in Sussex County in the last few years 5 percent of the respondents reported that they sometimes had a problem using public transportation and 5 percent frequently had a problem using public transportation, which for both was a 4 percent increase when compared to the 2012 survey results. Slightly over three quarters of the respondants (78 percent) did not experience a problem using public transporation. The overall demand for services can be attributed to the current economic conditions, the cost of fuel, mainenance, repairs and the increase of seniors who are aging in place, thus requiring the need for such services. The participants attending the focus groups did not express concern for fuel costs, or the cost of insurance which was a major concern in 2012. The lack of evening and weekend transporation continues to be a major issue in the area of transportation in Sussex
Most of the seniors have the ability to drive their vehicle where they need to go with the following exception: when it is dark; during inclement weather; they become ill; or require transportation out of Sussex County for either recreation or medical appointments. A third of the respondents in the focus groups rely on family and friends for transportation. Certain areas of the county lack public transportation services, thus making it more difficult for seniors to utilize services and get out of their homes. A large percentage of the respondents from the focus groups stated they would use public transportation services if they were available to them, but the availability is limited throughout the County, especially in the outer areas.

Focus Group Responses

The Division of Senior Services has increased marketing efforts to promote the available services and programs for seniors and/or their caregivers. Providing information on the services to individuals will provide them with the knowledge of what is available and where to turn if the need arises. The respondents in this survey do not seem to have a problem (65 percent) of knowing where to turn for information on benefits, services, or programs for seniors, when compared to the 2012 survey results.
this was a 2 percent decrease. Only 16 percent sometimes have a problem (a 4 percent decrease when compared to 2012) and 6 percent frequently had a problem (over a 5 percent increase when compared to 2012 survey results) of where to turn in order to find the appropriate information or services.

**WHERE TO OBTAIN INFORMATION**

- Not Applicable: 4%
- Frequently a Problem: 6%
- Sometimes a Problem: 16%
- No Response: 9%
- Not a Problem: 65%

**Other Issues of Concern**

Adults of any age can have problems with alcohol, even older adults who in general don't drink as much as younger people (NIH Senior Health, 2015). As individuals age, their bodies change and they can develop health problems or chronic diseases, thus taking more medications. All of these changes can result in alcohol being a problem for older adults (NIH Senior Health, 2015). According to the survey one percent of the respondents frequently had a problem with substances/alcohol that affected their daily life and one percent of the respondents sometimes had a problem with substances/alcohol. Ninety eight percent of the respondent did not have a problem, or was not applicable, or had no response. The question regarding substances/alcohol was added for the first time to the 2015 Need Assessment Survey.

**DOES SUBSTANCES/ALCOHOL AFFECT YOUR DAILY LIFE**

- No Response: 35
- Not Applicable: 220
- Frequently a Problem: 3
- Sometimes a Problem: 6
- Not a Problem: 226
Mental health is essential to one’s overall health and well-being. Mental illness can affect one in four individuals in any given year, regardless of age, religion, economic status or race. Effective treatments are available, but less than one third of the individuals receive mental health services (Sussex County Mental Health Plan, 2013). According to the survey only 6 percent of the individuals stated they sometimes have a issue with mental health symptoms that affect their daily lives and 1 percent frequently have a problem. Ninety three percent of the respondent did not have a problem, or was not applicable, or had no response. The question regarding mental health was added for the first time to the 2015 Need Assessment Survey.

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Findings and Recommendations

The results indicate that the majority of seniors who responded to this survey do not have a problem of knowing where to turn for information on benefits, services and programs. Barriers still exist to access service availability, even though processes have been made to overcome this. The Department of Human Services, Division of Senior Services along with other providers of services for seniors need to continue to outreach to seniors, the disabled and/or their caregivers to publicize and promote the services and programs that are available.

A majority of respondents to this survey indicated transportation continues to be an important need and those utilizing public transportation do not have a problem accessing the needed service. In addition, transportation can be considered to be a significant reason for not being able to access services, including health care, especially when out of Sussex County. Older adults’ ability to maintain independence in the community is predicted by adequate transportation and the ability to afford the transportation. In Sussex County, transit is often the only way for some elderly and disabled persons to access health and social services, and other essential needs. Evaluating and modifying routes for efficiency and effectiveness has helped to make transportation more accessible and available for those in need and living in remote locations throughout the County.
Slightly less than a quarter of the respondents to this survey had an income of less than $15,000, and almost two thirds of respondents indicated owning their own home, which was over a 10 percent increase in home ownership when compared to the 2012 survey results. Overall, survey results since 2006 show the number of seniors earning less than $15,000 annually continues to decrease in Sussex County (approximately 50 percent from 2006 to 2015). Seniors who own their homes continue to face financial difficulty with property taxes not only in Sussex County but throughout the State of New Jersey. Many healthy seniors do not have enough income to meet their monthly living expenses, without utilizing and paying for home and community based long term care services for those who have health issues. Approximately 1 percent of the seniors who responded to this survey expressed that they sometimes have a problem with the need for assistance with activities of daily living (ADL’s), which remained level when compared to the 2012 survey results. However, an even greater need exists for those who have trouble with home repairs, or maintenance, along with the costs and expenses that are associated with affording these services. The majority of respondents indicated cleaning gutters, raking leaves, mowing the lawn, and shoveling snow to be the most difficult to do and the most difficult to receive assistance with, often paying to have the tasks completed. It is also the small tasks that can be a challenge for older adults like changing a light bulb, vacuuming, or taking out the garbage. Less than 1 percent of the respondents, who were over the age of 60 needed care and assistance from others, again this remained level when compared to the 2012 survey results.

The elderly population is directly impacted by health care cost since they utilize a high percentage of health care services and prescription drugs. According to the Center for Medicare and Medicaid Services, about 60 percent of people over 65 will need some type of long term care assistance during their lives (2005). The average cost of a nursing home with a semi-private room in New Jersey is about $82,125 (MetLife, 2012). Many individuals are unable to afford these costs and do not have an adequate support system or services to remain in the community. Seniors who are living on fixed incomes
are finding it increasingly more difficult to age in their community with dignity. While the large majority of the respondents to this survey responded that they have adequate health and prescription coverage they also responded (less than a quarter) that they are more likely to have problems keeping up with medical costs due to premiums and out-of-pocket expenses, combined with their other living expenses. Providing information, assistance and support through the State Health Insurance Program (SHIP) and counseling seniors on the income eligible prescription programs could assist seniors with some relief with medical and prescription costs, along with understanding the paperwork process involved with insurance. Sussex County has made an impact in the last two years by providing information and assistance for low-income individuals to obtain assistance with Medicare premiums and prescription assistance programs for those that qualify through MIPPA (Medicare Special Benefits Outreach and Enrollment Assistance).

The top priorities that emerged throughout the needs assessment and focus groups for seniors in Sussex County were:

- Affordable housing for individuals 60 and older. In the area of affordable housing the Division of Senior Services continues to support community efforts by advocating for these much needed services.
- Home maintenance/repairs for homeowners. Additional funding was provided in the 2016 Area Plan in regard to residential maintenance. The Division of Senior Services will advocate and leverage for additional funding in this area to provide assistance and support to elderly homeowners that are unable to afford the necessary repairs and maintenance to their homes.
- Transportation to access health care, food, shopping, social services and other needs of older adults. The Division of Senior Services will continue to be a strong advocate in the area of transportation by seeking additional funding and coordinating services with Skyland’s Ride.
- Nutrition programing including congregate nutrition, home delivered meals, meal preparation and food shopping assistance. Shared Service Agreements will continue with local municipalities and programming will be increased at each of the locations to increase awareness and attendance. The Division of Senior Services will continue to advocate for the home delivered meal program and assisting the provider to seek additional funding for the program.
- Health and wellness services will continue at various locations throughout the County and at special events provided by the Division of Senior Services. Evidence based programs will continue as the central focus. Additional funding will be sought to continue and enhance the programs.
- Caregiver support services. The Division of Senior Services will continue to advocate and reach out to seniors, the disabled and/or their caregivers to provide them with information and support that will allow them to live independently in the community while maintaining a dignified quality of life.

The Division of Senior Services will continue to be a strong advocate in all of the priority areas by allocating and leveraging funding within the Area Plan and other possible funding sources in regard to transportation, residential maintenance and the other areas. The funding will not cover all of the gaps in services in these areas, but it
will help some of the individuals that are in need of the services, while continuing to maintain their independence within their home and community.

Some of the major challenges to overcome would be adequate transportation in and out of the county, affordable housing and the access to services. Implementing and coordinating the need for these services into the planning process for 2016 and beyond through the Area Plan process will assist in making a lasting impact in Sussex County.
References


